The Popular Osteopath

Vol. 1  No. 9 September 1899

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CONSTIPATION.

M. C. HARDIN, PH. B., R. B., D. O.

Constipation is one of the most common troubles with which a doctor comes in contact. But even the doctor meets only a very small per cent. of such cases, for most people prescribe for themselves in this instance. To this the drug stores will bear ample testimony. Because constipation is so common and its results are not always immediate, it is usually looked upon as of not much consequence, and yet it is a very grave disorder. If any one will only take the pains to read over and carefully weigh the consequences of this insidious disease — any one or more of which may exist in his own case sooner or later — he will certainly be impressed with the gravity of this condition. Constipation in itself is not so bad, but you cannot disconnect it from its consequences. This is what gives to it its gravity. Dr. Illoway, of New York City, in a large and exhaustive work on Constipation, enumerates the following as “Consequences of Constipation:”

1. Piles, or haemorrhoids.
2. Irritable fissure of the anus.
3. Inflammation of the intestines.
4. Appendicitis.
5. Catarrhal inflammation of the rectum.
6. Faecal tumors which are often taken for wandering kidney, abnormal growths, abscesses, etc.
7. Rupture (hernia) may result from a constipated person straining at stool.
8. Diarrhoea alternating with constipation.
9. Intestinal obstruction from impaction of feces.
10. Torpid liver.
11. Jaundice.
12. Loss of tone to the stomach, and consequently indigestion.
13. Auto-intoxication — the poisons arising from the retained feces is absorbed into the circulation and the whole body is thus poisoned. A foul breath is often caused by the lungs throwing this poisonous matter out of the system.
14. Functional disturbances of the nervous system, such as palpitation of the heart, sick headache, tie-douloureux (a form of neural-
involved in their normal condition. Drugs may accomplish some things, but it is agreed on all hands that they are helpless to cure constipation. The water cure may do something to relieve constipation temporarily, but the enema as a habit is only second to drugs so far as a cure is concerned.

Dr. Illovay quotes an authority on electricity in constipation that states that out of twenty cases treated in this way only four got permanent relief. Osteopathy can place the patient in the same condition in most cases where they were before they contracted the habit. Here are some cases treated by Osteopathy. This is the queen of the sciences of healing in cases of constipation. We cure permanently ninety per cent of all cases of this disorder:

Case 1—A young lady sixteen years of age was so badly constipated that she never had a normal action. She used drugs or the enema all the time. She was permanently relieved in seven weeks by Osteopathy.

Case 2—A married lady of forty years with a broken constitution from a long standing case of constipation. She stated that she never had an action of her bowels oftener than every fourth day, and many times went for six or seven days, and then she was compelled to use some artificial means. She was completely cured in three months' treatment, not only of her constipation, but of a case of stomach trouble caused by the constipation, and gained fifteen pounds in weight and felt young again.

Case 3—A gentleman of forty years came to me with a case of constipation. He was very nervous. Had consulted some of the most eminent physicians in some of our largest cities and under their treatment he had gained nothing. In six weeks' treatment by Osteopathy he was entirely restored.

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REASON FOR OSTEOPATHIC PHENOMENA.

M. F. Hulet, M.Sc., D.O.

Perhaps there is no question in all the field of Osteopathic literature so hard to intelligently explain to the layman as the one, "How does the Osteopath get results?" What practitioner has not been silenced by his patient asking "Why do you do that?" It is extremely humiliating to frankly admit ignorance, and little less humiliating to say that "Dr. Still taught me to do so," thereby putting yourself on record as one of the Old Doctor's "engine wipers."

Granting that this is a question difficult to handle, it may be even more difficult, and of greater magnitude, to explain the phenomena of Osteopathic procedure on a scientific basis. However hard it may be, that ought to be the true aim of every practitioner, and he ought not to be satisfied until that object is attained. That there is scientific reason for every treatment employed by the skilled Osteopath is evident to the inquiring mind. But until we can intelligently explain that reason little progress in Osteopathic thought can be expected.

