Long Delayed Reformation of the AOA Now
A Glad Reality

TWO features of outstanding importance marked the twenty-third annual meeting of the American Osteopathic Association held at Hotel Sherman, Chicago, June 30th to July 3d.

An entirely new form of government was adopted and put into immediate effect which revolutionizes and modernizes the work of the AOA. Dr. Wm. Allen Gravett of Dayton, Ohio, was elected secretary of the AOA as successor to Dr. Harry L. Chiles, who has filled the office for so many years.

Another fact of prime importance was the decision of Dr. Hugh W. Conklin of Battle Creek to succeed retiring President Fryette, thus guaranteeing a continuance of the progressive attitude as if state societies did not now exist.

This gave rise to a serious attitude of competition between our national and state organizations which, under the old plan of organization and intervertebral foramina changes unimportant things even to mention. The only way to understand a convention treat such as this was to come to see and hear it, but of course the papers will be presented in the Association Journal's issues for the year ahead.

Another innovation was the decision to hold next year's meeting in Chicago again. This was done to test out the advantage of having the same set of arrangement chairmen and committees make the plans two or more years in succession. It is believed—as no doubt is true—that after a committee of arrangements has gone through the task of entertaining one convention, it has just learned how to do the job properly, and if given the work a second year in succession, or for a term of years in succession, would no doubt make a much bigger success of the second and each succeeding effort. The Chicago profession spoke seriously of wishing the association to make the test of coming back to Chicago for a term of three to five years, looking forward possibly to establishing permanent headquarters here (as the A.M.A. has done), if the plan of holding successive conventions in the same city worked out as well as it is believed it will.

The main objection to such a plan would be the annual tax it would throw upon Chicago osteopaths for entertainment, the tax this year having been $80 per person, but that could be easily obviated by some plan to finance the entertainment through the AOA itself, whose revenues are ample to meet all its just and legitimate expenses, and surely the work of holding its own conventions successfully and paying whatever it costs to do so is one of the first and most necessary expenses of the national organization.

AOA Officers

New officers elected by the AOA for the ensuing year—the last officers, it is expected, who will ever be elected by the general convention, owing to the creation of a new House of Delegates which will take over that function at the next meeting—were as follows:

President, Dr. Hugh W. Conklin, Battle Creek, Michigan; 1st vice-president, Dr. J. W. Elliott, Cordele, Georgia; 2nd vice-president, Dr. Janet M., Kerr, Toronto, Canada; secretary, Dr. W. M. Gravett, Dayton, Ohio; treasurer, Dr. Harry L. Chiles, Orange, New Jersey. Trustees: Dr. W. F. Link, Knoxville, Tennessee; Dr. Geo. W. Goode, Boston, Massachusetts; Dr. Jennie Alice Ryel, Hackensack, New Jersey; Dr. Frank Hunter Smith, Indianapolis, Indiana; Dr. Herbert F. Morse, West New York, New Jersey.

A new editor for the Journal of the Association to succeed Dr. Chiles remains yet to be chosen.

Program Was Great

Chairman Conklin made a fine success of the program. It went off as scheduled with very few changes owing to absences. There were so many good features that we will not attempt to particularize. In the corridors, however, are heard special praise for Dr. James D. Edwards' "Diagnosis of the Submerged SUBLUXATION by the Galvanometer," Dr. Joseph Swart's "Osteopathic Strain Technique," Dr. A. A. Gour and Dr. Evelyn R. Bush's "Corrective Gymnastic Exercises," Dr. H. V. Halladay's "Dissected Specimen of the Spine," which made it possible to show vertebral movement and intervertebral foramina changes under manipulative treatment; Mr. Patterson's talk on "How to Nationalize Osteopathy"; Dr. Azden's definition of osteopathy; the exhibits, McCann's table and—oh, well, there were too many notable things even to mention. The only way to understand a convention treat such as this program was is to come to see and hear it, but of course the papers will be presented in the Association Journal's issues for the year ahead.

Our Flu-Pneumonia Symposium Is Entirely Omitted from This Number to Allow for Convention News. Send in your flu data for next issue.
How the Constitutional Convention Resulted In a New AOA Government

The committee appointed at Boston presented a good practical constitution and by-laws to the Constitutional Convention called for Friday and Saturday before the AOA meeting.

Chairman Upton's forces showed that it not only was not dangerous, but that it was now necessary and offered the real cure for the now have any right to vote directly for the president of the United States, but only for electors who later select his choice. Dr. Hildreth thinks he is disfranchised in this American commonwealth. Dr. Hildreth does not own stock or bonds in any corporation, and, in which all the stockholders attempt to run all the business. The Macon San is not run that way. It was finally decided by the convention that this provision will be abused. The Macon San is not run that way. It was finally decided by the convention that the day had now come when it is necessary to curb the orators and vouchsafe of the rule by the celerity to our national society instead of continuing the rule of the solar-plexus—to clip the wings of the spellbinders in our deliberative sessions and exalt to greater importance the judgment of the more quiet but the more vigorous and deep analytical thought.

The effort to impose a referendum amendment on the new instrument and provide for an appeal from the House of Delegates to the open convention was championed particularly by Dr. Hildreth, Dr. Meacham and Dr. Murray Graves. These argued that it was a very dangerous thing to delegate the settlement of all the great questions of the profession to any one body of executives whose decisions would be final and binding upon the profession.

Chairman Upton's forces showed that it not only was not dangerous, but that it was now necessary and offered the real cure for the present fatal disease of not being able to get business properly done by conventions of a thousand persons assembled. It was not dangerous because it is the universal practice in all modern government, in business and in all human activities. It has long been recognized that the way to get something difficult decided and arduous labors performed is to specialize somebody in the responsibility of doing work and let him get it and finish it up. Everybody's business is nobody's business and is never properly done.

The plan proposed by the committee for AOA government is the plan followed by the governments of America, Great Britain, France and all democracies. The people elect their members of congress, senate, parliament and legislature, and these make the laws for us which we must obey, and impose the taxes which we must pay, and vote the wars which we must fight and finance to a finish. Instead of losing influence in national association policies the membership, under the new laws, would chose their representatives to the House of Delegates to mould and make decisions for them.

Chairman Upton declared that it was equivalent to disfranchising the membership of the AOA and not to let them have the voting rights they have, as of yore, by direct ballot at the convention.

He was answered that he himself does not
THE OSTEOPATHIC PHYSICIAN

What A Year Has Done for Osteopathy

Address of Dr. H. H. Fryette, Retiring President, at the 23rd Annual Meeting of the American Osteopathic Association, Chicago, June 30th-July 5th

This the twenty-third annual Convention of the American Osteopathic Association marks the beginning of a new era in Osteopathy. The year just closing has been not only the greatest in Osteopathic history, but probably the greatest in world history. The world as a whole is beginning a new era, and we are ready to start with it.

When we were holding our Convention in Boston last year, the Allies were staring defeat in the face. Germany was putting forth her last and almost superhuman efforts to crush them; but in the World War, as in every other great issue, right prevailed. From a professional standpoint we were facing a situation almost as grave, as far as our professional life was concerned, as the situation the Allies were facing was to their national life.

Our government had refused us the right to serve our country as physicians in the capacity for which we were best fitted, and were drafting our practitioners into regular private service. Our students were denied the right of furlough to finish their professional courses that had been granted the students of the "regular" medical colleges, and instead of students flocking to our colleges to avoid army service, as they did in the schools of regular medicine, our students were drafted. The majority of our colleges were on the way to bankruptcy. We were unable to pass our congressional bill granting us the right to co-operate in every way possible with the Allied Governments in the World War, as in every other great issue, right prevailed.

Fortunately the war is over, and our students are not only returning with a greater faith in Osteopathy and a greater desire to relieve human suffering through it, but our colleges are receiving the greatest number of inquiries from prospective students that they have ever had.

Epidemic Brought Its Opportunity

No review of the past year would be complete that did not cover what was perhaps the greatest epidemic curse that ever visited the earth. The disease which was popularly called the "flu" has, since the beginning of the war, destroyed more than three times the number of people that met their death as a direct result of the war. The medical profession the world over has been absolutely helpless in treating "flu" and flu pneumonia. I have yet to find two allopathic physicians who treated it in the same way. Many so-called specific anti-toxins were devised and recommended by our health authorities, only to be classed as worthless later. This horrible epidemic gave Osteopathy its greatest opportunity. We did not know a specific anti-toxin that we could inject into the body to kill the infection, but we did know how to produce a physiological phagocytosis, and how to assist the organs of elimination. When we did that, more than 90% of the cases we treated recovered—a most remarkable record.

The Lesson of Service

Perhaps the greatest lesson the war has taught us is the value and privilege of service. We must apply this lesson to our professional life. If our science is to grow as it deserves to grow, its practitioners must co-operate in every way possible.

"Cast your bread upon the waters and after many days it will return to you" is as true today as it was nineteen hundred years ago. I am a thorough believer in this saying, and I do believe that no osteopathic physician ever spent any time or money toward the upbuilding of his profession that sooner or later he or she was not abundantly rewarded both mentally and financially.

Our System of Fees All Wrong

For years I have felt that our custom of charging for our services at so much per treatment is fundamentally wrong. I am not entirely satisfied that this is the proper place to bring this up, but it is certainly a question that interests all of us, and therefore I believe it should be discussed here. The majority of our work is not similar to that of the general medical practitioner, but is more like the work of the surgeon. Some cases are very simple while others are very difficult; some patients are very poor and some very rich. For us to charge all classes of people the same for all classes of cases is absurd as it is for a surgeon to charge a shopkeeper the same for opening a boil as a millionaire for the removal of the Gasserian ganglion.

The most important feature of this matter is that our method of charging is undignified. It does not only belittle the practitioner, but it belittles our science. It allows the public to think that a treatment is a treatment for all cases, something that can be ground out in about so many minutes.

I am delighted that the time has come when we can adopt a new Constitution and By-Laws.
When the American Osteopathic Association was first organized there were but few state and local organizations. Therefore the national association had to be organized as an independent association instead of an amalgamation of all the local and state societies. Hence it has been conducted independently of those societies, and sometimes I am afraid in competition with those societies in effect, although that was never the intention. All of our societies have been more or less hampered in their work because of this lack of co-operation. Our old Constitution and By-Laws have been amended from time to time—sort of patched up, as it were, but the thing we need is a whole, new, practical business suit.

A Constitutional Convention was called and each state and provincial president was asked to appoint two delegates from his society to represent that society at this convention. These representatives have worked long and hard in preparing the new Constitution and By-Laws. It is my hope that this new Constitution and By-Laws will increase efficiency and co-operation, and thereby stimulate the growth and development of our science. 

**Problem of Arrested Growth**

We have been facing a situation for several years that was simply made more acute by the war. Our practitioners have made good from the first. Osteopathy has been demonstrated to be a science, almost an exact science, but for several years we have not grown in numbers as we should have grown. What is the reason for this? It is the opinion of your humble servant that it is very largely due to two things: to the lengthening of the college course and to the inadequate legislation that governed the osteopathic graduate.

As osteopathy developed, it became apparent to nearly every one who did not look upon the proposition as a commercial proposition from the school standpoint, that it was necessary to raise our entrance requirements and increase the length of the course. There are some of our older practitioners who still think this should not have been done, but it is my opinion that they do not stop to consider how little they knew when they graduated and how much they have learned since. I am of opinion that those who hold to this belief unconsciously not only belittle our science, but our venerable founder, Dr. Still, as well. Dr. Still knew that there was more to osteopathy than was taught in those early days. He said: "Now, boys, I have the squirrel by the tail; it is left to you to pull him out." As the squirrel comes out, as more and more osteopathic facts are discovered and correlated and applied, it must of necessity take longer to teach these facts, their correlation and application.

**Must Make Stand for the Unlimited License**

With but few exceptions our experience has taught us that we can handle our affairs and promote our development very much better under an independent board of osteopathic examiners than under a composite board. We should emphasize this feature in prospective legislation as has been done, but I regret exceedingly that we have not laid more stress on procuring laws that give our practitioners the unlimited license.

The students in our Osteopathic Colleges do as many hours' work, over the same period of years, study the same subjects, with the exception of Materia Medica, for which Osteopathic Therapy is substituted, as the students in Rush Medical College, but in a very large majority of states these students are granted only a limited license to practice, which brands them as half-baked and uneducated.

The days when students flocked to our colleges with a religious fervor are pasted, the novelty is gone, it is a cold business proposition now. The average young business man does not like the idea of spending the same time and money in our colleges as he would have to do in an M.D. college, and then being handed a limited license to practice. The result has been that many young men have gone into regular medicine, or have been persuaded to take a short course in a false school, who would have studied osteopathy if they could have obtained the license and been
And a man said to me: "If Kirksville is such a factor in osteopathic affairs, why not bottle the very air and water of the place and serve it on tap elsewhere?"

But I came back at him like a flash and replied: "Twenty-five years of college service, with the teaching experience it brings and with the growth it makes possible in scientific work, mean as much, or more, to a school than a fairly large money endowment.

