The Bulletin of Atlas & Axis Clubs
Devoted to the Science of Osteopathy
February, 1909
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SYMPATHY.
BY ELLA WHEELER WILCOX.
Is the way hard and thirsty, oh my brother?
Do tempests beat, and adverse winds blow?
And are you spent and broken, at each nightfall,
Yet with each morn you rise and onward go?
Brother, I know; I know. I, too, have journeyed so.

Is your heart sad with longing, oh my sister?
Are all great passions in your heart aglow?
Does the white splendor of your own soul blind you,
And are you torn with rapture and with woe?
Sister, I know; I know. I, too, have suffered so.

Is the road filled with snare and quicksand, Pilgrim?
Do pitfalls lie where roses seem to grow?
And have you sometimes stumbled in the darkness,
And are you bruised and scarred by many a blow?
Pilgrim, I know; I know. I, too, have stumbled so.
Do you send out rebellious cry and question,  
As mocking hours pass silently and slow?  
Does your impatient "Wherefore?" bring no answer,  
While stars wax pale, and waning moons drop low?  
I, too, have questioned so; but now I know, I know;  
To toil, to strive, to err, to cry, to grow,  
To love through all—this is the way to know.  

OSTEOPATHY.  

DR. GEORGE M. LAUGHLIN, KIRKSVILLE, MO.  
(A lecture, in part, delivered before the Atlas Club in December, '08.)  

For several years I have been asked here to talk about osteopathy.  
I have always chosen this as my subject, with the exception of a few times when I held clinics here. Tonight I shall talk of some of the important things to our profession, and also run over some of the minor points, at random.  

Osteopathy was founded by Dr. A. T. Still many years ago, and it was founded upon a certain basic principle. We have applied this principle and must continue to apply it. Osteopathy is not a perfect system we have no perfect system of therapeutics—but it is becoming a more perfect and a better system. We are getting better results every year, and as long as this continues there need be no fear of us coming to an end.  

Sixteen years ago Dr. A. T. Still started a local practice here, which grew so rapidly that he decided to teach others the science that he would have assistance, so the school was established.  

At that time there were but few students and few teachers. Anatomy and manipulations were about all that was taught. To-day most of the subjects as taught in other medical schools are taught here. All of the improvements have been made as our experience has shown us the need.  

All of you have read definitions of osteopathy. Most of our journals give a definition of osteopathy. Also some dictionaries, most of which are more or less correct. A number of years ago one defined ours as a fake system of practice. And many people thought the same, a few do now. In general, the M. D.'s do not speak of us as such any more. Yet, they are not to be blamed, in a way. Why? They are taught that medicine is the thing, and are prejudiced against any other system, and osteopathy was not presented to them in the right way. There used to be a good many fakirs about over the country, but there are not very many now. These were not competent and were not honest, hence the medical men are not to blame.  

I will give you my definition of osteopathy and explain it. Osteopathy is a system of practice wherein it is considered that most diseases are either caused by, or associated with, maladjustment of structure. We always look for an abnormality of structure in connection with disturbance of function, then assist nature—which is all any method can do. Maladjustments are not always present before the disease, but may be due to it. Osteopathy is, then, a system where we apply methods of correction of abnormal structure, wherever indicated. Remove the obstruction, and you will get a cure, if the disease is curable.  

There are many incurable maladies. One reason to-day that osteopathy is better than it used to be is because we have learned, and teach, more about pathology, and the class of diseases which are amenable to treatment.  

I would not say to not treat one of the diseases generally considered incurable. Every sick person needs treatment. But be able to recognize the class of disease, and do not promise too much. Every physician should know what he is doing.  

I have heard practitioners say that we should treat only by osteopathy. Now, I am an osteopath and do not know much about medicine, but I treat many cases that I do not manipulate. For instance, hip joint disease, tuberculosis of the spine, etc. Still, I treat osteopathically. Our method requires not only that we adjust but that we have a thorough knowledge of handling diseases, which knowledge includes a knowledge of the histology, pathology and etiology of the disease, as well as the knowledge of the proper management of the case,—nursing, bathing, fresh air, etc. Every physician should have this knowledge.  

For instance, you are called in to see a patient with typhoid fever. Examine the patient—solicit the symptoms present, come again, observe the temperature wave, the eruption, pulse, etc., and diagnose the case. Then treat osteopathically, not medically. Manipulate the neck, relieve the headache. Treat the back for innervation to the intestinal tract, give emenata, supply means for fresh air, keep the patient's mouth swabbed out daily simply for cleanliness, observe dietary regulations closely, and watch out for complications, such as hemmorhage, coma, etc. You must look out for the care of the patient and for the diet. These are all under your management and to get best results by your treatment these must be looked after and carried out.  

Knowledge belongs to no one profession. Some say we ought not study medical books. This idea is wrong. In some of them is compiled knowledge of the ages, as, for instance, diagnosis, etiology, pathology of
different diseases, but these compilations are made by medical men. Get knowledge wherever you can. You never get too much, more often too little.

Will osteopathy last? Some have said that it will not. I remember, before taking up osteopathy, that an old uncle of mine said that it was a good thing, but it would not last, and that I had better hurry and get into it while it was popular. Well, I got in but it has lasted. Many thought it not scientific, but it was only not presented in a scientific manner. We depended on the sick we treated getting well, and this has, to a large extent, established osteopathy with the public. We are just now getting in a position to present it in a scientific manner. Osteopathy will last as long as our treatments do good; as long as osteopaths give conscientious treatments; and as long as we understand and apply the principles upon which our system is founded; when we cease to adhere to these principles osteopathy will die.

I believe, however, that this will not be the case, and that our following will increase, as is indicated by the large classes in all of our schools this year. I have been over the country a good deal, have attended osteopathic meetings in the various parts of the country and I find that the practitioners, everywhere, are doing good business, if honest and understand their business. So I think there is no need for alarm. Of course we will meet with problems. But if we use judgment, gained from our experience, we will solve these problems and get around the difficulties which present themselves.