Every Osteopath who gets results ought to know why he gets them. Some pseudo-Osteopaths content themselves with the shotgun policy of the "general treatment," treating every patient alike, hoping thereby to touch the button which will give relief. This method may result in good, but the probabilities are against it, and the intellectual development of the Osteopath amounts to nil under these circumstances.

In a given case we may find certain lesions. Our treatment here should be governed by the condition of those lesions. Yet, more than that. Why do those lesions produce that particular effect, and, if they are removed, what are the particular physiological processes which take place? These are questions which, if intelligently answered, will aid much in the advancement of Osteopathic therapeutics and practice.

To carry on as far as possible, although in a very imperfect manner, the above suggestions, I desire to present the conditions of a case that has come under my observation, and to a partial extent under my care, although I must equally share the honor of curing the case with my friend and co-laborer, Dr. Sommer, of Cincinnati.

About the middle of last April
there came to me a Mr. W——, traveling man, aged about forty, weight 150 pounds, medium height, who was of a more or less neurasthenic tendency—bordering on locomotor ataxia some had told him—the result, no doubt, of a continuous strain upon the system, due to a chronic diarrhoea of thirteen years' standing. Otherwise he seemed in fairly good health. As he could be in town only for a short time, I hesitated to take the case; but upon inquiry found that following the time in Columbus he would be in Cincinnati, where he could continue treatment under Dr. Sommer. I treated him every other day for five treatments, then Dr. Sommer took charge of the case for a few treatments, I do not know exactly how many. Under examination there was revealed a more or less heightened sensitiveness of the whole spinal area, and a marked spinal lesion in the lower dorsal region.

My treatment was directed mainly to correcting the spinal lesion, and the results may best be learned from the excerpts from a letter from the patient himself, dated July 29, 1899:

“T am more than pleased to tell you that I have not been in better health for twenty years, and am sound as a dollar. I am stronger than ever in the faith, and lose no opportunity to talk Osteopathy. While I have a kindly feeling for all good Osteopaths, yet I cannot help expressing preference for you and Dr. Sommer.”

Here is a case of thirteen years' standing, doped and drugged without benefit, and then entirely relieved by the drugless science in a very few weeks' treatment. Is it any wonder our medical brothers become jealous of our success?

Now as to the cause of this continued disturbance for so long a time. We may say for convenience in this discussion that diarrhoea may be caused from two sources, peripheral and central nerve irritation. In the former there is a disturbance of terminal nerve filaments by irritating substances in the intestine, affecting the nerve center reflexly. In the latter the nerve centers are irritated directly. In either case the cause of the frequent or less liquid stools are the result of changes in the secretion of the intestinal glands, and in a disturbance of peristaltic activity. But in addition Da Costa says: “Chronic diarrhoea, as the practitioner of medicine commonly sees it, is often attendant on general constitutional affections, * * * and is not an uncommon result of the cathartic pills.” The first proposition from Da Costa may not differ from that stated as a second cause of the disorder — nerve-center disturbance, from a depleted blood supply to that center.

Here we may digress from the main topic for a partial exposition of the latter part of Da Costa's statement to emphasize what I believe is a more or less universal law, that when extraneous substances are introduced into the system to perform a given bodily function that function weakens in direct proportion to which the object of that introduction is accomplished. In the instance cited the cathartic pill has by chemical stimulation replaced the natural functions of secretion or motion, and brought about a more or less fixed abnormal activity.

The peristaltic action of the bowel, as we know, is influenced largely by the stimulus from the sympathetic nervous system distributed to the walls of the intestine. But that natural stimuli originate from its governing center, and is controlled by the blood circulation to that center. We find that the general vaso-motor center is located in the medulla, and therefore, it is argued, must be out of reach of influence by Osteopathic procedure. But it has been believed and practically proven by Osteopathic results obtained, since the discovery of osteopathic principles, that we do influence the brain circulation by our treatment of subsidiary centers; and this theory that the brain circulation is under control of the vaso-motor system has recently been announced by Prof. G. Carl Huber, of the University of Michigan. But even if this should not be true, the closer student of physiology finds vaso-motor subsidiary centers in the cord at various points governing the different areas, and that vaso-motor fibers come from the cerebro-spinal axis, passing out from the spinal cord as extremely fine medullated fibers by the anterior roots of all the spinal nerves between the second dorsal and second lumbar nerves.