"There are things which enter into the make-up and conduct of a college that money cannot buy. Loyalty to ideals is an example. Osteopathic conviction and esprit du corps also are of this class. Such invisible things of the spirit are not measurable in dollars. Kirksville is rich in this kind of inheritance. The American School of Osteopathy is legatee to the personal life-work of our revered Founder, and as such is in position to excel in many respects because of the very vastness of its opportunity and privilege.

"Yet not only has it age, experience and prestige, which count so much in successful school life, but it possesses by far the greatest money investment in real estate and equipment and it spends each year very much the largest sum of any school in the profession for its teachers, laboratories and other operating expenses. Its available money income is equivalent to better than a million dollars of endowment money. The profession could not hope to set up a new institution and achieve for it an equal amount of advertising good-will by the expenditure of many millions of dollars."

Here, then, is a fortunate college having back of it age, experience, prestige, brains, money, principle and unchallenged loyalty to osteopathic therapy—all combined and applied in its make-up and operation. It is the school which should appeal to you for all these reasons when directing your prospective student friends this summer in the selection of a college to enter. Think it over.
The Osteopathic Physician

Quotations from Dr. Geo. W. Riley, New York, Before the 23rd Convention of the American Osteopathic Association, Chicago, June 30th-July 3d

Are You Protected by Central's Accident and Health Policy?

When you buy insurance, buy the best that can be had.

Central's Accident and Health Policy pays $5000 for accidental death. It pays $25 a week for total disability from either accident or sickness. The cost to you is only $40 annually or $10 quarterly.

Now, doctor, you cannot afford to be without this protection. Our company pays promptly and without red tape. Drop us a line and we will be pleased to give you further details about Central's policy.

Central Business Men's Association
Westminster Building, Chicago, Ill.
H. G. ROYER, President
C. O. PAULEY, Secretary and Treasurer

Osteopathic Power Over Flu-Pneumonia

As you know, a letter containing a blank questionnaire on Flu and Pneumonia was sent last November to all practicing Osteopaths in the United States and Canada. Striking and emphasized instructions were given to report only definite and well-developed cases, and to report all such, together with all fatalities. Several follow-ups were sent to appeal for reports.

All told, 2,445 Osteopathic Physicians have reported, every state and every province of Canada being reported.

These 2,445 Osteopathic Physicians, representing every section of the country, the small towns as well as the large cities, report having treated 110,122 cases of epidemic Flu with only 257 deaths, or a mortality of only one-fourth of 1 per cent.

These osteopaths also reported having cared for 6,558 cases of epidemic Pneumonia with only 625 deaths, or a Pneumonia mortality of only 10 per cent. Some fifty of these deaths occurred within twenty-four hours after the Osteopathic Physicians were called.

This comprises a sufficient number of cases to warrant intelligent and conservative conclusions and comparisons.

Taken by themselves, these figures show that in every 1,000 cases of Flu treated osteopathically only 9.2% died. This means that in every 4,000 cases of epidemic Pneumonia, only 100 died. In other words, if you were stricken with Flu, there were 400 chances-in-1 of your recovery if you were treated osteopathically; but only 19-to-1 in favor of your recovery if you were to be treated medicinally; and if you lived here in Chicago and were under medical care, your chances of recovery would be only 6-to-1, while if you lived in New York City your chances would be only 9-to-1.

Now if you had epidemic Pneumonia and were being treated osteopathically you would, according to the above statistics, have 9-chances-in-1 in favor of your recovery, but if living here in Chicago and you were being treated medicinally, your chances would be only 3-to-1, while in New York City there would be only 2 chances in favor of your recovery against 3 for your death.

Representing the osteopathic profession, Mr. President, I make announcement of these figures with no boasting air, but with an humble and respectful spirit that we were unable to keep the mortality down to such more normal level of 3 per cent in Pneumonia.

Osteopaths Proved Injustice of Their Rejection for War Service

Osteopathic Colleges and that is an unlimited license for us. Until the time comes when these matters are properly adjusted, every member of the profession should constitute himself or herself as a committee of one to recruit students for our colleges, laboratory, and police movements for our hospitals, for without our colleges the science can not live.

We are thankful to God and the Allied Armies that the war is over. We are thankful that we have been tried and not found wanting in the gravest epidemic that has ever visited the earth. We are thankful for the great feature that lie before Osteopathy and a greater opportunity to serve suffering humanity, and I am thankful to every member of this Association for the cordial cooperation given your officers during the past year.

Late Pandemic More Destructive Than Battle

Picture, if you can, a world service flag of sufficient proportions to include an ordinary sized star for each soldier and sailor mobilized by the several belligerent nations in the great world war. Some 41,133,650 stars would be on that flag—7,583,200 would be gold stars, representing that many battle deaths. This slaughter covered a period of practically four and a half years.

The Flu-Pneumonia Pandemic—including the recrudescence-covered a period of only about six or eight months, yet within that time there was hardly a family in the whole world in which some member, immediate or remote, was not stricken. Estimates have been made that 10,000.
To develop the best there is in a student is the great, paramount duty of a teacher.

The College of Osteopathic Physicians and Surgeons

[Controlled and Operated by the California Osteopathic Association]

has kept this important fact constantly in mind while forming its staff of educators. Step by step its faculty has been developed by intelligent selection until today it represents a teaching body of highest capacity in which every member is distinctly fitted for his work by temperament, knowledge, and experience. The native ability of the student is sympathetically considered and given every encouragement.

Faculty Members—Their Qualifications and Subjects:

(Continued from last issue)

Teaches Osteopathic Technique.

ARVIN BENJAMIN SHAW, JR., B.Sc, University of California, 1910; J. D., University of California; 1911; Instructor in Laboratory Biology and Entomology in same, 1910-1911; Instructor in Economic Entomology, 1911-1912.
Teaches Medical Jurisprudence.

EDWARD STRONG MERRILL, D.O., Pacific College of Osteopathy, 1907; A.B., Beloit College, Beloit, Wisconsin, 1902; Post Graduate work in Bacteriology and Pathology, University Southern California, 1908; Post Graduate work Boston Psychiatry Hospital, 1914; Post Graduate work in Latin and Greek, Lawrence University, 1903-1904; Instructor in Latin, Occidental College, 1904; Instructor in Demonstrative Anatomy, Pacific College of Osteopathy, 1907.
Teaches Psychiatry.

ROYAL H. CHRIST, D.O., Pacific College of Osteopathy, 1910; A.B., University of Southern California, 1898; Professor of Pathology and Bacteriology, Southern California Post Graduate College of Medicine, 1911-1913.
Teaches Pathology.

JOHN ADAMS COMSTOCK, D.O., College of Osteopathic Physicians and Surgeons, 1915; Registrar and Secretary of the Faculty, College of Osteopathic Physicians and Surgeons; Fellow of the (Royal) Entomological Society of London; Secretary Entomological Society, Chicago, 1898; Instructor, Nature Study Roycroft Summer School, 1904; Curator of Entomology, Southwest Museum, Los Angeles, Cal.
Teaches Laboratory Anatomy, Embryology, Hygiene.

THOMAS JOHAN OTTO VOLKMAN, D.O., Los Angeles College of Osteopathy, 1908; Treasurer of the Practical Research Society of New Zealand, 1898-1904.
Teaches Metabolic Diseases.

THOMAS CARLYLE YOUNG, D.O., Los Angeles College of Osteopathy, 1909; one year internship in same, 1910; M.D., California Eclectic College, 1914; Clinical Course, Los Angeles County Hospital; work in Murphy Clinics, Chicago, and Mayo Clinic, Rochester, 1913 and 1915; New York Post Graduate and Bellevue Hospital, 1918.
Teaches Surgery of Neck and Thorax.

LOUIS T. HULL, D.O., Los Angeles College of Osteopathy, 1914; Post Graduate College of Osteopathic Physicians and Surgeons, 1917.
Teaches Osteopathic Technique.

NORMAN G. STEWART, D.O., Pacific College of Osteopathy, 1910; Post Graduate Pacific College of Osteopathy, 1911; work in Mayo Clinic, Rochester, Murphy’s and Ochsner’s Clinics, Chicago, and in the Chicago Hospital for Crippled Children; Professor of Digestive Diseases, Pacific College of Osteopathy, 1912.
Teaches Alimentary Diseases.

ERNEST GEORGE BASHOR, D.O., College of Osteopathic Physicians and Surgeons, 1915; Intern, Los Angeles County Hospital, 1916-1918; Assistant Supervising Obstetrician, City of Los Angeles, 1918.
Teaches Infectious Diseases, Clinical Obstetrics.

FREDERICK A. GRIFFIN, D.O., College of Osteopathic Physicians and Surgeons, 1916; Post Graduate, same, 1917; Special Work in Bad Neuenhain, Germany, under Schott and specialty work in G. U. under Guyon, Paris, 1907.
Teaches Associate Nervous Diseases.

EDWARD BRANT JONES, D.O., Los Angeles College of Osteopathy, 1910; Work in Chicago Post Graduate Clinics, Alexian Brothers, Cook County and Augustine Hospitals, and at Bellevue and Fordham Hospitals, New York.
Teaches Genito-Urinary, Rectal Diseases, Surgery, Dermatology and Syphilis.

JAMES M. WATSON, D.O., College of Osteopathic Physicians and Surgeons, 1915; Intern, Los Angeles County Hospital, 1916-1918.
Teaches Laboratory Pharmacology.

Members of the teaching staff in the professional departments of the College of Osteopathic Physicians and Surgeons conduct clinics in connection with their didactic work. These clinics are open several hours each day. The total number of hours of clinical work given by the college is, therefore, much greater than is indicated in the outlined course of study. In each practice subject a minimum number of hours of clinical work is required of each student. After the student has credit for this minimum he may attend further clinics in any department he elects. Clinics are conducted during the summer vacation period and students may attend these without additional fee.

DR. R. W. BOWLING, Dean

300 San Fernando Bldg., Los Angeles, Cal.
The Osteopathic Physician

000 deaths resulted from these two diseases within that short six or eight months.

Do you grasp the full meaning of that statement? The world war lasted four and one-half years, during which time the majority of the people, including the greatest minds of the world, were devoting their entire efforts to the destruction of their fellow men. Billions upon billions of dollars were spent for that purpose. The result of that time, that energy, that money, was over 7,000,000 deaths from battle. But, great, as shocking, as horrifying as that is, it doesn't begin to compare with the destructiveness of those two diseases, Flu and Pneumonia, which, in a few months, it appears, killed something like 10,000,000 human beings, and no one can estimate the destruction and suffering that will follow from the insidious sequel.

Our National Government and the Insurance Companies have estimated that 500,000 of our own citizens lost their lives as a result of this epidemic. Our entire war casualty list, including not only every battle death, but every wound, every scratch that required a hospital dressing, did not reach 500,000. But these two diseases, in about one-third of the time covered by our casualties, destroyed 10,000,000 of our citizens—ten times our death list overseas, and almost twice our entire casualty list! Do you grasp the terrificness of this appalling fact?

Pandemic Fatalities Under Medical Treatment

WHAT lessons does this great scourge hold for us as physicians, and for the world, interested as it is in the comparative efficiency of the methods of treatment in vogue? Let us turn for answer to the ratio of deaths for both epidemic diseases under treatment of the allopathic physicians.

It has been extremely difficult to get accurate and complete information upon which conclusions can be based. In the first place, there are so many of the states in which Influenza and Pneumonia are not reportable diseases, and many in which even deaths are not compulsorily reportable, which precludes complete and accurate survey.

In the second place, it has been impossible to get replies from all of those from whom information was sought. Requests for information as to the number of Flu, the number of cases of Pneumonia, and the number of deaths from each, were sent to every State Health Commissioner and every City Health Commissioner of the different cities. One hundred and forty-eight replies were received. Many did not reply. Many reports received were incomplete for the reason that Pneumonia are not reportable diseases in some states.

Sufficient data, however, including reports from 24 State Health Commissioners, have been receivcd in the replies of those 148 Health Commissioners, together with the estimates of the National Census Bureau and the several Insurance Companies, to warrant the ultra-conservative estimate of 5 to 6 per cent of fatalities in Flu cases under allopathic care. In Boston the Flu fatalities, as reported by the Health Commissioner of that city, was one-hundred forty-eight to 68 per cent.

These reports also show a conservative estimate of 26 per cent of Pneumonia cases under medical care, and in some large centers it ran as high as 68 to 73 per cent! As officially compiled to date, the fatalities in epidemic Pneumonia in our Army camps is 34 1/2 per cent.

Chicago had 34,144 cases of Flu with 5,148 deaths, or a 14 1/2 per cent mortality. There were also 21,953 cases of epidemic Pneumonia, with 5,717 deaths, or a 26 per cent mortality.