I will give you a few points on how we can make osteopathy last. Any profession depends upon its representatives. Here we must get men and women into the profession who are competent, who come here, or to other good schools, with determination, become well grounded in the subjects taught and in the science. They must become, as it were, deft handed, must have judgment, and must learn how to meet the people. Such practitioners will have success as sure as the sun rises. Thousands of people are seeking aid, and are willing to pay to be cured.

Why have some failed at osteopathy? Because, first, of incompetency. Second, bad habits, such as drinking, gambling, etc. Many bright and competent fellows go this road, and soon have no practice. Third, lack of seriousness. A physician should be serious at times, at any rate when he is treating the sick. Fourth, laziness. All students are lazy, more or less, but when you go out and get a practice you must work, or you will not succeed. You cannot give a treatment in two or three minutes, and get results, and if you do not get results you cannot hold your patients.

Do not claim too much for osteopathy. We do not need to. It can stand on its own merits.

The outlook for osteopathy, to me, is good. In ten years I think the number of practitioners will be double the present number; a larger per cent of the graduates will stay in practice; we will have a hundred good men capable to write books, now we have only a few; we will see osteopaths double their income; we will see twice as much satisfaction from osteopathic treatment.

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THE PSYCHOTHERAPY SITUATION.

ALFRED W. ROGERS, A. M., D. O., BOSTON, MASS.

Jupiter Medicus has shaken his locks and all Olympus reverberates with the thunder of his protests.

A month ago the medical physicians of Boston, joined forces in a concerted denunciation of the so-called Emmanuel Movement in Boston. Now, the Emmanuel Church is the church in which its pastor, Dr. Worcester, undertook to give clinics in suggestive treatment to those afflicted with "functional" disorders. From the beginning made in this church, the work of giving psychotherapeutic treatment has been undertaken by a few other ministers in this city and here and there in other cities of the country. There is much hearsay evidence and some statistical evidence from the hospitals which shows that this, "together with other non-drug systems" has reduced the number of prescriptions filled in this vicinity. How do the eminent medical men of The Hub like this state of things? The answer is found in the headlines of a six-column exposition in the Boston Herald of Dec. 27: "Emmanuel Movement Is Deplored by the Physicians of The Hub."

To show the natural, first outburst of feeling I quote the doctors as follows: "Oh! I'm tired of the whole matter. I prefer to be silent upon the subject"—Dr. W. N. Bullard. "I am so tired of hearing about the Emmanuel Movement that I can not say anything fit to print."—Dr. George Waterman, Harvard Medical School. "I do not indorse the Emmanuel Movement. I never have; I never shall."—Dr. J. W. Courtney.

This surely shows a revulsion of feeling. Some of these doctors' opinions of the psychotherapeutic practice are instructive, and may be helpful to some of the osteopathic physicians who feel inclined to load up on psychotherapeutic buckshot and label that "also osteopathic" because, forsooth, it is "non-drug."

Dr. J. J. Putnam, professor of nervous diseases of the medical school
at Harvard University, when asked the question: "Do you indorse the Emmanuel Movement?" replied: "By no means. Personally, I wish to protest against the use of my name in any manner in connection with the so-called Emmanuel Movement. I consider the whole affair an injury to the progress of scientific medicine, especially to neurology, and to the intelligence that has made possible the recent discoveries in this delicate branch of medical science. At the present movement the claims of the Emmanuel people are misleading, if not something else. The public lecture at a dollar admission, in other cities, and other well known commercial methods, do not look well in either priest or doctor. The crowd of untrained and unifed clergymen who at once jump into the role of medical men and preach and practice what they call psychotherapeutics is going to do great harm, is an injury to the public welfare." Dr. Putnam quoted Dr. Daria's address at the meeting of the Philadelphia Neurological Society: "We, as neurologists, are confronted with the fact that an enormous number of mentally sick people are running around and getting their psychotherapeutics from the wrong well. They go to the various kinds of "cures" that are based upon mystery, superstition, ignorance, hysteria, morbidity and emotion, and a great many people are injured by them." The public are led to believe that there is a decided line between functional and organic diseases, and that the untrained— the clergymen throughout the country—can mark this line, when, in truth, the experienced neurologist is not at all certain. Old ideas are falling fast in this branch of medicine, and a man must be well versed in neurology and psychology before he is certain of any one fact.

"Let us take neurasthenia, for instance. It is this much abused word that the Emmanuel movement has started around the country. I uphold the fact, with many others, that there is a bodily relation to the symptoms found in this disease."

Dr. William Lee Howard, one of this country's foremost authorities on certain forms of morbid mentality, had this to say in a lecture at the College of Physicians and Surgeons, Baltimore: "To be successful with neurasthenics you must give each case much time. There are no persons so susceptible of self-deception as these. They will also deceive you unless you have had many years' experience with men and women outside of your professional duties. Suggestion is absolutely of no value until you have, by every possible method known to physiologic science, eliminated a physical cause. Even when you think you have eliminated all and every cause, experience will convince you that in reality are but few if any real functional diseases.

"Oh, there is a lot to say about the fallacies in this Emmanuel movement. But I don't intend to say anything about this particular fail; a general statement regarding such work in general ought to enlighten the public.

"The trouble with all these religious sects that claim to cure diseases is that they mix up metaphysics with physiology, sin with pathology. Medicine absolutely ignores the question whether sin is a cause of disease, or whether the man needs the clergyman instead of the physician. That is, if he needs medical aid we must treat him—if he is merely suffering from a starved soul, then we advise him to see the minister. You see, I do not believe in any mixture of treatments.

"Medicine busies itself with pathological changes that may be observed in man, and looks upon illness and disease as disturbances in the anatomical conditions and functions of the body. This standpoint must always be taken by the practitioner in the choice of his remedies. Being an applied science, medicine must needs adhere methodologically to the tenet that effects are the results of certain causes; that, so long as effects can be explained as the result of certain causes, no other explanation is required. Only when this explanation proves an utter failure should new and unknown forces be looked for."