The amount and character of the intestinal secretions are governed more or less by blood pressure, acting either in the intestinal wall or upon the nerve center. By stimulation of vaso-motor fibers the arterioles are contracted, resulting in a lessened supply of blood, but greater pressure; section (or inhibition) of the nerves causes dilatation of the same blood supply. Yea, in his physiology, in this connection, says: “* * * We consider the vessels to be under direct control of the spinal centers, each regulating the amount of tonic contraction of its own vascular area.”

Now, as to the treatment of the case mentioned above. The subsidiary center had been rendered inactive by the abnormal condition of the spine at that point. It was not a general disturbance of vaso-motor force. The effect of the lesion was limited to the area covered by the vaso-motor fibers from that particular spinal subsidiary center, whose influence seemed to extend only to the intestine in sufficient force to keep it in a continued state of abnormal activity, the diarrhoea resulting.

By readjusting the spine at that point abnormal irritation was removed and natural functions of motion and secretion were resumed unhampered. The intestinal lesions, if such there were, the result of this unnatural activity for so many years, only required rest in order that nature's soothing remedies might bring them into a healthy normal action.

"The Ruggery," Columbus, Ohio.

It has been suggested that a "blue-blooded" man should be a patriotic individual, since his blood must contain red, white and blue corpuscles.
WHY I AM PRACTICING OSTEOPATHY.

C. M. CASE, M. D., D. O.

In reply to the question of The Popular Osteopath as to why I, a medical doctor, confine myself to the practice of Osteopathy, instead of practicing medicine, I might say my reasons are like the devil spoken of in the 9th verse of the 5th chapter of St. Mark's gospel—Their name is legion, "for they are many."

To begin at the beginning: I have a sister who suffered for twelve years with Coccygodynia. I did all I could for her, and then took her to many of the leading medical men of my acquaintance, my former professors, among others, to see if they could tell me how to secure relief for her or do it themselves. After a few years of misery she had her coccyx removed by one of the most prominent surgeons of Baltimore, Dr. Tiffany. This seemed, for a few months, to do some good, but we were doomed to disappointment. The old trouble returned more with than its former severity. Some time later, i.e., twelve years after she first became troubled with this disease, she went, against my advice, to Kirksville. I thought, as many honest but uninformed doctors do now, that there was no virtue in Osteopathic treatment, that its ideas and theories were absurdities and that the so-called "cures" were made by mental impression and could not be lasting. I thought the fee was all the Osteopaths were after. When she returned, in about nine weeks, and said she was cured I did not believe it and "hied my time," thinking the old trouble would show up in a few weeks. It did not. On the contrary, she has gained steadily in flesh and weight ever since; though she has the care of a large family, being the mother of six children, two of whom were born since she returned from Kirksville, four years ago last December. If you knew how much misery she had had to endure and how great the relief was to her and to all her relations and friends, you would not wonder that I soon went to Kirksville on a "tour of inspection." Dr. Patterson and others met me in a kind, friendly spirit and allowed me to get all the information they could and I talked with scores of people who were in a position to tell me that Osteopathy was no "fake," but a blessing to thousands, especially among those whose ailments could be reached in no other way. I then got the names of a number of people who had been cured by Osteopathic treatment, looked them up and talked to them. I satisfied myself that any one who pretended to devote his life to taking care of sick people had no right to remain ignorant of Osteopathy, so I went to Kirksville and took the physician's course in the American School.