In New York there were all of the 5,148 cases of Flu, with 15,883 deaths, or a 4/5 per cent Flu mortality, and 28,751 cases of epidemic Pneumonia with 18,382 deaths, or a 64 per cent Pneumonia mortality. These figures are not reportable in both cities these two diseases are reportable. What do those figures mean? They mean that in every 1,000 cases of Flu in Chicago, 145 cases died; in every 1,000 cases of Pneumonia in Chicago, 270 died; and in New York in every 1,000 cases of Pneumonia, 640 died, and that out of as many cases as our Army, 384, 800 died, and that the very flower of our young manhood.

Much experience under old-time medical care may well make the whole world eager to know the results obtained under osteopathic care, which are statistically stated as follows:

Osteopathy Could Save Millions in Insurance Losses

THIS data of osteopathic success in treating epidemic Influenza and Pneumonia is of extraordinary interest. One of the largest insurance companies—perhaps the largest measured by the number of policies in force—estimates that the amount paid out by the insurance companies in death claims due to Flu and Pneumonia amounts to over $100,000,000.

The War Risk Bureau estimates that the epidemic will cost the United States Government $150,000,000 in insurance money.

On the basis of the above mortality percentages, it can be truthfully said that osteopathic care of these cases would have saved to the insurance companies and to the United States Government, if the same principle applies to the Health Insurance Companies for according to the above reports, the sum saved in sick benefits under osteopathic care, would figure down conservatively to one-third of the sum actually paid under medical care.

No Osteopath Makes Drug Addicts

THEN, my fellow physicians, I wish to call attention to another very important reason for the use of drugs is the practice of medicine. There is not an Osteopathic Physician in this audience and not one among all these 3,400 physicians reporting epidemic cases who can not stand before his hometown, before the world with chest up, head erect, eyes beaming and a consciousness that not one in all that fortunate army of 110,000 patients treated osteopathically, has become a drug addict through any professional act of his, while bringing such patient through the most trying experience of all—is economically, healthily, and the results obtained under osteopathic care, which may well make the whole world eager to know the results obtained under osteopathic care, which are statistically stated as follows:

Don't Let Your Chronics get away because you don't know ORIFICAL SURGERY. Study it, and treat them yourself.

Dozen of our graduates and students write letters similar to the following:

School of Orificial Surgery, Inc.
Utica Building
Des Moines, Iowa

The Denver Polyclinic and Post Graduate College

Dr. C. C. Reid's Private Post Graduate Courses have been turned into The Denver Polyclinic and Post Graduate College, Course Number One, The Denver Post Graduate Osteopathic Efficiency Course and Course Number Two, Technique, Physical Diagnosis and Applied Anatomy all combined in one under one tuition, and will be given three or four times a year.

Next course begins Monday, August eleventh, and lasts four weeks. This is the first time the Efficiency Course has been given in the summer time. It will be a fine opportunity for those who have been desiring to get the course in the summer time.

All subjects covered in both courses will be taken in the one. Six to eight hours a day clinical and didactic work. A rapid review over the most vital subjects pertaining to practice. Efficiency will be running all through. Special emphasis along the business side of practice will be applied, such as legitimate publicity, charges, collections, the psychology of meeting patients, office keeping, records, planning, personal efficiency and so forth.

New quarters, better efficiency, equipment and everything given in the best way calculated to help the doctors do a bigger and better business.

Address Dr. C. C. Reid, 501 Interstate Trust Bldg., Denver, Colo.
A 250-pound patient on a 90-in-the-shade day with a fully equipped McMANIS TABLE. Oh, boy! Ain’t it a grand and glorious feeling! We’ll say so.

Modernize YOUR Equipment

You need a McManis Table and also our new treatment stool. They conserve your strength, treatments are more effective, patients are better pleased and your office has an up-to-date appearance that radiates success and gains confidence of all that enter it.

You may be strong and husky; but why waste your strength? If you are frail, then you need the help of a “McManis” more than ever.

Don’t waste another day. Drop us a line and let us show why the McManis Table and Stool will help you in your practice. If you don’t agree with us it won’t cost you a cent.

Two other attractive articles which we carry are the McManis Folding Table and cabinet for holding attachments for McManis Table.

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But each is different from every other baby, must be considered individually, and fed according to his individual requirements.

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MEAD’S DEXTRI-MALTOSE in 3 forms (No. 1, No. 2 & No. 3)

No. 1 With Sodium Chloride, 2
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Why different salts in the diet of infants?

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By the proper use of one of the different forms of Mead’s Dextri-Maltose in combination with a milk mixture suitable for the individual case, infant feeding attains a greater degree of success.

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in the treatment of constipation because he realizes that its causes are largely mechanical and that its treatment must be mechanical not medicinal.

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Nujol is non-absorbable, non-digestible, free from all impurities.

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THE OSTEOPATHIC PHYSICIAN

Eye-Ear-Nose-Throat Convention

By LeRoy Coombs

NINETEEN NINETEEN Eye, Ear, Nose and Throat Convention, held at Chicago College of Osteopathy, from June 23 to 27, inclusive. There were 250 members present. This Eye, Ear, Nose, and Throat Convention accomplished what almost no convention of like character has ever accomplished in the history of the world. The only purpose of the convention was to find the truth. They had their entire energies concentrated on the idea of finding what was best to do to cure and relieve the suffering. In humanity, prejudice, pet theories, regard for the other fellow's feelings had no power or influence. If a man knew something worth while to say he was listened to and commended, whether he thought him wrong he criticized and tried to show the mistake.

The programme was divided into morning and afternoon sessions. Those in the morning included examinations of a large number of clinical cases and their treatments. It also encompassed a great many surgical operations. Among those who demonstrated were Doctors Ruddy, Larimore, Moore, Seaman, Lynd, Marshall, Deason and Goodeffool. Dr. Ruddy did a cataract operation, sub-mucous resections and a number of tonsil cases under local anesthetic, using his own anesthetic.

In the afternoons papers were read and discussed in the manner of an open forum. The papers were presented by Doctors Ruddy, Read, Larimore, Goodeffool and Edwards. They all brought forth very lively and enthusiastic contentions and discussions.

The annual banquet took place at the Chicago Beach Hotel. It was a rip-roaring success. There were 300 of the members. A very charming toast was given by Doctors Ruddy and Goodeffool. The toastmaster.

Dancing followed the splendid dinner, with music by the best orchestra available.

Dr. Larimore was elected president for the coming year, filling the place of Dr. Deason, the retiring president.

The New Matter Is Set in Black Face Type

CONSTITUTION

ARTICLE I.—NAME

The name of the association shall be The American Osteopathic Association.

ARTICLE II.—OBJECTS

Section 1. The objects of the Association shall be to seek to promote the interests and influence of the science of Osteopathy, and of the osteopathic profession, by all means that will conduce to their development and establishment, that the perfecting of the science of osteopathy shall be a monument to the memory of its founder, Dr. Andrew Taylor Still, whose original researches have made osteopathy as a science possible.

The stimulating and encouraging of original research and investigation, and the collection and publishing of the results of such work for the benefit of the profession:

The elevating of the standard of osteopathic education and the cultivating and advancing of osteopathic knowledge:

The fostering and directing of a correct public opinion as to the relations of the osteopathic profession to society and to the State, and the providing for the united expression, frequently and clearly, of the views of the profession thereon:

The promotion of friendly emulation and social intercourse among the members of the profession, and of prompt and intelligent concerted action by them in all matters of common interest.

ARTICLE III.—MEMBERS

The membership shall consist of the present members, members of the Division Societies, and such others as shall be elected in accordance with the by-laws.

ARTICLE IV.—DIVISION SOCIETIES, AUXILIARIES AND BRANCHES

State or Territorial osteopathic societies, and societies of foreign countries and their provinces may become Division Societies; and such others as shall be elected in accordance with the by-laws.

The House shall be the business body of the Association, and shall consist of Delegates elected by the Divisions, and such other members as may be provided for by the by-laws.

The Board of Trustees shall consist of the officers and Trustees, excepting the Secretary, elected annually by the House to serve for three years. The Board shall transact the business of the Association.

The New Constitution and By-Laws of the AOA

The New Matter Is Set in Black Face Type

The Delaware Springs Sanitarium

Emphasizes Diagnosis, believing that a condition accurately diagnosed is half cured.

All modern facilities for diagnosis, as well as treatment, are found in our equipment.

Our institution has been inspected and endorsed by many of the best men in our profession.

THE DELAWARE SPRINGS SANITARIUM

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This new modern forty-two room hospital is now ready to receive patients. The building, which is absolutely fire-proof, was built of the best material obtainable and contains many conveniences, such as electric automatic elevator, etc.

There are thirty-five rooms which contain beds for patients, and two operating rooms—one for general surgery and the other for orthopedics.

An able staff has been secured to support Dr. Laughlin in the following departments:


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THE OSTEOPATHIC PHYSICIAN

BY-LAWS

PART 1

MEMBERSHIP—FEES AND DUES

Membership

Section 1. Applicants for membership shall be graduates of those colleges recognized by this Association under the regulations and restrictions in the States in which they maintain an office, where such license is required; shall be in good standing in Division Societies, where such Division exists; shall make written application on the prescribed form with two endorsements from members of this Association, and such application shall be signed by the applicant. If such application is satisfactory the applicant's name shall be published in the Journal, and if objections are received within thirty days, the Secretary, with the approval of the Trustees, shall enroll the applicant as a member and notify the Division Society of such action. If objection is made, the application shall be held, and the Membership Department shall make full investigation and report to the Board of Trustees for action.

New Graduates

Sec. 2. New graduates may be admitted to membership at the time of graduation, and may hold membership for one year before being required to become a member of their Division Societies or to become licensed in the State in which they locate.

Delinquencies and Reinstatements

Sec. 3. A member whose dues remain unpaid for two months shall become suspended and forfeit all membership privileges, but may be reinstated before the expiration of four months by payment of current dues; otherwise said member shall be dropped from the rolls and not re-enrolled until such time as another application is made. If upon such application, he shall also be dropped from membership in the Division Society.

Membership in Division Societies

Members in good standing in Division Societies and failing to do so shall be dropped from the rolls of the Division Society within thirty days, the Secretary, with the approval of the Trustees, shall enroll the applicant as a member and notify the Division Society of such action. If objection is made, the application shall be held, and the Membership Department shall make full investigation and report to the Board of Trustees for action.

Discipline

Sec. 4. Members shall retain the rights and privileges pertaining to membership in the Association so long as they comply with the by-laws, rules and regulations of the Association, and if charged with the violation of the constitution, by-laws, rules and regulations, or the code of ethics, or of grossly unprofessional conduct, may, upon investigation by the Trustees be suspended; and, further, may be cited to appear before the Board of Trustees to answer to such charges. If the charges are sustained he may be reprimanded, further suspended or expelled, as the Board may determine. A member whose name has been suspended or expelled on giving evidence satisfactory to the Board or purpose to comply with the rules of membership in the Association may be reinstated on evidence of having been placed in good standing in the Division Society. A member moving to another State must become a member of the Division Society of that State. Provided, that the double membership rule shall not be enforced as to single membership in the Division Society.

Penalties

Sec. 5. After three years membership, on payment of $150, a member shall be entitled to a life membership. Any violations. Any member charged with the violation of the constitution, by-laws, rules and regulations, or the code of ethics, or of grossly unprofessional conduct, may, upon investigation by the Trustees be suspended; and, further, may be cited to appear before the Board of Trustees to answer to such charges. If the charges are sustained he may be reprimanded, further suspended or expelled, as the Board may determine. A member whose name has been suspended or expelled on giving evidence satisfactory to the Board or purpose to comply with the rules of membership in the Association may be reinstated on evidence of having been placed in good standing in the Division Society.

Life Memberships

Sec. 6. The annual dues of members shall be $10, one-half of which shall be set aside for the exclusive use of the department of public affairs, and provided that the trustees may, in their discretion, reduce the amount of such endowment on the recommendation of the trustees, provided that such reduction at the time of graduation. Each application for membership made within three months prior to the time the year shall be accompanied by a fee of $10, which shall be credited as dues to the end of the succeeding fiscal year. All outstanding applications shall be accompanied by the fee of $10 for the first month from the date of the application to the end of the current fiscal year, which shall be credited as dues provided, that in no case shall such fee exceed ten dollars.

The fiscal year shall begin on June 1st.

Assessments

Sec. 7. To meet an emergency the Board of Trustees is empowered to levy an assessment on each member not to exceed the amount of dues for one year, the same to be collected in the same manner as the due and the failure to pay assessment shall affect the membership of member failing to pay in the same manner as failure to pay annual dues as herein below provided.

PART 2

DIVISION SOCIETIES AND AUXILIARIES

Section 1. Any State, Territorial or Foreign organization desiring to become a Division Society and constituent part of this Association shall submit a report of such action of its society authorizing the application for affiliation, and evidence that its constitution, by-laws and code of ethics conform generally to those of this Association; and a satisfaction of its society to the Division Society. Provided, that this section shall not become effective until adopted by two-thirds of the State Societies.

Sec. 2. The officers of such Division Society shall be the local officers of this Association in their district, and shall be obligated to the maintenance of departments in their Division conforming generally to this Association, and prepared to co-operate with such departments in all matters pertaining to their district; and to be responsible for the collection of dues of both societies, and for the building up and maintenance of the membership.