"That point has not yet been reached. In fact, it is farther away than ever, because recent studies in psycho-pathology have shown us that probably all functional disturbances have some physical basis—neurasthenia, for instance, or psychasthenia, as the clergymen like to say. Most of the cases of neurasthenia are due to a self-poisoning. That is, that there is a faulty chemical process going on in the patient's body and the poisons which should be thrown off remain stored up, consequently the man suffers depression, melancholy, sometimes a mania, is constantly complaining of pains in the head and all the other symptoms too well known to describe.

"In my first decade of enthusiasm for the power of suggestion I attempted to treat neurasthenia by this false method, but a close application to the progress of chemical physiology and neuropathology added to the fact that these cases treated by suggestion never remained cured, but generally became worse, convinced me that I was blinded by the suggestive flare, and I changed my method of treatment. That is, I treated these neurasthenics by rational physiologic methods and had results.

"The results claimed by the Emmanuel healers can, without the aid of mystic powers and a jumble of meaningless terms all hanging on to the tresses of psyche—such as psychasthenia, which literally means 'soul
exhaustion,' be explained by well known forces possessed by every physician and which have been used for centuries but without advertising the fact in the papers and magazines.

"My great objection to the Emmanuel fad is that suggestion indiscriminately used is injurious to the self-centred and the neurotic when they are gathered together in crowds or where three or four are waiting in anxious anticipation to see what comes next. It is playing upon the emotions that is the prominent factor in these temporary cures.

In the craze for matters psychological they neglect the fundamental principles of the art of medicine. However, we can put them back in the proper line and soon bring them down to the real facts. But we cannot do this with the increasing number of untrained clergymen who enter in where the general practitioner rightfully fears to tread.

"The Emmanuel Movement is also harmful in this way: It neglects to inform the public that a physical basis is generally at the bottom of most nervous disorders—dipsomania, for instance.

"The first thing a neurologist tries to do before using psychotherapeutics is to put the patient upon a sound physical basis. Then we have solved part of the problem in regard to mental conditions. I shall have much to say upon this matter in my lectures this winter to my students.

In relation to the statement of Dr. Howard, Prof. Munsterberg's lecture at Cornell the other day contained some pertinent facts. This eminent Harvard professor told his audience: "Psychology can cure the ills which arise from functional disease, but when it gets to the disease itself it stops. Clergymen are not able to enter the real psychology of a case."

Dr. W. N. Bullard, consulting neurologist to the Carney Hospital, said:

"The corner-stone of the movement, according to the repeated statements of Dr. Worcester, has been the co-operation between the medical profession and the church. In this matter there has evidently been much misrepresentation. The fact is that the medical profession as a whole in this city, as in others, never has stood behind the movement and is increasingly less inclined to do so. * * * The harm it does is fundamental; it places both the medical and clerical professions in a false light; it raises false hopes; it interferes with the relations between doctors and their patients; it encourages superficiality in the consideration of a great problem; it misrepresents the significance of the psychotherapeutic movement; it is an abuse of medical charity; it retards progress in the only direction in which normal psychotherapeutics can grow, through the medium of the medical profession. * * * We can see in it few elements of permanence."

Dr. J. J. Thomas, assistant professor of neurology, Tufts Medical College, said:

"We have many so-called functional diseases whose causes are due to moral lapses. Let the clergymen treat such individuals so as to prevent these moral diseases and we physicians will not have to treat the real diseases, which are the aftermaths. There are many, very many, broad minded, conscientious Christian physicians who treat these cases from the moral as well as from the physical side. They understand both sides; the true clergymen cannot get a full understanding of such matters.

The position taken by the medical practitioners is sensible from their point of view. In the several opinions quoted that a physical basis exists for the so-called functional disorders, even mental as well, it is also sensible from the osteopathic standpoint. Nobody is disposed to quarrel with the medical practitioner who uses either hydrotherapy or suggestive therapies when he considers such treatment desirable. Similarly, nobody is disposed to quarrel with the osteopathic practitioner when he uses these methods. But the thing that seems to me unnecessary and unwarrantable is to call either of these procedures osteopathic. Especially it seems to me, unwise and undesirable to strain our philosophy out of shape and strain the definition of osteopathy so as to include such forms of practice; for we can not foretell how much assistance it may give us before legislatures and before the courts to have a fixed and accepted philosophy, coupled with an unvarying definition.

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CASE REPORTS.

DR. WILDER P. SNAPE, ALLIANCE, NEBR.

First case was one of a young man, married, age 21 years, a painter in the R. R. shops here.

On Nov. 27, 1907, while painting at the R. R. shops, patient had a light fall from step ladder and thought himself unhurt. This occurred in the forenoon and at noon discomfort increased to pain so that he did not return to work that afternoon. Pain increased rapidly, and the R. R. M. D. was called. Patient suffered severe pain, and without rest, for 28 hours, under medical care.

In the afternoon of Nov. 28th 1 was called in, and found him suffering extreme pain. He, and the rest of the family, thought he had appendicitis and a hernia into the right scrotal sac. I had carried his brother through an attack of appendicitis, and his people sent for me, though against his wishes.
Pain area involved the entire abdomen, right hip and leg, with point of pain of greatest intensity in the right serotal sac. Serotum was edematous being nearly three times its normal size.

I examined for hernia and found none. The M. D. had said the same. Found no typical signs or symptoms of appendicitis, and told the family I expected to find an innominate lesion, explaining to them how it appeared and the significance of same. I did this to try and make a hit and show them that an osteopath really knows his business.

On examination I found right leg half an inch longer than left. (His wife and sister both thought his right leg was normally shorter than the left.) I reduced the lesion to the extent that the limbs were of equal length. Although the M. D.'s. had not been able to give him ease or sleep in 24 hours, he was asleep in less than half an hour.

I told the family I feared the contracted muscles would pull the innominate into lesion again, and that if he suffered any more to call me. So, I was called in that evening about 9 o'clock, and found limb long again, the condition being much the same as when I first saw him. I set the innominate as before, and the boy went to sleep, and rested all night. Next morning, the pain returned and he had the family call the M. D. again, and he suffered until Saturday. Saturday afternoon he limped into my office and sheepishly told me he wanted me to try him again. I said "all right, my boy, I am going to set that leg short to-day, let what may come of it." I did so, and he got off of the table, stepped around to try it, and remarked, "that is like magic, the pain is all gone."