I found the science far more comprehensive than I had thought and found that many things they told me could be done (such as stopping a diarrhea, for instance) by Osteopathic treatment, were really, literally true, and made up my mind to confine myself to Osteopathy, plus common sense, instead of going from house to house "doping" people, and acting as the unpaid sales agent for drug shops and manufacturing chemists (especially those who do not publish their formulas, but simply let you know, or say they do, how much of each active medicine each teaspoonful contains). I do not regret the change. I am meeting with a fair degree of success in a number of cases I would have pronounced incurable before, and never have had such good, quick results as I am getting at present. Of course I only get the odds and ends; the leavings and failures of the other doctors, but, thank God, they improve and I am very happy to have found a way of being such a useful member of society. Of course, every good Osteopath knows that we are always able (at least that has been my good fortune so far) to stop headache, no matter how violent, in a few minutes; hiccup, nose-bleed, toothache (temporarily only, perhaps) and a number of other small ailments in a few minutes or a fraction of a minute. We also know that we can prevent falling out of the hair, excessive formation of dandruff, and cause a new growth of hair to set in, in many cases. I have had many such cases lately in addition to my regular cases, and have been successful in all instances.

My most interesting cases at present are these: First, a case of what would be called minor epilepsy, but the patient sometimes had "spells" of true major epilepsy. He used to have from three to eight or ten seizures a week. I have been treating him a month. He has not had a "spell" for about ten days. Second, a gentleman who has had partial general paralysis for about twelve years. He is improving perceptibly, though I have treated him only a month. Third, a little girl who has a weak and painful back, flat chest and inherited predisposition to consumption. Improved at first; not doing very well lately. Fourth, a case of anteversion and neurasthenia. Not doing very well yet; but I have treated her only a month. A lady with slight slip of left hip, insomnia and dyspepsia. Treated her two weeks. She has improved a great deal. Fifth, a little girl who has had partial paralysis for several years. She is improving so well that all of her neighbors are noticing it. Sixth, a case of rhenumatism of some ten years' standing. Has been unable to do any work for four years. Have had him under treatment three weeks. Improvement remarkably rapid. If he continues to improve as well as he has so far he will soon be perfectly well. Seventh, a case of what had been pronounced renal calculi. I found a distended gall bladder. No kidney symptoms whatever. A good, thorough liver treatment was what he needed and got. He used to lose one or two days from his business every week on account of these attacks. He has not lost any time at all since I began to treat him, some eight weeks ago. When one of his attacks comes on he comes to me and I soon succeed in relieving him.
Is anyone fool enough to say I had better put him to bed, give him a "hypo" and put hot water bags, etc., on him? Of course, I have had to do it after all, but we all know that the doctor is never wrong.

Eighth, a lady who has, or is supposed to have, consumption and catarrh of the stomach. On July 22, when I began to treat her, she was bed-ridden, very much emaciated, having had cough, fever every afternoon (generally about 96.6 degrees). Although I have put in only five weeks of work, you would have to see the patient then and now to appreciate the improvement in this case. The cough has almost disappeared; no fever, pain, night sweats, nor any bad symptoms whatever. Bad stomach conditions have passed off. Appetite has returned. In fact, it is too good and has to be restrained. Patient has been able to get up and remain up from about 9 a.m. till 8 p.m. since the end of the first week's treatment, and soon after that began to take daily rides on the street cars or in a carriage, and takes a walk of about half a mile almost every day when she does not take a drive. She was too weak to go out and get weighed at first. On August 16 she weighed 80 pounds; on August 23 she weighed 831 pounds. I suppose the gain had begun sooner, at any rate it seemed so.

Case 9-A gentleman who had had a bad case of diarrhoea over a week. Cured in one day, in two treatments.

Case 10-A gentleman from New England who had had asthma, almost always present, but not very bad except for a week or ten days at a time once every three or four months. He could only spare five days, but was decidedly better when he left.

Case 11-A gentleman who had had a sort of general rheumatic neuralgia and severe dull headaches for over four weeks. He was cured in one treatment.

Case 12-A lady of about 60 years of age. Had had sciatica for about four years, which was so bad during the last ten or fifteen months that she did not know what it was to have any peace. Cured in six weeks.