Districts

Sec. 3. Division Societies may be authorized to organize District Societies as constituent parts of the Division Societies, whose relations to the Division Societies shall in all respects conform to the constitution and by-laws of this Association.

Auxiliaries

Sec. 4. The student body of a recognized college may organize as an Auxiliary Society and make application for affiliation as such, and if accepted its members may participate in the workings of the Association, and be entitled to a house in the building of the Association without the amount of its per capita dues to this Association shall be fixed by the House.

Part 3

DELEGATES

Section 1. Each Division Society, at a regularly called meeting, shall elect or appoint such delegates, in a manner satisfactory to this Association, the number of delegates and alternates to the House of Delegates and the rules of the Association, and the manner of electing its members in good standing not less than sixty days previous to the annual session, issued by the Secretary of this Association. Such alternates must be in good standing in this Association, and must be furnished with proper credentials in a prescribed form. No member of this Association.

[Continued on page 18]
Summertime Emergencies

Vacation time is always attended by a host of accidents and injuries, the wounds of which in most cases become serious in proportion only to their neglect.

The automobile trip, or outing in the cool, refreshing woods; the visit to some favorite trout brook, or climb up some charming mountain trail, rarely ever fails to bring its quota of abrasions, cuts and surface wounds. Trivial or serious, neglect is the chief source of danger. Prompt and thorough antiseptic treatment is urgently necessary to avoid infection and its consequences.

For this purpose there is no antiseptic so serviceable and efficient in every respect as Dioxogen.

More potent in bactericidal power than any other antiseptic in safe and effective solutions, Dioxogen is also non-toxic and non-irritating. Add to these qualifications, its purity, stability, stimulating effect on wound tissue, and freedom from odor or color, and it is easy to understand why Dioxogen is so widely and generally used by physicians today whenever an antiseptic is needed.

The confidence of medical men in Dioxogen for all hygienic, prophylactic and first aid uses is well reflected by the care so many physicians take to have a supply with them on every journey—and to recommend their patients to do likewise.

The bottle of Dioxogen many a doctor has made a practice of keeping in his traveling bag, has often been the means of saving his own vacation, as well as that of others, from much discomfort, disaster—or worse.

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25 Pupil Nurses will be accepted at once by the Chicago Osteopathic Hospital

Standard Course, Excellent Training, Opportunity for Institutional Employment after Graduation. Preliminary Education—Two-Year High School or Equivalent.

Nurses receive Room, Board, and Laundry at Expense of School. No Tuition Charge. Separate Nurses’ Home. Additional information furnished on request.

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THE OSTEOPATHIC PHYSICIAN

THE ORGAN OF NEWS AND OPINION FOR THE PROFESSION

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Chicago, Illinois. Henry Stanhope Bunting,
A. B., M. D., D. O., Editor and Manager;
Robert J. Bunting, Subscriptions and Business Manager.
Subscription price: $2.00 per annum. Advertising Rates on
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Publications.

Entered as second-class matter April 21st, 1907, at the
Postoffice at Chicago, Illinois, under Act of March 3d,
1879.

EDITORIAL

Fairness, Freedom, Fearlessness

"How to the line, let chips fall where they will"

Vol. XXXVI July, 1919 No. 1

THE GOLDEN AGE OF OSTEOPATHY

For a decade or more The OP has been a
consistent adviser of change in the mechanism
and reform in the policies of the AOA. At times
we have been at first to be regarded as
falling in the category of reforming, yet still
not too well. The
accepted and popular way of working reform is
to institute a gradual, slow, insidious, pleasant
propaganda. The results of such a method are altogether
as much as folk can accept without being made
to feel uncomfortable. The reformers who work
this way have it in their power to do harm not
so much from reformation that we may champion. There
are no enemies to overcome, yet somehow one
cannot escape the feeling that the truth one
has discovered or the ideas one has grasped, will
be eliminated. New brooms do wonders at
many respects will follow. The things that are
expected that a complete change of policy in
conduct of the AOA business.

But it is apt to be a slow process. It takes time
and patience always to be ready to accept the
new officer in discharge of his great work.

THE TRUE FUNCTION OF OSTEOPATHIC
PUBLICITY

Conversation with several prominent members
of the profession at the AOA convention re
veals the fact that a good many osteopaths hold
the belief that as soon as intelligent educa
tional campaigning increases practice to the point
where a fellow can't take care of it that he ought
to stop his propaganda activities.

But osteopathy cannot get enough educational
publicity until it is recognized by everybody for
its full worth and dignity as the capstone of the
healing art. Just because an osteopath has all the
practical possession of the home state, he will
not then feel the investment, as some other osteopath
who really needs more practice in order to be
able to pay expenses. Such a prosperous
osteopath, just because he already is doing big business
as osteopath, owes it to the osteopathy
profession to make a really valiant return of capital to
economic publicity for the general good of the
cause. The best doctors in the profession are
now in their ten times bigger campaign than the poorer doctor who

gradually as we go along and discover their
faults.

We have every confidence that President Conk
will run true to form in his year of official
responsibility, and we are sure that he will con
tinue to see great improvement in the progress of
vigorous policies that have marked the adminis
tration of ex-President Fryette.

He will be elected an able, deep-thinking, progressive osteo
pathic leader as editor of the Journal of the
American Osteopathic Association. A man who has
already proven his command of the tools of jour
nalism. It is not a berth for an amateur, either
in the councils of the profession or in editorial
work. It is a position of administration and
leadership. In some ways this berth is more
important to fill than the job of secretary. A live man in the editorial chair defies disputa
tious aid and comfort to a live secretary. We
trust that the Trustees will give Secretary
Gravett his careful consideration as to
the selection of his running mate. Team work
is needed. These two officers, editor and secret,ary,
must work as yoke-mates who are in absolute
sympathy and understanding as to their joint
program.

The foregoing achievements by the AOA fill
out the pattern of the progress of our people
in the profession's policy generally: so it
is legitimate and honorable and we hope to see
the net achievements of our Association,
profession and schools in the year ahead will be
ample endowment of the wisdom of the new
OAD Constitution and By-laws. We have
time when it seeks to realize.

But, be that all as it may, the reforms we have
urged so patiently were gleefully ushered in at
a Chicago meeting. The new constitution and
by-laws, as presented by Chairman Upton's com
mittee and adopted but slightly modified, seem
to give us a good working basis for the proper
conduct of the AOA business.

A clean sweep of executive management was
made. With it, naturally, we are justified in
Expecting that a complete change of policy in
the policies of the AOA will be eliminated. New brooms do wonders at
many respects will follow. The things that are
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ample endowment of the wisdom of the new
OAD Constitution and By-laws. We have
doesn't know how he is going to meet his month's expenses. It if our prosperous, well-established practitioners really do something to get them in line with the profession who don't know how they are going to meet their monthly expenses.

We all owe a good deal to the general cause and should not measure our obligations to it solely by the test of whether we need personally and directly to be literature of our own practice. That is only one and not the greatest use for educative-literature. Its greatest function is to "get osteopathy right with the people." Osteopathy is a right with the people. We owe it to get proper state laws, adequate hospital and school endowments and research funds; a bigger army must have the students, to. Osteopathic practitioners in every community at their full value as full-blooded physicians. Propaganda alone has the key to the opportunity.

Now, Prosperous, Busy Osteopaths, please ask yourselves, is it true that osteopathy already has all of these assets and that it needs you? You know, as well as we do, what the science and art of osteopathy are getting as their share from the world as you are with your share—
as we stand, character, and rewards of your own practice?

If not, then you really are not doing what you ought to help the cause forward. You should be spending more time and energy to increase not to increase your practice, if you are already very busy, but to increase the public's understanding of plans to solve these problems, this is a fitting time for the busy, prosperous osteopath to resolve to put forth his all of propaganda for the year ahead.

IT HELPS
The Resolutions Committee handed a word of appreciation to the editor of Osteopathic Health and the Osteopathic Physician for good work done in the past year in handling the subject of the influenza epidemic for the advancement of the profession.

We assure you this acknowledgment is very greatly valued by the recipient. In fact, the whole staff down to the office boy was cheered by it. It will help us do better things in the year ahead.

NEED OF IMPROVING OUR CONVENTION CLINICS
We rise to propose that our convention clinics be rescued from the critical state in which they have been consigned from the beginning of our professional history, and that they be exalted to a first-rate success in the activities of our great national society. An institution that has a $40,000 income is well able to pay whatever reasonable sum is necessary to organize its clinics and bring cases of sufficient interest to the city, if that be necessary, in order to get the right variety and types of diseases.

A fair share of the money now realized from convention exhibits might reasonably be applied to paying the expenses of the convention and mailing our meetings the greatest success possible. In fact, our attendance probably will not be due to the aspect of being assured professional and professional success, with every feature and arrangement standardized and guaranteed to be as good as it ought to be, until a permanent meeting place is adopted, until arrangements are no longer left to the mercy of red and volunteer effort, and until real money is spent to obtain certain necessary program features. Consider clinic material alone. This feature, which our last delegate, was an absolute failure at this last Chicago meeting. In some departments at last, there were no clinic patients to speak of. No, but we have a plan. We think about getting patients to come to the meet- ups and had put forth considerable effort to achieve that end. Only they didn't produce them by the plans tried and with the means at hand. We have learned by one failure, then, that some more will be needed, advertising, transporting, and perhaps rewarding clinic cases is necessary in order to get the number and variety of cases wanted.

Now, we are looking for what is of greater importance to the AOA than to be able to guarantee that the clinic material is abundant and satisfactory at these conventions. Isn't that part of the natural and necessary function of the association? Why, assuredly. Having the finest assortment of clinic cases possible to select and bring to Chicago might be the primary duty and the principal duties and opportunities of the national society.

It is a much more important piece of work, for instance, to make a success of our exhibits, as important and necessary as exhibits are. Indeed, the success of the exhibits is important mainly because it furnishes revenue with which to increase the public's to accept these as substitutes for good clinics. They want both and are entitled to have them. It seems clear then that the way to improve our clinics at conventions is, first, to regard it as a real man's work, and next, spend as much money as is found in judgment and discretion to be necessary to accomplish a fine job of it. Don't get the idea that good osteopathic enthusiasm, and such money as the local osteopaths contribute for convention entertainment.

Revenue-making is the legitimate necessary business of the AOA and as such an entertainment and local arrangements expense ought to fall upon the society treasury. If there are any doubts that advertisements, advertising and exhibits, after defraying all other legitimate expenses, then a small registration fee from the delegates and visitors would put the convention preparation on a proper business basis. A convention so financed could be held in one city permanently, if it were so desired, without becoming a burden to the local osteopaths. They would then be able to be given as the service rendered to its membership. The association does not exist to be a traveling hobby. But we have learned by one failure, then, that the very first reason in the minds of the osteopaths who don't know how to meet their expenses. If not, then you really are not doing what you ought to help the cause forward. You should be spending more time and energy to increase not to increase your practice, if you are already very busy, but to increase the public's understanding of plans to solve these problems, this is a fitting time for the busy, prosperous osteopath to resolve to put forth his all of propaganda for the year ahead.

Opportunity
They do me wrong who say clinic work, second to fellowship only, is the great operation of the profession; art to first consideration, as if they were really ends and not means. The exhibit work, second to carrying on the proper scientific and secondary-important as revenue-producing is, yet we must have it.

Clinic work, second to fellowship only, is the service of soliciting and collecting convention entertainment. They want both and are entitled to have them. They have both and are entitled to have them. The Kirksville Aeroplane Company is being incorporated to buy a $3,200 machine and each stockholder will hold a $100 share of stock. The officers elected are:

President, Dr. George A. Still; vice-president, J. W. Scott; treasurer, Charles Read, manager, E. Murrell, and W. B. Hutton, Attorney C. E. Murrell, and D. I. Stephenson. Recovering from Pneumonia in New York City while on a medical tour to Europe, was stricken with pneumonia in New York City while on a medical tour to Europe.

Dr. Geo. A. Still Will Rush to Emergency Operations by Airplane

Dr. Geo. A. Still will shortly ride in an aeroplane to emergency operations, and catch the train at La Plata and also speed to state association meetings where he is on the program. George also proposes to see students free transportation to Kirksville whenever he has a vacant seat on his return hop. George also says in confidence that "guys we don't like can take up about 2,000 feet and then drop them out."
THE OSTEOPATHIC PHYSICIAN

New Business

Sec. 3. No new business shall be introduced on the last day of the session unless by unanimous consent, and such new business shall require a special call to be made in order to become effective.

 Committees of the House

Sec. 4. To expedite the business of the House, the President, early in the session, shall appoint various committees to whom shall be referred the reports of the following committees:

- Committee on Credentials, which shall receive and validate the credentials of the Delegates to the House and Conferences; and which shall report to the House at its opening meeting, the names of all Delegates entitled to be seated. It shall report its findings in all matters relative to the House Committee on Rules, to which may be referred all questions of rules, or order of business or procedure.
- Committee on Reports and Audit Committee, which shall report the reports of officers or departments not otherwise provided for; and which shall see that the accounts of the A. T. Still Research Institute and support agencies entitled to be seated. It shall submit its report to the House with its recommendations. A majority vote may refer any question on credentials to the Board of Trustees.