He returned to work Monday morning and has had no more trouble.

Case No. 2.---This was a real estate man, about 45 years of age, who was laid up for six weeks with the grip, together with general pain and tenderness throughout abdominal area, the hip and whole limb, and edematous enlargement of serotal sac on the affected side. His medical attendant pronounced the whole symptom complex as being the grip settling in these areas. He limped around for two weeks before coming to me, after getting out of bed. I set his innominate in one treatment. He said he slept like a log that night, being the first night of comfort he had had since he was first taken sick.

I explained the condition to him, and it made an osteopathic convert of him.

These two cases are the only ones I know of that have produced such effects on the serotum and testicle. In each case the point of severest pain was in the testicle and spermatic cord.

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The Bulletin

THE BULLETIN
OF THE ATLAS AND AXIS CLUBS.

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Entered as second class matter, Oct. 12, 1903, at the post office at Kirkville, Mo., under act of Congress of March 3, 1879.

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Copies lost through change of address without notification can generally be furnished by the editor at ten cents per copy.

Kirkville, Missouri, February, 1900.

EDITORIALS.

In Remembrance of Saint Valentine's day has passed, but the memory of Saint Valentine's day has passed, but the memory St. Valentine, and tender token remain with us. The following poem, which, we understand, has emanated from the Baby Freshman class, and is a true story, was captured from a certain Atlas man. We regret that we are unable to give the very appropriate pen illustrations which originally accompanied the lines.

To Our Mutual Love--Our Valentine.

Dear ———! Rejoice! Sweet——! Be gay!
And always shout Hip! Hip! Hurrah!
Let us proceed then to relate
The tale of one fair maiden's fate.

Prior to launching forth at length
Let us suggest one small defense,
We wish you quite to understand
Our dealings are not underhand.

A pale, sad girl sat waiting lone
Upon a bench, as cold as stone.
The chill reached up unto her heart,
For cupi'd had withdrawn his dart.

The Bulletin

Kirkville, Missouri, February, 1900.
"He cometh not," rang forth her cries,
The tears were sprinting from her eyes.
Not far away a dainty batch
Of maidens buttonholed her "catch."
They kept him talking 'gainst his will—
He'd faint have quelled each with a pill.
At last he pushed them all aside
And to the depot wildly hied.
Meanwhile the lonesome one grew mad,
She thet her lover was a cad.
She tore her hair, she gnashed her teeth,
She fainted in a fit of grief.
But as the clock was striking one
Appeared the late, but rising "Sun."
The maid rose up, as she came to,
Her eyes gleamed forth the brightest blue.
"How now?" She said, "Thy face is flushed
My ——, My love, My bit of dust!"
With panting breath he whispered low,
"To Boarding-House I had to go."
"My table-mates surrounded me
So that I could not come to thee.
O little lamb! O little love!
I am thy turtle cooing dove."
Then peace was made, the wound was healed,
Her heart no longer was concealed.
A whistle in the distance sounded.
Then, with hop and skip rebounded
From off the seat he was upon,
And with one jump the train was 'on.
The maid came flying after him
With aid of "Force" and "Sunny Jim."
Our tale we have just almost ended,
But with some supposition blended
We will presume they ran away
As he has not been seen all day.

E. C. G. & M. P. L. M.

Our Freshmen.
On Jan. 23rd there was graduated the famous "Skiddoo" class, numbering 23 members. This class was unique in many ways, and maintained their identity, graduating with the same number of members as were matriculated into it their first year. There is another class, however, which is making itself known in the A. S. O., by their dauntless spirit.
The Baby Freshman class, as the class is commonly called, began its existence on Jan. 25th, just two days after the "Skiddoo" made their departure from among us. This class, of about forty women and men, is about the scrappiest crowd gotten together here for a good many years. On their first day they received, with elegant grace, their "initiation." But evidently they were not to be cowed by the large number of the second termers. So, after several little "spats" at school, in one of which some of the latter got their faces washed in snow, some of their brave members sealed the ice covered tower of the court house, and the next morning the colors of the Baby Freshman class flaunted defiantly to the breezes, from the base of the goddess of liberty statue. Later, the colors were removed, but were secured by one of the class, who sprinted across the square, pursued by half a score of his opponents. He disappeared up one of the stairways on the north side, however, in time to become lost to his pursuers.
While there was "something doing" on the square for some time that morning the Baby Freshmen retained their colors and declared themselves the victors of the day.
We understand that, in accordance with the customs in some of the larger schools of the country, the school will furnish a push ball. This new feature will, doubtless, prevent the possibility for injury to any of the participants, and at the same time provide a definite method of settling class championships.
We will hear more from this class, doubtless, for they have the spirit in them, and that seldom seen characteristic, also, of "sticking together." These traits will mean success after graduation as well as while yet in school.

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BROTHER CRAIG LECTURES ON THE YELLOW STONE PARK.
On the evening of Feb. 13th, Brother Craig, of the Junior class, gave a lecture before the Atlas Club on the Yellowstone National Park, illustrated throughout with stereopticon views. On Tuesday evening, Feb. 16th, he gave the same lecture before the Axis Club, and on the following Friday evening in North and Memorial Halls at the school,
for the benefit of the Athletic Association. Each of these entertainments brought a large attendance.

Brother Craig was, for a number of years before entering the A.S.O., Assistant to the President of the Yellowstone Park Transportation and Hotel Company, and is thoroughly familiar with the Park. His explanations of the views shown gave one a very good idea of the trip through the Park. Over 100 slides were used and the views were given much in the same order as seen by the tourist making the trip.

After giving a little preliminary talk on the size of the park, location, elevation, etc., accompanied by a map depicting the stage route, a panoramic picture was shown illustrating the topography of the park.

Many were surprised to know that the Yellowstone Park covers an area of 3312 square miles; that there are about 150 miles of stabling on the regular route; that the average altitude is 7500 feet; and that the Yellowstone Lake is the second largest body of water, at its elevation, in the world—it's largest dimensions being about 15 by 20 miles.