Could I have done as well with drugs? Does anyone know any good reason why I should return to the practice of giving everybody some medicine for everything that is going wrong? I do not.

Asheville, N.C.

The Doctor Ought to Know.

Mike—Do ye think Larry Milligan will die?
Pat—Sure, an' Oi don't know. It's the docther himself as says he will, an' he ort to know, for it's himself knows what he's been givin' him.—Selected.

A Chance for Her Life.

"I hear that Dr. Squigham is going abroad for three months."
"Yes; he starts next week."
"What will your wife do while he is away?"
"Get well, I hope."—Chicago Times-Herald.

I think that it can safely be stated that the recent meeting in Indianapolis was the final step in the establishment of the A. A. A. O. as a firm and lasting organization. Up until that time, too many Osteopaths had regarded the organization as something vague, having no definite plans or management, and whose importance lay wholly in the minds of those who took an interest in its conception and advancement. I think, however, that those who learn of that meeting, especially those who attended, will no longer doubt that the time has already come when the A. A. O. is something more than a quacksounding combination of letters.

The establishment and perfection of an organization like ours cannot be accomplished with any meteor-like rapidity. Gradual growth and development must be characteristics of any undertaking so broad in its scope as is a national association. Our growth has been slow and it is only now, after two years, that we feel in a position to assume rights and privileges, duties and obligations which such an organization must necessarily entail. Since its inception, the A. A. A. O. has had to brave criticism—some of it just criticism, in a way, but none the less retarding to its growth. It has had the disapproval of those whose sanction would have been all-powerful. It has met obstacles which would have been troublesome had they come after years of experience. It has had nothing with which to work save the energy and enthusiasm of a few of its members. It has been handicapped by a Constitution which was faulty in very vital instances.

All of these have retarded its growth, and yet it has flourished. From two hundred and fourteen charter members, its membership has increased to the neighborhood of six hundred. Its Constitution has been altered and its business methods simplified and facilitated. Gradually it has attracted and held the interest of those who stand foremost in the ranks of successful Osteopaths. The beginning of this new fiscal year finds more funds in the treasury, more interest among its members as a whole, more prestige not only in Osteopathic circles, but in the world at large. In fact, its power is being recognized both in its own circle and in those outside.

Not long ago, a remark was made to me by one whose opinion each of us regards with the greatest esteem. He said, "If your science is worth anything, you don't need any associations." Surely with system and with method, in union and in strength, the advancement of our work will be more marked. The object of our association is not for flagrant advertising, but for our own development and for hearty cooperation against the opposition which we meet.

It has come to my notice lately that the statutes of some states demand that a practitioner shall show not only a diploma certifying his
qualifications, but that he must also possess a certificate of membership in some organized body of his fellow-practitioners. Osteopaths have written to me concerning this situation. This refers us once more to that question which has come up repeatedly at our annual meetings and at meetings of the Trustees—that of issuing to the members of the A. A. A. O. a certificate of membership. In my opinion, it is a question well worth the consideration of the Trustees, and certainly entails a situation which must be met sooner or later. As the number of Osteopaths increases and the classes in each school become larger, it is inevitable that some will be graduated who will not be creditable exponents of the science. Some day one will need stronger credentials than a diploma, even though it be from a standard school. There are already Osteopaths in the field who are graduates of reputable and recognized schools, yet whose conduct as practitioners certainly does not have the approval of those who would keep the standard of our science above reproach. As yet these deviations from what is strictly honorable and ethical are known possibly to a small minority, still they exist and the time will come when the irregular conduct of a recognized graduate may be a source of annoyance as great as we now see the pretended qualifications of those who practice without proper instruction.