The following committees are required to be appointed in addition to the referred committees:

- Committee on Credentials, which shall receive and validate the credentials of the Delegates to the House and Conferences; and which shall report to the House at its opening meeting, the names of all Delegates entitled to be seated. It shall report its findings in all matters relative to the House Committee on Rules, to which may be referred all questions of rules, or order of business or procedure.

Any vacancy that may occur in the Board of Trustees in the term herein provided for may be filled temporarily by the Board until the next annual session of the Association. The Board shall take charge of all moneys, books, papers, and other property of the work of the A. T. Still Research Institute and support agencies entitled to be seated. It shall submit its report to the Board of Trustees with its recommendations for the annual session of the Association.

Scientific Work

The Program Committee

Part 1

The Program Committee for the annual meeting shall be appointed by the Board of Trustees. This committee shall prepare the programs for the general meetings at the annual sessions of the Association; shall announce the time and place of meetings of the sections; shall co-operate with the chairman of the several sections in order to co-ordinate the work of the sections; shall have superintendence of all meetings of the general session on all matters relating to the program. This committee shall pass upon applications for representation on its recommendations thereon to the Board of Trustees, and shall have the power to revise the program proposed by any section, both as to subjects presented and participants.

Absence

Sec. 2. It shall be considered a marked discourtesy, in view of the high honor implied in being placed on the program, for any member having an assignment to absent himself without due notice to the Program Chairman before the program is scheduled.

Sec. 3. All papers and clinical discussions presented at the annual sessions of the Association, either in the general meetings or in the sections, shall be regarded as belonging to the Association; and that it is discourteous for any person having accepted a place on the program, to give out any paper or discussion for another person, in advance of its publication by the Association, except on permission of the Program Chairman. All papers and clinical discussions are to be submitted to the Program Chairman before being published in the transaction of the Association.

Scientific Sections

Sec. 4. On petition of not less than twenty members of the Association, and after approval by the Committee on Programs, the Board
Doctor, Here Is A Good Thing

THE NEW DIONOL TUBE

Especially adapted to all ORIFICAL USES. Easily carried, convenient to apply, clean, aseptic, economical. The results justify, if they do not compel its use in

- Hemorrhoids
- Prostatitis
- Cystitis
- Fistulas (everywhere)
- Bubos, Abscesses, Ulcers
- Hay Fever
- Rhinitis
- Otitis Media
- Pruritus Ani, or Vulvae
- Urethral Irritation—in women

A neat method of using Dionol. Splendid value, and Case Reports galore—Literature, of course.

The Dionol Company

M. C. Kimono Boxes

Just the thing to beautify your office. Keeps every patient’s Kimono clean and out of the dust. Boxes are made of extra heavy Chip Board. Each box has a brass card holder to insert patient’s name. Size of box 13x5x5.

Prices as follows:
1 Doz. Lots $6.00  2 Doz. Lots $11.50
5 Doz. Lots $24.00  100 Lots $40.00

M. C. Kimono Cabinets

Size of cabinet is 21 in. high, 19 in. wide and 13½ in. deep. Will hold 12 Kimono boxes. M. C. Cabinets are carried in stock only in Golden Oak finish. Price on other finishes can be had on request.

Price of M. C. Kimono Cabinet, in Golden Oak finish, without boxes $10.00
Cabinet and 1 dozen boxes, complete, $16.00
Cabinet with four legs and 1 dozen boxes complete $19.00

All prices f.o.b. Michigan City.

MICHIGAN CITY PAPER BOX CO., Michigan City, Ind.

No. 23

The
Osteopathic
Catechism

(Part II)

Everyday Questions
and Answers that Pass Between Patient and Practitioner

Museum of Osteopathic Medicine, Kirksville, MO
THE OSTEOPATHIC PHYSICIAN

Section 1. The Department of Education, together with the Executive Committee of the Associated Colleges of Osteopathy, shall constitute a joint committee, which shall provide for the investigation of any college as may be desired, to keep this Association informed as to its progress and the colleges in general accord in their aims and methods; and shall report thereon to the Board of Trustees. The report of this committee shall be the basis for any action to be taken by this Association in connection with its policy as to what shall or what shall not be included in the published transactions of the Association; and it shall be the duty of the committee to submit the transactions of the Conference to the Board of Trustees at the current annual session of the Board. The committee shall submit the transactions of the Conference to the Board of Trustees at its annual session, and shall hold not more than two meetings for formal program, but may hold a third meeting for business or informal conference.

Sec. 2. The Legislative Conference shall consist of the Committee on Legislation and one delegate from each of the said bureaus, elected by a majority of votes cast for the same Component Society.

Part 10 ELECTIONS

Sec. 1. Election of officers shall be the order of business of the House on the third day of the annual session. All nominations shall be made from the floor. Nominating speeches shall not exceed two minutes; and there shall be no seconding speeches.

Method of Conducting Elections

Sec. 2. All elections shall be by ballot, and a majority of all votes cast shall be necessary to election. In case of no election on the first ballot, the name having the smallest number of votes shall be dropped before taking the next ballot; and a major part of the committee shall be re-elected. At the next annual session, the number of members which shall constitute a quorum shall be determined by the Board of Trustees; and the business of the Board shall be transacted in the order of business of the House on the third day of the annual session.

The last meeting of the annual session at which they are elected.

Part 11 AMENDMENTS

Section 1. These By-laws may be amended at any annual session of the House, by a majority vote of all members present.

The Osteopathic Physicians and Surgeons of Texas

The Osteopathic Physicians and Surgeons of Texas, as a constituent part or unit of this Association, shall be known as a Division Society, within two years from the adoption of these by-laws.

C. A. Upton, D. O.
E. E. Prettyman, D. O.
P. S. Patterson, B. L.
Ralph H. Williams, D. O.
C. J. Gaddis, D. O.

Committee

Refereend Amendment Which Was Added by the Convention

Provided, that a majority of not less than 25 of its members present and voting at any session, may appeal to the general meeting at any question of policy or election.

Convention Banquet a Star Success

WELL, we had the banquet menu as advertised, all the way from Cantaloup Suzette to Perry S. Patterson, Esq., toastmaster, and it was a notable occasion in every way. A delightful change in speakers was to have war veterans tell us how they licked the Hun. Retiring President Fryette and President-elect Cook, and the Executive Board introduced their ladies, who received ovations.

Mr. Floyd Gibbons, Chicago Tribune war reporter, described his 5000-mile trip to the second line, and lost an eye by machine gun fire at the fruit and was decorated by France and the United States. He introduced his band of entertainers.

He told graphically of the last great push in which the United States troops "won the war" for the sixth and last time, the time that counted.
Many Osteopathic Physicians Find It a Great Help

YOU doctors of Osteopathy have the faculty of finding the cause of ailments in your patients. You are not given to treating symptoms. You seek out the source of trouble. And very often you find the source of trouble in the spine—a deflected vertebra, a slight or perhaps well-defined curvature, or tender spots at various points. Now, in cases of that sort, in addition to the regular osteopathic treatment many of your brother practitioners have found a most efficient aid in the

Philo Burt Spinal Appliance

The Philo Burt Appliance serves to give your patients the utmost good from your scientific treatments. It supplements your work by helping retain the results as you achieve them step by step. A great many osteopathic practitioners of highest repute use the Philo Burt Spinal Appliance in all their cases of spinal trouble with distinguished success.

30-Day Guaranteed Trial

We will make it to order a Philo Burt Appliance for any case you are treating, allow its use on a 30-day guaranteed trial and refund the price if, at the expiration of the trial period, the appliance is not satisfactory in your judgment.

On request we will send detailed and illustrated description of the appliance, and letters from osteopathic physicians in evidence of its corrective efficiency. Write to-day. Special discount to physicians.

PHILO BURT MFG. CO.
141 Z, Odd Fellows Temple
Jamestown, N. Y.

THAT SEVENTH BABY

the one who loses out in the first year's fight for life—is, in one case out of four, a victim of food troubles.

DENNOS FOOD

plays its beneficent part. Milk modified with Dennos may be almost identical in composition with mother's milk. Heating automatically guards it against bacterial taint. Recommend Dennos. Give the bottle fed baby the maximum opportunity during the hot season.

Send for a free Dennos Prescription Pencil

DENNOS PRODUCTS CO.
2025 ELSTON AVE.
CHICAGO, ILL.

The Perfect Sight Restorer

For treatment of the eye. The eye cup fits over the closed eyelid, and by suction manipulates all structures of the eye, mobilizes the eyeball into its normal shape, establishes circulation of blood, and normal functioning of the nerves. Restores vision in far sight, near sight, Astigmatism, causes absorption of Cataracts, relieves attacks of vertigo, sick headache, nervousness and other conditions which are due to eye strain. The P. S. R. is made of polished hard rubber, cannot wear out nor liable to get out of order. Guaranteed to give satisfaction if used according to instructions.

Write for descriptive literature.

PRICE $5.00

PERFECT SIGHT CO.
Dubuque, Iowa

Treating Tables

Catalogue showing several styles, also samples of covers, sent on request.

Best folding tables on market $7.00. Our "S. S." tables, something NEW.

Price $13.50. Write for circular.

Dr. Geo. Hayman
Doylstown, Pa.

"How Mrs. J. Investigated Twentieth Century Medical Advancement and Found Out What Every Woman Should Know About Osteopathy," is the title of our new special brochure on osteopathy for women. It is the October issue of Osteopathic Health. Order 100 copies today.—The O.P., Chicago.
**THE OSTEOPATHIC PHYSICIAN**

**It Will Pay You**

I suppose you’re getting the Journal of Osteopathy and reading it regularly. But if not, it will pay you to get on the list.

It will keep you posted on the best methods and the latest discoveries. It will tell you what others are doing, and the results.

It will report our progress toward the chance we should have in the army and navy.

It is all that you could expect to get for twice the price, and it is only $2.00 a year in U.S., $2.15 in Canada and $2.25 foreign.

**Journal of Osteopathy**

KIRKSVILLE, MISSOURI

---

**How “Bad” Mechanism in Our “Joints” Makes Sickness**

A well illustrated number showing how osteopathy adjusts the human machine at its joints especially. A simple but careful explanation of the relations of the bones, muscles, tendons, ligaments and cartilages to the nutrition of the entire body. The big argument for osteopathy. Price $1.00 a hundred.

**OP Co., 9 So. Clinton St., Chicago**

---

**WEAK FOOT, FLAT FOOT, BURSITIS, NEURITIS, HAY FEVER**

A brochure dealing with such ills as weak foot, flat foot, broken arches, bursitis of the shoulder, “glass arm”, “rheumatic shoulder”, brachial neuritis, hay fever, rose cold and catarrhal deafness. All these maladies are successfully handled under osteopathic attention. Price $0.40 a hundred.

**OP Co., 9 So. Clinton St., Chicago**

---

**What Osteopathy Does for the Welfare of Women**

How Mrs. J. Investigated Twentieth Century Medical Advancement and Found Out What Every Woman Should Know About Osteopathy. The Joy of Having Osteopathy During Pregnancy. This is a wonderful woman’s number. Price, $4.00 a hundred.

**OP Co., 9 So. Clinton St., Chicago**

---

**California Osteopaths Win Two Bills As Law But Lose One**

By Dr. C. B. Rowlinson, Los Angeles, California

**GOVERNOR STEPHENS signed bills Nos. 844 and 402, but the medics were successful in their efforts to prevent him from signing 933. No. 933 “died” in committee.**

I am enclosing one of the brochures which the C. O. A. got out in the campaign to get the governor to sign 933. This was sent to the California osteopaths for display in their offices, and it also appeared as a full page advertisement in newspapers in San Diego, Santa Barbara, San Luis Obispo, and other cities.

The following was the data printed in the display poster:

**THE LIE**

This folder was mailed to physicians of Los Angeles just prior to the public hearing before the Governor.
VITALLY IMPORTANT
READ THIS ONCE!

California Assembly Bill 933 (Merriam) was used by both Assembly and Senate. It is now before the Governor for signature. This bill would make a physician and surgeon every osteopath in California who pays $25. No examination as to fitness at all—(Just $25)—that's all! Such a bill would license men who are inadequately trained. Inadequately trained men would be a menace to the lives of the people of California. This is a deplorable condition of affairs, but it is not too late to act (if you will do so now).

WHAT YOU CAN DO

1. You yourself must telegraph (day wire or night letter) to Governor William D. Stephens, Capitol, Sacramento, California, today.

2. Induce at least one of your lay clients or friends to do likewise.

There is an important hearing on the question before the Governor Thursday, May 1st, at 2 P.M. Do not delay.