Gardiner station, a unique log building at the terminus of the Park Branch of the Northern Pacific Railroad, was shown, together with the Iwaiu-stone arch at the official entrance to the Park. The corner stone of this was laid by President Roosevelt during his visit there in 1903.

Then followed slides showing mountain scenery in the beautiful Gardiner Canyon, between the railroad station and the Mammoth Springs Hotel, five miles distant. Tourists are conveyed over this route in large 6-horse Concord coaches, which have seating capacity each for 34 persons. Several of these loaded coaches were shown.

Mammoth Hotel, Fort Yellowstone with Liberty Cap, and the arrival of the stages at the hotel were next shown. Then followed a series of beautiful pictures illustrating the wonderful varicolored terraces and hot spring formations at Mammoth. The pictures shown were all made by the official photographer of the park and are colored as true to nature as is possible.

The tourist road was then followed through Hoodoo Rocks, Golden Gate, past Bunsen Peak, and emerges on a large mountain meadow, locally called Swan Lake Flat. From here is had a beautiful view of Electric Peak—the highest in the Park. The Golden Gate viaduct, a road way constructed by the government of steel and concrete along the wall of a high cliff at a cost of $10,000,00 shows a good example of the improvements made by the government in the Park.

Several pictures were shown of the small geysers at Norris Geyser Basin—the first seen by the tourist. These are insignificant as compared to those of Upper Geyser Basin.

Gibbon Canyon and Falls were next seen, then the Firehole River and Rapids. These are both trout streams in the fullest sense, and the succeeding slide showed a number of the speckled beauties so vividly as to make one's mouth water.

The erates of Excelsior Geyser, Biscuit Basin, Sapphire Pool, Morning Glory Spring, the Punch Bowl and other phenomena were next illustrated. Then the Riverside, Grotto, Giant, Castle, Old Faithful and other geysers.

Much interest was taken in the pictures of Old Faithful Inn—a large and most unique log hotel, at the Upper Geyser Basin. Next to the natural wonders of the Park, comes the Inn. It is much admired and praised by Americans and foreigners alike.

The Paint Pots at the Fountain and at the Thumb of the Lake were depicted in natural colors, but the views of the Grand Canyon elicited most praise. This is a canyon of most wonderful coloring. Brother Craig explained in detail how it is impossible to color, true to nature, photographs or slides of Grand Canyon, owing to the delicate interpling of the colors. To reproduce the colors of the canyon has been the despair of the most famous painters.

Few had any idea that falls of 310 feet existed in the Park, yet such is the fact, while less than a mile above this is the Upper Falls, where the Yellowstone River takes its first plunge, of 112 feet.

Numerous pictures of bear, and other game, were shown. One of the most interesting, perhaps, of this group is called "Meals a la Carte" in the Yellowstone, and shows a large brown bear looking over the menu in the rear end of one of the hotel slop carts, while the driver is trying to unload. The bear evidently was impatient and is trying to obtain his meal before it was thrown on the ground for him.

As a closing picture Brother Craig showed a very beautiful sunrise scene on Yellowstone Lake, but very ingenously, instead of the rising sun, the well known trade mark of the Northern Pacific Railroad was substituted. It is a very unique and attractive advertisement.

The entertainments were highly appreciated by all present on either of the evenings the pictures were shown, and gave us a greater desire to visit this great picture garden of nature, although the pictures were so realistic and the lecturer so entertaining, we almost imagined ourselves on the trip in reality.

***

Will Osteopathy This is a question upon which there has been much
Last? said ever since our Noble Founder proclaimed to
the world this new method of therapeutics.
He was snubbed and declared insane by many. However, his strong, undaunting spirit, charged with a noble truth, of which he was determined the world should know,—and knowing benefit thereby,—bore him through the strife. To-day we have a school, yeas schools of osteopathy established that are sending out graduates to all parts of the world. Reports from these schools show an increase in the number of students this year over previous years. And the reports from many sources are flattering.

Yet there comes, from some of our oldest practitioners, warnings to mend our ways. Prophecy has been sounded throughout our profession that unless we awake to our duty, and guard well our little mine of pure gold, that our medical brother will, by a process of assimilation, scatter our possessions, debase our principle, and eliminate our identity.

Have we not heard these warnings and prophecies by our fraternal brothers Hildreth, Heine, Smith, Moore and others. Then, are we going to consider these matters lightly? Shall we be content to allow such dastard insinuations on our science as was given before the American Medical Association last summer at their meeting in Chicago, when M. Clayton Thrush, M. D., of Philadelphia, attempted to enlighten (?) the medical profession on osteopathy? If you have not read this tirade against us you should do so just to see what ignorance of our methods they have, and hence the tactics they employ against us. This article was published in the Journal of the American Medical Association, in Chicago, Dec. 19, 1908, and was reprinted in the January Journal of Osteopathy.

It is not our policy to fight the drug men so long as they allow us what rightfully belongs to us. When such efforts are made by their national organization it certainly shows the red flag waving defiantly from their mast, and means that the A. M. A. is taking more advanced steps to eradicating osteopathy's identity as a separate school of healing every year. Then, are we to sit at ease and allow this assimilation process to take place? The practitioner who has a well established practice may not see the need of any action on our part, but what about osteopathy's future?

There have been a number of articles published in our journals and periodicals within the last year, upon the different phases of this subject. In this issue of the Bulletin is given an address by Dr. Geo. M. Laughlin, in which he tells how to make osteopathy last.

We do not believe that osteopathy is coming to an end, but we do believe that our representatives throughout the country will act, and that osteopathy, as a science, and not alone as a business in which to fill the coffers of those who are seeking simply the money that is in it, will be upheld, defying all the powers that be directed against it.

The osteopath who launches himself upon the public without a desire to help his fellow-man and to relieve his suffering brother, but instead allows the dream of the "filthy lucre" to lead him, that one is just as sure a barrier to the progress of osteopathy and just as materially adds to the forces of those, whose attempt it is to stunt the faithful practitioner, and to make extinct our identity as a healing art.