It is questions such as these which will be directly in the province of the A. A. A. O. The national organization must not only set the standard for competent qualification, but must demand of its members methods which are unquestionably legitimate and honorable. I wish to repeat here what I stated to the assembly in Indianapolis, that The Popular Osteopath is doing a great deal toward the proper education of the public in regard to competent and legitimate Osteopaths. Since the first issue of the magazine, in which the public was instructed to address the Secretary of the A. A. A. O. in regard to practitioners, my correspondence along that particular line of the work has markedly increased. The same statement is true of my correspondence as a whole, showing that more interest in the work is being evidenced both by members and by outsiders.

"The organization has frequently been criticised for its failure to take some step toward the prosecution of pseudo-Osteopaths, who are practicing in different localities. The organization has been handicapped in any undertaking of this kind by lack of funds. Moreover, these are not altogether easy situations to handle. Even in states which have passed a bill legalizing our practice, it is not always easy to deal with those who violate that law. Any complaint of that kind should properly be made to the Medical Board, which, of course, would take no great interest in protecting our rights. It is much easier to say what the association ought to do than it is to meet the actual condition face to face.

Again, there are many Osteopaths throughout the country of whom the officers of the association know nothing. When any of you learn of such a person, I shall be very glad indeed if you will notify me concerning him, and I am sure that the Trustees will be willing to take whatever steps in the matter are possible or practicable. Not only in regard to this one phase of the work, but in all other lines as well, I hope that the members will feel at liberty to write me whenever they see a situation where the organization might effect some good. I am at the service of the members and am always ready to do whatever is in my power to further their personal interests and the interests of the science.

308 New York Life Building, Kansas City, Mo.

THE FALLACY OF Tonics.

J. H. Kellogg, M. D.
(Director of the Battle Creek Sanitarium, Battle Creek, Mich.)

A so-called medicinal tonic is nothing more nor less than a nerve fooler. It makes a man feel better when he is not better. It stimulates an activity of the nerves which is mistaken for an increase of strength. If men and women really understood the pernicious character of tonics—that the continuous use of them means the ultimate certain bankruptcy of health—thousands of people might be saved every year from complete physical ruin.

A tonic is a whip. Under its stimulus a man is compelled to do more work than he has the spontaneous ability to do. When a person feels that he is all tired out and that his nerves are weak, and asks his physician for a tonic, it is the same as if, when his faithful horse shows signs of weariness, he should say to his neighbor, "Come and whip this horse for me. Get a raw-hide or a goad—anything that will make him work." Many a fine horse, under the sting of the whip, has been spoiled in twenty-four hours; and many men and women, under the stimulus of tonics, have been spoiled for life in one season of business stress or social dissipation.

Fashionable people who come home from summer resorts in the autumn with rosy cheeks and snapping eyes and plunge into the whirl of society, often find their strength failing at the height of the season. The bloom is gone from their cheeks and the sparkle from their eyes. They go to a doctor for a tonic. The business man, in the rush of the winter trade, begins to find himself lagging behind. His brain refuses to do the work necessary if he would keep up with his competitors. He goes to the doctor for a tonic. The teacher, in the midst of the winter examinations, feels that it is impossible to bear the routine another minute. She goes to the doctor for a tonic. Physicians are constantly beset by the entreaties of the people for something that will spur up their flagging energies.
strength and energy could be concentrated into pills, what a convenient power we should have with which to run trains of cars or mills, to dig mines, to pull wagons over mountains. Such an idea is the sheerest nonsense. There is only one source of energy in this world for man, and that is food. He must get energy from the same source that the engine does, from food, i.e., fuel. You would not expect to increase the power of an engine by putting some little strychnine or quinine pills into it. From a physical standpoint the human body is simply an engine, a machine for taking the energy of food and converting it into the energy of muscle, brain, and gland. In taking sugar-coated “tonic” pills, a man derives just as much benefit as there is in the coating, and just as much harm as there is stimulus in the tonic. Why do the pills do mischief? Because it is not the design of nature that man should be able to exhaust his supply of energy. It is as if the energy of our bodies was stored in a tank, the outlet of which is toward the top instead of near the bottom. This special provision has been made so that it is impossible for us to run our tanks dry. We cannot get all the energy out of our bodies, no matter how hard we work. When the tank is full, we feel the joy of living. We are able to supply ample power to the wheels of the machine. But if the water sinks in the tank, it flows with less and less force, the wheel turns more and more slowly, and when the water reaches the level of the wheel, it ceases to flow and the motion stops. This is exactly the provision that nature has made for us; our activities should stop before our store of energy is gone and the tank is empty.