The osteopathic colleges of this state have always taught the equal of the subjects and hours required for a physician and surgeon's license, but for the first eight years of this period failed to receive it. This is the same examination that was taken by the graduates of the allopathic, homeopathic and other medical colleges, who did receive it. Bill No. 933 which passed both branches of the legislature is now before the Governor for signature.

The osteopathic physicians are adequately trained and warrant the ordinary safeguards of the public. The osteopathic colleges of this state have always taught the subjects and hours required for a physician and surgeon's license.

THE TRUTH

(In answer to each of the above statements.)

California Assembly Bill 933 (Merriam) was used by both Assembly and Senate.

The osteopathic colleges of this state are adequately trained.

THE COMMITTEE ON PUBLIC HEALTH,

By Geo. H. Kress, Chairman.

More than 1,750 medical doctors took no examination as to fitness. (If you wish to know their names refer to the 1918 State Directory.)

THE DEASON-MOORE CLINIC

Hay fever clinic
August and September
Chicago Osteopathic Hospital

RESULTS:
420 Cases
Permanent cures 70%
Complete season relief 88%
Asthma 80%

Bring your cases and learn the methods of treatment. Write for details, address Dr. Glenn S. Moore Chicago Osteopathic Hospital 5200 Ellis Avenue

SOUTHWESTERN OSTEOPATHIC SANITARIUM
BLACKWELL, OKLA.

Dr. Geo. J. Conley, Chief Surgeon; Dr. L. S. Larimore, Eye, Ear, Nose and Throat and X-Radiance; Dr. H. C. Wallace, Surgery, Orthopedics and Diagnosis; Dr. C. D. Ball, Obstetrician; Dr. S. T. Anderson, Staff Physician; Dr. W. W. Palmer, Staff Physician; Dr. M. M. Eastlack, Staff Physician; Miss Nannie Williams, R. N. Superintendent.

Training School for Nurses. Pupils Wanted.

For the most modern styles and lowest priced Osteopathic Tables and Stools; also Books, etc. and assured satisfaction, address only where you get the benefit of 22 years experience.

THE J. F. JANISCH SUPPLY HOUSE
KIRKSVILLE, MO.

THE Western Osteopath

PROGRESSIVELY OSTEOPATHIC

Some day you will want to live in the great West. Get acquainted thru this journal.

Contributors in last journal were:

DRS. ATZEN, VAN BRACKELE, BRIG-HAM, ASHMORE, BOWLING, FARN-HAM, A L L I S O N, R U L E, W H I T E, REID, ROBINSON, SPENCER, PENGRA.

Contributors for next issue:

RILEY, FORBES, TASKER, RUDDY, BURNS, SPRAGUE, E M E R Y, and others.

Brief, pointed and practical—a journal for the busy D. O.

Published by the California State Association. Big value for small outlay.

Subscription Price $1.00

C. J. Gaddis, D. O., Editor
First Nat'l Bank Bldg., Oakland, Cal.

THE ONLY INSTITUTION

The only institution in the world that we know where all surgical cases get post operative Osteopathic treatment by graduate osteopathic physicians.

THE OSTEOPATHIC PHYSICIAN 23
“Osteopathic Health” Standard Literature

We offer the following brochures, all of which are standard numbers. It is a good plan to have a varied assortment of literature on hand at all times. One can never tell when a prospective patient will make inquiry regarding some particular ailment. Be prepared for such an inquiry.

The supply of many of the issues is limited and it is doubtful if they will be published again for many years. There is no time like the present to lay in a good supply of assorted standard field literature.

If you would prefer to look the issues over before you buy, send us 25 cents and we will send you a complete set of sample copies.

Please Order by Number

**No. 2**  A. T. Still, Scientist and Reformer: The first of the now famous brochures by Professor M. A. Lane, of Kirksville. Supply very limited.

**No. 3**  Bursitis; Glass Arm; Brachial Neuritis; Flat Foot and “Broken Arches”; Hay Fever Cured by Osteopathy. This brochure tells how “foot troubles” are associated with spinal and pelvic lesions. Also how baseball pitchers are cured of “Glass Arm.” A fine story about osteopathy and Hay Fever, telling importance of early diagnosis and prompt treatment.

**No. 6**  Osteopathy in the Infectious Diseases: A brochure by Professor Lane. A popularized, scientific exposition showing why osteopathy is the most efficient and effective system for combating the infectious diseases.

**No. 8**  Osteopathy in the Inflammatory Diseases: The fifth of the documents by Professor Lane and deals with boils, chronic dysentery, tonsillitis, ’c.

**No. 11**  A Chronic Dyspeptic Greatly Surprised—Strains and Sprains of the Back and Limbs—Osteopathy for Men—A Fall From a Chair Gave Baby Constipation—“Neglecting a Fine Machine.” A very useful brochure for getting people interested in osteopathy who are afraid to tackle any reading matter which seems to be “heavy.”

**No. 12**  How “Bad” Mechanism in Our “Joints” Makes Sickness: A splendid illustrated brochure dealing in detail with lesions. Shows how sub-luxations may cause pressure on nerves and how the free circulation of blood supply and nerve force is interfered with. One of Dr. Bunting’s most valuable brochures which has been through several editions.


**No. 16**  Osteopathy Potent Where Serums and Vaccines Fail: Shows how little can be expected of the various serums and vaccines in view of scientific knowledge of today and why osteopathy has a particular potency in most of the diseases for which these serums and vaccines have been experimentally applied.

**No. 17**  The Osteopathic Catechism: everyday questions and answers that pass between patients and practitioner: Part I of a new edition of this famous brochure which was written by Dr. Bunting seventeen years ago. It has been revised to date and is printed in large type. It covers the main questions likely to be asked by a person interested in osteopathy and considering the wisdom of taking osteopathic treatment.

**No. 18**  A. T. Still as a Medical Thinker: Professor Lane’s great tribute to the “Old Doctor” and a most lucid and comprehensive estimate of osteopathy. Tells briefly of the great reforms in medicine and shows that Dr. Still was the first to give the world a really scientific therapy. Shows also that the evidence of all modern scientific research supports the therapy of Dr. Still.

**No. 19**  Children’s Iills Stopped in Their Beginnings: This brochure contains an excellent article on children’s ills. In addition, it explains the value of osteopathic treatment after confinement; shows how osteopathy can help liver and stomach troubles; and also explains the benefit of osteopathy in the treatment of the various forms of pneumonia.

**No. 20**  Nervous Prostration or Neurasthenia (illustrated): This brochure is a frank and careful statement of the marked difference in diagnosis and treatment between osteopathic and medical practice in this illness. Just how sore spots in the spine become significant in nervous prostration is made especially evident.

**No. 21**  Osteopathy Synonym Surgery: The point of departure for lay understanding is that instead of the ordinary surgical work minus instrumentation.

**No. 22**  Facts and Fallacies Regarding Osteopathy: This brochure voices just the facts you have so often presented to your patients to set them right on things osteopathic. It proves the untruth of the statements that osteopathy is rough, painful and severe; that patients are treated nude; that osteopathy is “scientific massage”; and gives other important information.

**No. 23**  The Osteopathic Catechism (part 2): Sets forth the facts which establish the educational status of our profession, as well as a lot of plain, understandable talk about the osteopathic diagnosis and treatment of disease.

**Published by**

The Bunting Publications, Inc.

9 So. Clinton Street, Chicago
hundreds of patients given up by the medical profession.

This is a deplorable condition of affairs."
The verdict of those cared for by osteopathic physicians, being still here to testify, would emphatically contradict this assertion.

"The low standard advocates have scored."
Osteopathy does not stand for low standards of education and it is a deliberate misrepresentation on the opposition side that it does. Three bills were passed by the Legislature this year to prevent the Board of Medical Examiners from discriminating against osteopathic physicians. Not single one of these bills changes the present high standards in any particular. The following table shows that the osteopathic college requires more hours of education than any other medical college in this state.

Educational requirements of medical and osteopathic schools of California (shown in hours), compiled from catalogues of 1917-1918:

<table>
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<th>Subject</th>
<th>Osteopathic College</th>
<th>Medical School of Los Angeles</th>
<th>School of Medicine, University of Southern California</th>
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Diagnosis vs. Error

THE Osteopathic profession, as well as the Medical profession generally, has been struggling for a long period to successfully cope with those conditions which we call "anterior lumbar displacements."

The patients suffer an indefinite symptomatology, such as pains in the lower part of the back, hips and back of the legs. The suffering might more correctly be described as an ache, increased markedly upon standing or stooping. Rest in bed alone often improves the patient temporarily. Sometimes after the onset of the condition the patient's back and limbs become tender to touch. Unless these cases are closely observed, the physician in charge may tell the patient he is suffering from "lumbago, rheumatism, piles, prostatic trouble," or, if the patient be a woman, the physician may ascribe her pains to "kidney or ovarian trouble."

The Taylor Clinic in making a special study of these cases, and in this paper we shall show our methods of diagnosis and give our treatment.

CASE No. 1

Mrs. M., age 49, housewife. Family history negative.

Personal history: The patient gives a history of pain developing in the back, across the hips and down the back of the legs. The pain was exaggerated after doing her daily washing. This grew worse from week to week until she had to give up her household duties.

The physician in charge pronounced her trouble rheumatism, and after about six months of ineffective treatment, put the patient to bed for absolute rest. She improved while in bed but when she got up, she became worse than ever, and this same physician injected the sciatic nerve to give relief. The injection completely incapacitated her for some time; but she gradually improved until she could walk about feeling fairly well one day, but worse the next.

Such as described above was her condition when she came to the Taylor Clinic for treatment.

This case, upon examination, presented the following points of interest: lumbar lordosis with a deep groove extending above a very prominent sacrum and a short waist with several folds of the skin on each side. The trunk was carried well forward on the pelvis at the waist line, leaving a shelf-like depression upon the posterior superior aspect of the sacrum. There was no pain elicited upon pressure anywhere above the fourth lumbar vertebra; but below it over the hips and down the legs, the pain was intense upon pressure, or upon twisting the trunk.

There is a condition which occurs in fleshy people who have pendulous abdomens which simulates spondylolesthesis in general appearance; but which does not have all the symptoms or the deformity. This is simply a marked lumbar lordosis with a compensated posterior dorsal. These patients have pain down the back of the legs and across the hips, but they also have a marked amount of pain along the lumbar spine, and very seldom do they have any numbness in the legs and feet. On inspection you will not notice the prominent sacrum or the deep groove extending above. The waistline becomes somewhat shortened; but not to the extent of that found in spondylolesthesis.

For a few of the lumbar subluxations, I have in mind a case in which the radiogram shows a marked tilting of the fifth lumbar to the left side so that the left transverse process comes in contact with the inner side of the crest of the ilium opposite the vertebra. This patient complains of a burning pain at that point and radiating over the crest of the ilium and down the back of the left leg. This pain is manifest only when the patient stands or sits, equally dividing the weight of the body upon both limbs or hips. To be free from the pain while standing or sitting, the patient must favor the left hip by bearing most of his weight on the right leg, and in sitting, on the right hip. See Fig. 981.

In treating the average case of an anterior subluxation of the fifth lumbar (not a displacement), determine the direction of the rotation and correct it; then if there remains an anterior condition, further correction will be an easy matter.

Spondylolesthesis is a downward and forward movement of the fifth lumbar vertebra upon the sacrum. This is a condition which is now recognized as quite common. There are all degrees of dislocation in these cases and unless we make a careful routine examination in all instances of this sort, we are apt to experience a great deal of trouble in giving relief to our patients, because we have not recognized the true pathology.

In all cases of spondylolesthesis, or suspected cases, we make a number of radiograms taken from several different angles, to obtain as nearly as possible the exact amount of displacement present. We very often have in these cases, a complication in the form of an innominate lesion. In practically all the cases which have come under our observation, with the innominate complication, the lesion is a twist of the whole pelvis; one side being rotated forward and the opposite side backward. When this condition is present our difficulties are increased. A cast should not be applied until the innominate lesions are corrected.

CASE No. 2.

Personal history: Mrs. L. R., age 40, laundress. Family history, negative.

For the last five years she has complained of spells of pain across the hips and down the back of the legs. Until one and a half years ago she could do her work in spite of the pain. This case complained also of more or less numbness in the feet and legs at times.

Since July, 1918, she has been unable to keep up her work, and there have been periods of several weeks at a time when she was confined to bed. Within the six weeks of the writing of this article she has given up all effort to work of any kind.

On March 17, 1919, she came to the Taylor Clinic for treatment. The following points were observed in the physical examination: Height, five feet; weight, 245 pounds; large pendulous abdomen; marked shortening of the waist line with a deep fold on either side; the trunk was carried well forward on the hips; prominent sacrum with characteristic groove extending above; marked tenderness over the sacro-iliac joints and top of sacrum. There was also much pain down the back of the legs, the right hip being more severe. The shelf-like depression over the top of the sacrum made our diagnosis quite clear. The spinous process of the fifth lumbar is generally felt tightly impacted beneath the fourth or to one side of it, leaving an increase in the distance between it and the sacrum.