Let us make combination of forces our slogan; let us treat the allopath, and every other path, with due respect; let us combine that we be sure we are all on the same boat headed for the same finding; but above all else let us be sure that we are striving to relieve the ails and aches of human-kind, and do that, then, and so long as we retain this principle and remain true to the principle upon which our method of treating is established, we are established in the hearts of the laity and there need be no fear that osteopathy will ever curl her flag and be forced a relevant to the background of drugdom.

* * *

**ATLAS NOTES.**

Dr. Franklin Fiske visited his mother, for a few days this month, at Lincoln, Ill.

* * *

We are glad to report Dr. Warren Hamilton's improvement. He was critically ill at his home for several weeks, but has recovered to the extent that he was able to go on a trip to Florida. Dr. C. E. Still accompanied him. We wish for the Doctor's rapid convalescence, and that he will soon be back at his post at the A. S. O.

* * *

On the evening of Jan. 30th the Club was in social session, and the following program was rendered:

- Piano Solo
- Paper
- Remarks
- Talk
- Vocal Solo
- Violin Solo

Brother Ruthfuss
Brother Morrow
Noble Skull Luft
Dr. Fiske
Dr. Cole
Brother Prindle
Brother Baker

After the program the members and visitors were entertained at cards.

* * *

On Saturday evening, Feb. 13th, the Club was entertained by
Brother Craig, of the Junior class, with a lecture on the Yellowstone Park, very beautifully illustrated with stereopticon views. He also gave the lecture before the Axis Club and at the A. S. O., the next week. Notes are given elsewhere of these lectures. Mr. McGonigle of the Freshman class preceded the lecture with a piano solo.

**RESOLUTIONS.**

Whereas, the Divine Creator, in His Supreme Wisdom, has seen fit to take from our midst the wife of our friend and brother, Mr. Eugene Cyrus Waters, and

Whereas, in the death of this loved one has been sustained an irreparable loss to himself, relatives and friends, therefore,

Be it Resolved, that we extend to our brother our heartfelt sympathy in this hour of bereavement and

Be it further Resolved, that a copy of these resolutions be sent him, copies spread on our minutes, and published in the Bulletin.

H. A. Price,
Committee: A. B. Ford,
J. Deason.

**ATLAS FIELD NOTES.**

Dr. Alfred W. Rogers, Boston, Mass. : "I read the Bulletin with great interest. * * * The prosperity of the club, as revealed through the pages of the Bulletin, in all the things that make the club worthy to be sustained, constantly revives memories of good fellowship and profit which we enjoyed there. I wish you all continued and abundant success."

* * *

Dr. C. C. Teall, of Middletown, N. Y., sailed from San Francisco on the 30th for Manila, Hong Kong, Canton, Shanghai, Tientsin, and Pekin. The doctor will visit Tokio and Yokohama on his return from the Orient.

* * *

Married—At Redland, Calif., Jan. 6, '09, Dr. J. A. E. Reesor, of Toronto, Ont., Canada, Atlas, '01; and Miss Alice L. Shelly, of Redlands.

* * *

Dr. Wm. A. Cole, of Dubuque, Ia., has been in Kirksville for several weeks, on business, and has visited the club rooms a number of times.

The Doctor is taking a year's vacation from active practice to see after his private business affairs. He is one of our most successful practitioners and is found in his praises of what osteopathy has done in his district.

We hope the year's rest will lend to an auspicious return to his professional labors.

* * *

Dr. J. R. Schrock, Bedford, Ind.: "I want to say a few words in favor of Dr. J. F. Stephenson's suggestion in December Bulletin in regard to amending the by-laws so as to except field members from dues, and have them become life members after having paid three years dues. I had hoped to see something in the January Bulletin relative to Dr. Stephenson's suggestion, but, as nothing appeared, I decided to write and see if there could not be some interest created on what appealed to me as an important question.

No doubt all field members' experiences tally about the same. The first six months we are out of college we look forward to receiving the Bulletin like a letter from home. After a year we begin to get busy, and are making quite a few friends in our new location, and right there begins the dissolution of college ties. After eighteen months, or two years, new names begin to appear in the Bulletin and old ones disappear, the college notes are mostly about people who are strangers to us, so, we no longer look forward to the arrival of the Bulletin, and when it does come it is carelessly glanced over and laid aside. While the most of us appreciate our membership in the club and have no intentions of becoming delinquent, yet we do so, not on account of the dollar a year, but on account of circumstances that none but one who has been in practice three or four years can appreciate.

I would like very much to hear from some of the "old guards" on this subject."

We would be glad to hear from other field members on this subject. We are sure it is the desire of the local members to conserve the interest of every Atlas man.—Ed.

**AXIS NOTES.**

Owing to the fact that we received the Axis Notes last month too late to be included in that issue, we have inserted those notes for last month with those handed us for this issue.—Ed.

* * *

"We're Here, Because We're Here."

Familiar to Dr. Smith and the present Junior class, this expresses in a sentence my reason for being on the Bulletin staff as Axis reporter. As in some cases, where greatness has been thrust upon people, who
otherwise would not have attained it, so the Axis department of the Bulletin has been assigned me. Now that I am face to face with the duty I feel my inability to make our department what it should be, but there being no escape from duty, I shall do my best and shall hope for a successor next term more familiar with this line of work.

Now good sisters, we want to make the Axis department of the Bulletin better than ever. Let us have your interesting experiences from the field. Every practicing physician must, in the natural course of events, have cases which are of interest, not only to himself or herself, from intimate knowledge of the case, but would be interesting to others also.

Report to us some of these cases. They will both interest and help us. Do not think because of your familiarity with the case, that it will be of no interest, but recall your feelings when you first examined the case. Tell us the symptoms, how you diagnosed the case, and with what success you met in treating it.

***

You are busy? We are glad of it. It is only the busy practitioner who has time to do things. The very fact that you are busy is guarantee that you can give us items of interest. Now sisters, won’t you help out?

***

Osteopathic Combination

Most of our members will recall with pleasure one of our number, Dr. Leona Harper, who was graduated in the June, 1908, class.

The club is in receipt of announcement of her marriage to Dr. Clement Woolson on January 26th, at the home of her parents in Minneapolis, Minn.

Dr. Woolson was one of the prominent members of the “Skiddoo class,” just graduated and also an active worker in the Atlas Club.

While, on principle we are opposed to combinations, we trust this osteopathic combination will be a success and the club extends its congratulations.

***

A Remembrance to Drs. Lyman & Davis

The Axis Club sending out into the “field” but two members with the January, '09 class, Dr. Elva Lyman from president and a most faithful member and Dr. Anne Davis, one of our later initiates, it was thought but fitting that these should be shown some recognition of their departure, especially as they were not tendered the usual reception. Therefore Mrs. Pherigo, the president, appointed a committee of three to purchase suitable gifts for our graduating sisters—a neat silver loving cup, on ebony base, was selected for Dr. Lyman, engraved with the following inscription: “Dr. Elva Lyman from The Axis Club, A. S. O., Jan. 23rd, 1909.”

Dr. Anne Davis was presented with a handsome silver spoon, a carnation, with stem and leaves forming the handle, and engraved in the bowl, “The Axis Club,” and on the back of bowl her initials and the date.

These gifts were presented with a few appropriate remarks by Mrs. Pherigo, on Jan. 20th, the last evening Dr. Lyman and Dr. Davis were with us, as active members of the Odontoid Chapter.

***

Election of Officers

The Axis Club held a special meeting on the evening of January 12th for the purpose of nominating the officers for this semester. On Wednesday evening January 13th, at the regular meeting, the following officers were elected:

President: Mrs. Belle Givens
First Vice President: Mrs. Mary
Second Vice President: Mrs. Henke
Recording Secretary: Miss Harriet Sears
Corresponding Secretary: Miss Taylor
Financial Secretary: Miss Wilson
Assistant Financial Secretary: Miss Gross
Treasurer: Mrs. Ida M. Rogers
Chaplain: Mrs. Lydia H. Holmes
Escort: Miss Roberts
Janus: Miss Pauline Sears
Librarian: Miss Sheriff

These officers were duly installed at the regular meeting Wednesday, January 20th.

On Wednesday evening, January 27th our new president, Mrs. Givens, appointed her committees and also Mrs. Craig, as Axis Editor.

***

Reception to the Delta Omega Sorority

The Axis Club entertained the Delta Omega Sorority and the Honorary members of the Axis Club, on Tuesday evening, January 19th. The large hall was decorated by a canopy of crepe paper, half in the Delta Omega colors, yellow and green, and half in the Axis colors, green and white. A large van of pink roses were placed on the speaker’s table, and white carnations and ferns decorated the piano. The smaller hall was decorated in the A. S. O. colors, red and black, and white carnations and ferns were used in profusion.
Each one received two carnations, one white and one green.

The ladies were entertained by the following excellent program. Four musical numbers by Mr. Erwin, violincello; Mr. McGonigle, piano, and Mr. De Jardine, violin. Address, "Who is Responsible," by Mrs. Ella B. Chassell, of Le Claire, Iowa.

A synopsis of Mrs. Chassell's address is given elsewhere in this issue. Mrs. Chassell has a very warm personality and a good voice, and combines to make her a pleasing speaker. Her subject was well chosen to lead us out of old ruts, and was very breezy and refreshing.

After the program, a delicious three course luncheon was served.

**A Correction.**

We wish to make a correction. Last month, through an error in print, it was stated that Mr. Walter Mays and Miss Carrie Steady were united in marriage. It was Miss Carrie Steady.

**Mrs. Chassell the Guest of Dr. Lyman.**

Mrs. Chassell was the guest of Dr. Elva Lyman while in the city. On the last day of her stay she visited the A. S. O. and Hospital and also the State Normal expressing herself as being well pleased with both, and with her visit.

Mrs. Chassell was especially interested in the Normal, having been a teacher in the Iowa State Normal.

**Who Is Responsible?**

In the lecture by Mrs. O. B. Chassell of Iowa on "Who is Responsible" she gave a history of Woman's work and progress in America, showing just how each privilege has been secured. She paid a high tribute to the work done by the women during the Rebellion, as well as to their ability to work well in any field. The fact that formerly there were so few occupations open to women, and to-day nearly all avenues open to her, was dwelt upon, as well as the fact that nearly all schools and colleges are open to both sexes, at the present time.

Mrs. Chassell spoke of the dangers that menace the home from within and without, showing how many of these can be lessened. She dwelt upon the need for careful training of the young and of the great responsibility resting upon the law-makers that none but good laws should be placed upon the statute books.

She then dwelt at some length upon the necessity for realizing our personal responsibility for use of time, talents, opportunities, money, and then directed a few words of cheer, advice and encouragement to mem-

bers of the Axis Club and their guests, nearly all of whom expect to be osteopathic physicians.

The address was enlivened throughout by apt illustrations and humorous anecdotes and was well received by all.

**Dr. Fiske Addresses Axis Club.**

After the regular business meeting of the Club Wednesday evening, January 27th, Dr. Fiske lectured on the subject of Gynecology from the view point of a woman physician. His talk was very good, he giving many practical points. In part he said:

"The practice of gynecology is the one thing that lies in the scope of every woman practitioner, whether she be weak or strong. And you as women will find that the largest number of cases offered to you will be gynecological.

"Some women have said, 'I can't bear to treat such cases. Before I was an osteopath, I did not dream of the misery of women, sometimes it makes me sorry I ever took up the study.' But you will not have more appreciative patients or those more cheerful in paying, than the woman you have relieved of pelvic disturbance.

Make especial effort to cultivate tactile and muscular sense, as to distance, etc. One good way is to place one or more folds of a blanket over small object and discern their form and consistency by palpation, then with one hand underneath the blanket, the other hand above, try to bring them together very exactly. Also with eyes closed try to bring the hands within an inch of one another, and so on.

Gynecology is not learned in a day, or even a few weeks. It does not come easy, but by long hours of careful study and painstaking examination. However, once learned, and you effect a few cures, your reputation is made in that community.