The accompanying radiograms illustrate the degree of dislocation present in the average case, showing a typical spondylolesthesis.

CASE No. 3.

Family history, negative.

Personal history: Mrs. M., age 32, housewife.

Fifteen years ago fell from a horse, striking her back. She was unconscious for several minutes. When she regained consciousness and tried to walk she noticed a marked weakness and sensation of numbness in her legs. The numbness continued for about six weeks, being more marked at intervals. For twelve years she suffered very little with the exception of occasional spells of lumbago accompanied by slight numbness in the feet.

Three years ago the patient went to bed on evening feeling quite tired. The next morning
she was unable to leave her bed on account of great pain in the back of her legs and numbness in her feet. The numbness was more severe than when she fell twelve years before. She remained in bed for six or seven weeks, hardly being able to move herself. All this time she had been under medical care which consisted of methods and plaster. At the end of this period she was able to get up and move about the house, but was unable to attend to very little of her household duties without a great deal of pain.

At the time she came to the Taylor Clinic for treatment she had just recently partially recovered from another spell which had lasted about five weeks. Before we treated her we took several radiograms of the lumbar spine and lombo-sacral articulations to confirm our diagnosis. The symptoms and general contour of the spine both pointed to spondylolesthesis. The fifth lumbar, as you will notice in Fig. 979, is resting at an angle of 45 degrees over the anterior aspect of the sacrum.

Treatment: Osteopathic.

In our own work we use two different tables. In treating these cases we use the McManis table because it is quite adaptable. The patient is placed on the table "face downward," with pillows beneath the abdomen. The more improvement. The lines of the waist, the contour of the back and the pain was much improved; but there was a laxness to the lumbar muscles which prevented any further correction. The distraction which the patient now experienced consisted of just a very tired feeling after she had been on her feet for several hours. In March we applied a cast extending from the ilium downward, covering and holding well the sacro-iliac joints and the crests of the pelvis.

Since the cast was applied the patient has been greatly relieved. She is doing her work and walking with considerable ease. At the end of five weeks the cast was cut down and equipped with laces so that it can be removed at night and worn during the day.

The tendency of all these cases is to get worse, unless properly treated, so the improvement in this case is very gratifying. The sooner we can get these cases, the more permanent will be the results obtained. The cast was applied with the patient suspended by the head, supporting about two-thirds of the weight of the patient's hips and limbs to pull the spine into a straight line. This cannot be done without thorough osteopathic treatment before hand to relax the strained and sore muscles and ligaments. This also reduces the pain caused by a cast for the few days after it is applied.

Exercises for this condition are not of much value. The support which the cast gives is most valuable, after the articulation has been made more flexible by removing the soreness from the lumbar muscles.—Dr. Dwight D. Clark, Osteopathic Therapeutics, The Taylor Clinic, cornes East Twelfth and Des Moines streets, Des Moines, Iowa.

Prices on McManis Tables Must Be Advanced

By Henry Stanhope Bunting.

The prices on McManis treatment tables, we learn, are likely to be advanced soon, if you are thinking of buying one and wish to save some money, get your order booked promptly. A recent letter to Dr. McManis from the factory manager reviews the situation. He calls attention to the big advance in cost of labor and anticipates that further wage advances will be demanded; also, he points out that all the materials entering into the construction of the McManis table have advanced and are still increasing in cost. The best authorities in the manufacturing field are of opinion that these conditions will prevail for several years.

Not only has the McManis Company these severe conditions to meet, but it is faced with the fact that the tables have always been sold on a very close margin. The profession at large seems not to have realized this, possibly because there was no familiar basis for comparison. In reference to the cost of surgical tables will make the situation more clear. Two years ago the price on a modern surgical table was $450 and the only discount for cash was 5 per cent. A surgical table is made to take care of one adjustment only, and it is not put to nearly such severe strain as is the McManis table, consequently it costs less to manufacture. A McManis table, it should be remembered, is much more complicated in its parts than a surgical table, and it must stand the strain of all sorts of movements, as well as lending itself to various adjustments.

To meet the requirements of the osteopathic field it has been necessary to bring the McManis table to such a state of mechanical perfection and material strength that an operator can, as it were, "loop the loop" with it, and all without noise or friction. Of course, the cost of the McManis table is not really the thing of supreme importance. What the operator gets out of it is what it makes possible for him to do; and the saving of strength and health are the things that really count with him. However, it is an interesting fact and a credit to the McManis Table Company.

(Continued to page 28)
ESPECIALLY RECOMMENDED for HIGH SCHOOL STUDENTS

The June issue of Osteopathic Health is remarkably effective educational propaganda to put in the hands of high school students, or recent high school graduates.

It will impress upon the mind of any young man or woman that if he wishes to make the profession of healing his life vocation, he should join forces with the new, progressive, efficient School of Osteopathic Practice and steer clear of the decadent system of drug ditting.

Now is the time to get busy on this project. Lists of the recent graduates of high schools are available if you reach the proper parties in your community. Take quick action; send us the list; we will address envelopes and mail magazines promptly. Special price for high school work only, and in 1,000 lots only, $35.00 per thousand, including postage and addressing.

OHSERVICE—The Bunting Publications, Inc.
9 So. Clinton St. CHICAGO

No. 21

Osteopathy: Synonym Surgery

A Lame Back Cured
Typhoid Spines
Disabled Wrist Restored to Usefulness
Intercostal Neuralgia Caused by a Slipped Rib
Sagging Stomach or Gastriculosis

Do You Need an Assistant This Summer?

The Osteopathic Physician has made arrangements with the various colleges whereby the 1918, 1919 graduates and recent graduates who desire to act as osteopathic assistants during the summer months may advertise their qualifications without cost to them. Details of how to do so are listed below.

If you are an osteopath in practice, here is your opportunity to take a vacation or cut down your working hours during the warm weather. Also it is your duty to help the coming osteopathic physicians in their struggle to make a success.

If you employ any of the students whose names appear below please notify us so that the ad may be stopped.

Do not let this chance go without riding the tide of opportunity for its fullest educative achievement.

Use the Galli-Curci number of Osteopathic Health liberally. It will educate.

The rest of the magazine is full of human interest and shows clearly the advantages of the new osteopathic viewpoint in diagnoses and therapy as it applies to half a dozen diseases. These are:

Gallstones.
Passive Congestion of the Liver.
Bed-wetting.
A Dislocated Neck.
Rheumatism.
Melancholia.

There is a sensible statistical comparison between Aspirin and Osteopathy as rival methods of treating Influenza. It will help the reader make an easy choice between osteopathy and drugs in combattng the acute infections.

Yes, indeed, this August OH is a very fine production, and we feel sure you will put the seal of your approval on it and give it the usage it merits.

Mme. Galli-Curci's Wonderful Tribute Still Pulling for Osteopathy

By Henry Stanhope Bunting

You will like the August installment of Osteopathic Health because it puts osteopathy's best foot forward in such a complimentary manner. The leading feature comprises one of the greatest advertisements for osteopathy ever chronicled—the Benefit Concert of the world famous coloratura soprano, Mme. Galli-Curci, for the Chicago Osteopathic Hospital. This notable society event in Chicago's Auditorium was the greatest artist's tribute to the worth of osteopathy as she had found it as a patient. Her precious voice—the like of which there is not another on earth—chose this beautiful way to sing to all the world her appreciation of osteopathic therapy, her gratitude for what it has been to her in her artistic work. It was the first and only benefit the diva ever gave in her life. Her policy against benefit performances is well known. Therefore choosing this opportunity to break her rule and precedent was accepted in art circles and society as all the greater testimony to the school of healing of her adoption.

Would you not be proud to send this great operatic queen's testimony to the worth of our school of therapy to many of your people of your community who will be impressed with its significance.

We may wait for a long time for another such opportunity—and yet, by making the most of such occasions and giving them wide publicity, we may help to set up other such helpful currents which will work to bring osteopathy to its own.

Another thing: this Galli-Curci story circulating in the August magazine will serve to call more general attention to the fact that the osteopathic profession is founding and developing high grade hospitals and sanitoria all over the country. The people need to know this. It is our due. By circulating this news story of how the queen of singers discharged her personal debt to the science of osteopathy you will have them realizing unconsciously that osteopathy really has its own hospitals. The things that sink in on people indirectly are often the impressions of the greatest permanent value to them.

Do not let this chance go by without riding the tide of opportunity for its fullest educative achievement.

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Yes, indeed, this August OH is a very fine production, and we feel sure you will put the seal of your approval on it and give it the usage it merits.
I am enclosing check for June issue of Osteopathic Health. I wonder how many surprises Dr. Bunting has up his sleeve left. I was beginning to think he must be out of new material. This June issue certainly caps the climax. Send me 150 extra copies of it.-A. M. McNicol, D. O., Dixon, Illinois.

**Prices on McManis Tables Must Be Advanced**

(Continued from page 27)

that considering the problems involved the adaptability of its mechanism and its cost of manufacture, the McManis table is the cheapest mechanical table ever put on the market. The table is a great boon to the osteopathic profession and it has always been offered to the profession on a fair and square basis, so if you want the advantage of present prices buy quickly and it prices are advanced, do not complain but rather consider the real worth of this equipment as an aid in training, a saver of energy and preserver of your health and strength. Why waste your vitality lifting the dead weight of your patients when you can make the McManis machine do the actual lifting for you? It saves your back. How much money is your back worth to you?

- Nebraska.

**Californians Win Two Bills; Lose One**

(Continued from page 93)

decisive legislative battle the Examiners passed 932. Perhaps less than two osteopaths in this state expected 933 to pass. Not because it was not just in every way, but because they felt we lacked the organized strength to pass it. Only the deliberate refusal of the Governor to grant the wishes of the people as expressed by their representatives kept 933 from becoming a law.

This last act on the part of the Governor was all that prevented a 100 per cent victory for justice and fairness. What is the answer—organization. But what is organization? It is but a uniting of the efforts of the individuals who comprise it. Under the new plan the way is open for every osteopath to serve, to take part in deciding the future of osteopathy and to assume the responsibility of carrying out this decision.

The new plan of organization provides an opportunity for every osteopath to sacrifice that osteopathy may live, and nothing of real value has ever been gained by any individual or organization without sacrifice.

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**The Osteopathic Catechism**

Everyday Questions
Answers That Pass Between Patient and Practitioner

No. 22

Facts and Fallacies Regarding Osteopathy

- How People Get Ideas About Osteopathy
- Some Illicit It Is What It Is Not
- Osteopathy Not Secure—Osteopathy Not Rough
- Modern Fears Present Relief
- Some Think Osteopathy Are Treated Wild
- How Patients Dress for Treatment
- Many Believe Osteopathy "Good Only for One Thing"
- What Osteopathy Can Do for Disabled Mothers

No. 17

The Osteopathic Physician

Dr. Elliott's Diamond

Ask Colonel J. W. Elliott, D. O., of Cordele, Georgia, how it comes he wears diamonds and he will tell you:

If you write him for the secret he should enclose a stamp for reply. He doesn't mind telling any osteopath who is interested. He told us and we believe him.

Delta Omega Meet

The Grand Chapter of Delta Omega Sorority held its business meeting July 1 at Delta headquarters, Suite 01A, Sherman House.

Dr. Ella Still was unable to attend the convention on account of the illness of her mother. Her absence was greatly regretted.

Delta Club Reunion

The Delta Club held its biggest and best reunion dinner at the Italian Room, Sherman House, Wednesday of convention week. Dr. Drinkall presided. Dr. Hugh Russell, Dr. H. O. Bunting and others spoke. At the finish the new organization of AOA ex-presidents came over in a body by invitation and Dr. Frizzell made a little speech for them.

Dr. Edgington Appointed Health Officer for Albany County, Wyoming

Dr. C. O. Edgington, of Laramie, Wyoming, has been appointed local examinator for the Western National Life Insurance Company.

At the Italian Room, Sherman House, Wednesday of con-
The Osseopathic Physician

Kansas Board Grants Certificates

The Kansas Board on June 20 granted certificates to thirteen graduates of that city, who are in a number of good locations in this state for live, wide-awake D. O.'s. Those who are interested for any information will be gladly furnished by the Secretary of the Board to any graduate of the regular course of study. Kansas and Kansas people need all of the up-to-date prac-
tioners we can locate in these states. Kansas has never been so prosperous in all her history.—E. Claude Smith, D. O., Secretary.

Noted AOS Athlete Seriously Scalded

William Bohn, noted AOS athlete, who took part in the Western Conference discuss record at Ames, Iowa, and won the shot putt, then took second in Chicago in the discus thrown in the Big Ten Conference. His figures seriously injured the night after the Chicago meet when he stepped and fell under a scalding stream of water for a shower bath in the Chicago Y. M. C. A. His condition became so serious on Sunday that he hurriedly following lines to the AOS Hospital, Monday, June 9, arriving there with a high fever. He was immediately put under treat-
ment and is now doing much better.

California Association Meets

The California Osteopathic Association held its eigh-
teenth annual convention recently. It is said that this conven-
tion was one of the best that was ever held. The follow-
ing speakers took part: Dr. Tasker, Dr.懿rline, Dr. Gaddis, Dr. Goodfield, Dr. Spencer, Dr. Bauder and Dr. Morgan. Some very inter-
esting clinics were held, some of them starting as early as 4 o'clock in the morning. One of the most interesting feature of the convention was when the Western Osteopathic As-
sociation, comprising the states of California, Oregon, Washington and Idaho, was formed.

New Officers for West Virginia Osteopathic Association

The following officers were elected for the ensuing year, of the West Virginia Osteopathic Association, which was held on June 2 and 3: President, Dr. A. C. Thibeau, Bluefield vice-president, Dr. John J. Henderson, Huntington secretary-treasurer; Dr. G. E. Morris, Clarks-
sburg; Delegate to National Constitutional Convention, Dr. J. H. Robihett, Huntington Dr. G. E. Morris, Clarks-
sburg; Delegate to National Convention, Dr. M. A. Boyes, Parkersburg. Place of meeting next year, Morgantown.

Chairman Program Committee, Dr. J. D. Miller, Mor-
gantown.

Dr. R. R. Keiningham, of Baltimore, M. D., Makes an Appeal

Dr. Robert R. Keiningham, of Baltimore, Maryland, recently fulfilled in the Superior Court an appeal to the Court of Appeals from a recent decision of Judge Coloton, holding that, for the purpose of being enrolled by the health department as a medical practitioner duly author-
ized to certify births and deaths, an osteopath is not a "physician" within the meaning of the law relating to the registration of vital statistics. Judge Bond's decision was rendered in connection with mandamus proceedings instituted by Dr. Keiningham against Health Commis-
sioner Blake, after the latter had refused to register for the purposes mentioned.

Dr. J. W. Jensen Served Uncle Sam as Hydraulic Engineer

Figuring that poor Kaiser Bill was getting too much wind, Uncle Sam, on the cold night of the 7th, Monroe, Utah, left his happy home last September and went to Explosive Plant in the west. He entered the service of Uncle Sam as hydraulic engineer for the duration of the war. He received the discharge from the Ordnance Department last March. He then went to Morristown, Arkansas, where he is now located. The people there seem to like Dr. Jensen and to like osteopathy, and he has established an excellent practice. Mrs. Jensen and the Jensen boys are visiting at the old home in Utah, but they expect to join Dr. Jensen in Arkansas in the near future, and if everything goes right Morristown will be their permanent location.

Western Ontario Osteopathic Association Meets

The sixth annual session at Kitchener, Ontario, on June 4, 1918. Election of officers resulted as follows: President, C. M. Saunders, Brantford; vice-president, R. Harkins, London; secretary, C. R. Merrill, Stratford; treasurer, L. M. Heath, Guelph. Honorary members: Dr. R. R. Keiningham, Heidelberg; Gocherich; C. Irwin, Brantford. Drs. E. D. and M. L. Heist entertained the association at luncheon and exhibited their spacious new offices just acquired. Program follows: "Spencer Technique in Shoulder Bur-
sion," C. R. Merrill; "Focal Infections," J. G. Heil-
eman; "Nervous Insufficiency," C. Irwin; "Superior Costal Systhus," E. D. Heath; "Adjuncts in wound Recon-
struction," Captain J. N. MacRae, D. O., recently from France, gave a very interesting address, and he and Dr. J. R. Witham, also returned, were given a hearty wel-
come back.—C. R. Merrill, D. O., Secretary.

Maryland City Has Good Location for Osteopath

The following communication was just received in our office, which explains itself: Is there anywhere in the United States a young osteopath who would like a good location? He can be married and so much the better. We have a man located in the town now and he desires to leave and open up a sanatorium in the western part of the state. Here's what he says about the location: "I am sure it is a good location and anyone who cares to stay and work the thing up will have a mighty good thing of it. If you find a nice young osteopath looking for a location, this is the place. If he will go to church and get into society he will go along some." Now, don't crowd, but remember our aim is the first come the first served all. If you want to be married and so much the better. There is a live crowd of osteopaths for you to work with. Write Dr. R. R. Keiningham, Bluffton, North Carolina Street, Baltimore, for terms of license.

Pennsylvania Association Meets

The twentieth annual convention of the Pennsylvania Osteopathic Association was held at Lancaster, Pen-
nsylvania, May 26 and 27. It was an exceptional meeting, and a fine program had been arranged. The following speakers took part: Dr. Ira W. Drew, Philadelphia; Dr. Nor- man, Boston; Dr. Stewart Moore, of London, president of the British Osteopathic Association, and Dr. Tom Smylie, of the Australian soldier, and Dr. Claude M. Banirtol, of Canada. The executive committee was elected: President, Dr. Nettie C. Turner, Philadelphia; vice-president, Dr. L. W. Jensen, Lancaster; secretary, Dr. Ira W. Drew, Philadelphia; treasurer, Dr. Lr. Bogger, Harrisburg; executive committee, Dr. R. G. Jones, Lancaster; E. M. Dowding, York; R. W. Sweet, members of board of trustees, R. B. W. Sweet, Kerie; Dr. Frank R. Kann, Harrisburg.

Pennsylvania Osteopathic Association Meeting Has Wonderful Publicity

The annual meeting of the Pennsylvania Osteopathic Association was held at the Statler Hotel, May 26 and 31, at Lancaster, Pennsylvania. Dr. J. W. Murchie, Lancaster, presided. Dr. L. W. Jensen, then located at Den Moines, Iowa, was a member of the executive council and chairman of general arrangement committee. It was interesting to see from the program the effect of an active publicity campaign. To superlative attended the convention, also several cartoons of the speake.

The publicity committee was also able to get in very good stories in about the St. Joseph, Missouri, hospital, and complete plans of the proposed addition. In checking up the various papers, there was a total of approximately twenty-three full columns printed on the convention news.

"The Brush-Up and Cool Off Meeting"

The Rocky Mountain Osteopathic Conference will be held at Boulder, Colorado, on August 4 to 8, inclusive. Every D. O. in the United States is invited to attend this tremendous success of last year's Boulder Mountains Osteopathic Association Conference held at Colorado Springs. This year's meeting will be bigger and better than ever. A much larger crowd is being arranged for. No graduate of any osteopathic school in the United States is invited to attend to get the new ideas that will be handed out by the high-brows, and to cool off in the Colorado mountains.

The program will be one of the best ever given outside of the national meeting. A considerable number of leaders of D. O.'s from various parts of the country have been secured to give us the last word in osteopathy. The program will be extremely practical, altho practically all of the latest things will receive due attention.

Boulder, Colorado, is the home of the largest Cau-
tau, the west and is well known to tourists. The air and the superb mountain scenery attract thousands each year. The altitude is 5,352 feet. Snowy peaks are continually visible. The altitude is less than 11,000 feet. In Boulder there are 12 hotels, 11 of which are very well located.

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Dr. Charles J. Mattart, of Philadelphia, divides time equally between his large Philadelphia practice, teaching at the Philadelphia College of Osteopathy, and picking pippins at his apple orchard up the Chest Valley.

Dr. Elizabeth Jackson Geyer was married, June 7, to Mr. Frank L. Kelsey, of Ekhart, Ind. They will reside at Ekhart, It. Dr. Geyer Kelsey will continue her practice.

Dr. I. I. Chamberlain is practicing at Oberlin, Ohio. He took the Ohio examination early a year ago so he can be married and live in or near Oberlin, where Dr. Geyer Kelsey will continue her practice.

Dr. C. Merwin Bueller, of Tuscumbria, New Mexico, states that he is going out into the mountains for a sanatorium. In the fall, he can live wild and wooly and to

Museum of Osseopathic Medicine, Kirksville, MO
Miss Marion Lychenheim, daughter of Dr. Morris Lychenheim, received the solo specialty for compositions at the American Conservatory of Music of Chicago. She has been playing the violin at the Chicago Osteopathic Hospital at a gathering of physicians and friends.

Dr. Nestie C. Turner, of Philadelphia, was recently elected president of the Pennsylvania Osteopathic Association at the twentieth annual convention at Lancaster. Turner is the first woman chosen to head a state osteopathic association. She has acted as secretary of the association for the past two years.

The degree of M. D. was conferred upon Dr. R. Kennicott Smith, of Boston, on June 30 at the fortieth annual commencement of Colleges of Physicians and Surgeons in Boston. Dr. Smith has been appointed special lecturer upon orthopedic surgery at this institution.

Dr. F. M. Haines, of Hutchins, Kansas, in a recent letter states that he and Mrs. Hains have taken a vacation for a month in Colorado. They are going to stay the whole month except the one spent at the Colorado convention.

Lieutenant R. E. Curry, who was first lieutenant in the Twenty-fifth Infantry, is again associated with Dr. J. J. Nowlin, at Farmer City, Illinois. Lieutenant Curry has been commissioned second lieutenant at the first officer's training camp at Fort Sheridan, Illinois, and was later transferred to St. Louis, Missouri. After twenty-two months' army life he is glad to be in practice.

Dr. M. D. Siler is now back in active practice at Big Rapids, Michigan. Dr. Siler entered the service in the fall Corps, May, 1918, and went across to France last August. He returned to Detroit, September 13, and entered the service under the War Department. He was commissioned first lieutenant in the A. S. O. Dr. Siler has a very good practice in Big Rapids, and that things are going well.

Dr. Hugh Beaton, who was recently discharged from the Medical Department United States Army, has opened offices at 408 First National Bank Building, Danville, Illinois. Dr. Beaton has been a very successful officer and a successful officer since his return to civil life. He was Pound, a constant and patient, a very capable officer.

Dr. E. J. Carson, formerly of Fayetteville, North Carolina, has been hosipitalized from the service of the United States Army. He was one of the first who volunteered for the service in North Carolina, and entered the service in the Army of the Confederate States of America. At the time of his discharge he held the rank of Captain. Dr. Carson was poorly two years overseas and was in the thick of the fighting, and went to the rear many times. He received a citation for bravery in action. Dr. Carson has been actively engaged in his practice of osteopathy, but expects to make a decision in the near future. He will not return to Canada, where he is from, but will go to either in North Carolina or some other southern state.

Dr. James H. Bell, from Newark, Ohio, to 209 Feick Building, Sandusky, Ohio.

Dr. A. D. Finch, from Sweet Springs, Mo., to Fay Mo.

Dr. Harry C. Englehardt, from 117 N. Wood St. to 2529 Broadway, Chicago, Ill.

Dr. James H. Bell, from Newark, Ohio, to 209 Feick Building, Sandusky, Ohio.

Dr. H. C. Osborn, from Baltimore, Md., to R. F. D. 1, Berlin.

Dr. D. H. Downey, from Columbus, Ohio, to 760 Por Ave., South Bend, Ind.

Dr. Everett W. Wilson, from Red Wing, Minn., to St. Paul, Minn.

Dr. Thompson & Cleariy, from Post Office Building over Wetter in Des Moines, Iowa.

Dr. H. D. Howse, from Chicago, Ill., to 601 Guardian Bldg., Chicago, Ill.

Dr. L. E. T. Dyer, from Baltimore, Md., to R. F. D. 1, Berlin.

Dr. Louis H. Hanavan and Miss Margarette Elizabeth Hanavan, of Chicago, Ill.

Dr. Elizabeth Jackson Geyer and Mr. Frank L. Kelsey, of June 7, at Elkhart, Ind.

Dr. E. J. Bartholomew, of Maywood, Ill., May 26, after a very long illness.

Dr. Minnie Shaw at the home of her parents, Mr. and Mrs. C. L. Shaw, Enid, Okla., on March 22.


Dr. Hubert F. Leonard, D. O., M. D., Osteopathic Physician, 1410 H St., N. W., Washington, D. C.

Dr. J. C. Howell, Osteopathic, Ophthalmic and Oculist, 3 N. Orange Ave., Orlando, Florida.

Dr. Frank J. Stewart, Osteopathic Specialist, Genito-urinary and Venereal Diseases Room 1201, 7 W. Madison St., Chicago.

Dr. Preston R. Hubbell, Osteopathic Physician, 504 Fine Arts Bldg., Detroit, Mich.

Dr. Percy Evan Roscoe, Osteopathic Physician, Limited to Eye, Ear, Nose and Throat, 602 Ridge Bldg., Kansas City, Mo.

Dr. W. Bruce Lynd, Osteopathic Specialist, 601 Guardian Bldg., Cleveland, Ohio.

Dr. J. Deason, Osteopathic Physician, 2 East Monroe St., Chicago.

Dr. W. F. Adair, Commerce, Ga.

Dr. E. F. Amsden, Adenectomy, Tonsillectomy, 321 Land Title Bldg., Philadelphia.

Dr. J. Deason, Osteopathic Physician, Specializing in Ear, Nose and Throat, 27 East Monroe St., Chicago.

Dr. W. Ots Galbreath, D. O., Osteopathic Physician, 601 Guardian Bldg., Cleveland, Ohio.

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