A short time ago I read in a medical paper an article by a woman gynecologist, in which she admonished her fellow medical practitioners to make more digital examinations rather than with the speculum alone, stating for her reason that better results could be secured, and more knowledge gained, that this was the rule with osteopaths and that they were getting the results, and that many of the patients that were theirs (medical doctors') were going over to the osteopaths.

**Better Relations Between the Clubs.**

It is indeed gratifying to see the friendly attitude growing between the different social and professional organizations of the college. Let us hope that the day of petit-jealousy and harsh criticism, are past and
that an era of universal brotherhood is begun. The classes are large enough in numbers and afford enough broad-minded, earnest men and women to supply each and every organization with worthy membership. It is largely a matter of temperament of the individual, whether he, or she, will derive the greater benefit by affiliation with the larger organization or that they need the closer friendship afforded in the smaller bodies.

But once affiliated be staunch and true to your choice. However, let it be held in mind and heart, the success of one organization is helpful to all others of our college—the standard raised in one, means raising the standard and ideals in all the others.
So let us pull steadily and strongly onward and upward and all pull together, holding in mind that “Together we stand, divided we fall.”

“Get your happiness out of your work or you will never know what real happiness is.”—Elbert Hubbard.

* * *

The Pathology of Clothes.

A witty writer, says the Medical News, has contributed to St. George’s Hospital Gazette a prospectus of a proposed work on the pathology and treatment of diseases and accidents of the toilet. The prospectus is fortified by alleged extracts from the forthcoming volume. Among the lesions described are “perforating ulcer of the sock,” false passages of the vest,” “hairy-mole of the shirt-cuff,” “idiopathic atrophy of the pajamas,” “sloughing of the posterior foramen of the collar-band,” and “prolapsus trousers.” While a further chapter is said to be devoted to affections peculiar to evening dress, such as “Adison’s disease of the shirt-front,” “medura pump” and “inoperable volvulus of the necktie.”

The causation of false passage of the vest is described thus: “The head, being hurriedly thrust into the garment, lacerates the fabric and emerges through the posterior wall of the axilla, instead of through the cervical canal.” “The best treatment is prolonged rest in bed.” With regard to perforating ulcer of the sock, “treatment by simple suture or the purse-string ligature is not to be recommended. Each perforation must be carefully grafted by an expert.”—Medical Standard.
here in 1904, while Dr. Elinor graduated two years later, and we understand that both have had success since leaving the school.

The doctors write a cheering letter, and one full of good thoughts, from which we quote the following:

"We are glad that the design of the Axis Club is professional and has ever been so, and we hope that ideal may be the goal in view when choosing our members. We have met in the field some strong osteopaths from Kirksville, who were not invited into the club, and we wonder if prejudice and personal feeling do not, too often, blind us to the real and genuine character of conditions for membership."

"We have only strong words to say as to results obtained by correcting lesions, and we never will cease to be thankful for the root and ground in osteopathy that the A.S.O. gave us."

Are we glad that we are osteopaths? You better believe we are, and are striving to make other’s glad, too.

"Sometimes students and practitioners will have doubts as to the efficacy of our system. Well, what of it? Don’t we have doubts about most everything. The way we rout the doubts about osteopathy is to correct lesions, and see the results, often most wonderful."

***

After an absence of over four months, caused by typhoid fever, Dr. Harriet A. Whitehead has returned to her practice at Wausau, Wis. It was one of the great disappointments of her life that she was unable to attend the Kirksville meeting last August.

***

LOCATIONS AND REMOVALS.

In this column we print the locations and removals of all those whose names we can secure. Each month we look over all the periodicals of the profession to which we have access, and note all the changes mentioned there. So, if we do not notice your change of address in another periodical, or we are not notified by the Postoffice department—who often assist us by notices giving place moved to,—or directly notified by you, we cannot be expected to keep up with you. We urge you send to us notice of your change immediately upon making any change in your address.

Amussen, H. S., from Logan, to 243 W. 1st St., Salt Lake City, Utah.
Balf, Elinor, from Kansas City, Mo., to 505 Mason Bldg., Los Angeles, Calif.
Balf, Susan, from Gering, Nebr., to 505 Mason Bldg., Los Angeles, Calif.
Baugh, L. G., from Lock Haven, Pa., to Box 96, Wilkes-Barre, Pa.
Bruce, J. O., McCook, Nebr.

Carlow, Frank G., and Eva Mains, from Odell Bldg., to 5 and 6 Mission Block, Medford, Oregon.
Compton, Catherine, from 404 Corn Belt Bank Bldg., Bloomington, Ill., to Box 85, Beeville, Tex.
Eimert, F. J. & Mabel B., from Miles City, Mont., to 2069 Sutter St., San Francisco, Calif.
Ecker, F. J. & Myrtle L., from Flora, Ill., to 1237 Jackson Blvd., Chicago, Ill.
Erwin, E. Paul & Minnie B., from Indiana, to Perry, Iowa.
Frees, Edna Thayer, from Erie, to Williamsport, Pa.
Hatch, Chas. G., from Bay State Bldg., to 125 Haverhill St., Lawrence, Mass.
Kagay, Lorena, Richwood, Ohio.
Knight, Delia G., from 315 W. 79th, to 230 W. 99th St., N. Y. City.
Loofbourrow, Ward, from 735 Beaver St., Sewickley, Pa., to 69 Chatten- den Ave., Columbus, Ohio.
Layborn, Fannie B., from 401 E. 1st St., to 210-11 First Ave. Hotel, Denver, Colo.
Lyman, Elva, Iowa Falls, Iowa.
Martin, Frank T., 992 Page St., San Francisco, Calif.
Newton, Ralph W. E., Clay Center, Kansas.
Pratt, Mary E., from 402 National Union Bldg., to 967-69 Spitzer Bldg., Toledo, Ohio.
Robbuck, J. H., Trinidad, Colo.
Smith, W. S., Stamford, Tex.
Sims, Mary Lyle, Columbia, S. C.
Stafford, Florence, from 625 Clyde St., Pittsburg, Pa., to 329 Bank St., Sewickley, Pa.
Young, F. P., from Des Moines, Iowa, to Kirkville, Mo.
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