What does all this have to do with tonics? What is the effect of a tonic? It adds nothing to the store of energy in the tank. It deposits no energy granules in the nerve cells. It cannot in any way replenish the energy to the slightest degree. This is what it does—it enables us to tap our tanks a little lower down. It irritates the nerve cells, rendering them more sensitive, so that they are more ready to throw off their energy. The consequence is that, under the influence of the tonic, a nerve cell that ought to have perhaps five hundred granules may be reduced to one hundred. A large dose of tonic may make it possible to squeeze out fifty more, to strain the cell, and compel it to throw off more energy than it can afford to lose, possibly to throw off so much that it can never build itself up again.

An illustration in point is the case of a man whom the writer knew who was persuaded to take a powerful medicine that was guaranteed to cure every kind of stomach trouble, with loss of tone in taking treatment, and without attention to diet. The first dose was taken after a heavy dinner, and did compel the stomach to digest it. The man was so pleased to think he could eat what he wanted and not suffer afterwards, that he took the medicine to his physician, vowing its wonderful properties. The physician examined it and found that it was a double-distilled extract of cayenne, capiscum, mustard and pepper. It was simply a tremendous whip. It forced the stomach to digest food that it was not able to digest. But that was the last meal this man’s stomach ever digested. The next day he took a second dose of the medicine, and it set up an inflammation of the stomach that in a few weeks caused his death.

This man’s experience was perhaps unusually severe, but it was the same in kind as that in thousands of others. The reaction is always equal to the stimulus. What is tonic today is inadequate tomorrow. The size and power of the dose must be constantly increased, just as the horse must be whipped harder and harder to get the same amount of speed. The man who goes to a new doctor and tries a new kind of tonic is simply getting a new kind of a whip that excites and irritates him in a different way from that to which he has been accustomed. By and by he exhausts the last resource, and then he is told that he has “nervous prostration or nervous exhaustion.” That is exactly the case. His nerves have been exhausted. What the tired man, the man whose nerves are worn out, needs, is physiological rather than pathological treatment. He needs, not to be “toned up,” but to be built up, to be charged with more energy. Tonics not only drain the system of its vital reserve of strength instead of renewing its vigor, but they are also poisons. The better the tonic, the worse the poison. There is no such thing as a harmless tonic. If it were nothing else that is bad, it would always be a deceiver. It makes the weary businessman think he is strong and vigorous, so that he goes on toiling, toiling, long after he ought to have had a vacation, until he is past all permanent benefit from any rest or treatment. The tonic simply hides from him the fact that he is weak and nervous, and that his store of energy is low; but his best interests demand that he know the truth, that he stop turning the wheels so fast, and let his store of energy accumulate. Those who go on recklessly until every vital organ is out of repair, fall into the condition partly described by the man who declared that what he needed was “a whole new set of works.” There was nothing good left but the case. The doctors must put in a new pair of lungs, a new stomach, a new liver, a new heart.

But all this takes time. It is like tearing down a house and building it over while still living in it; pulling out one old brick at a time, and replacing it by a sound one; taking out a bad wall here and putting in new woodwork there, until the entire edifice is reconstructed. This is what Swedish movements, electric baths, massage, diet, and all the different rational treatments prescribed for chronic invalids, are able to accomplish. They rebuild and renew the body. Rational treatment aims to cure the patient, not his malady, in the knowledge that if the patient is cured, his disease will vanish away, and he will need neither tonics nor medicines of any sort.—Good Health.

(Of all the rational treatments that have been discovered for the
cure of patients in the condition above described by Dr. Kellogg, none is so rational as Osteopathy. And none is comparable to Osteopathy in the good results obtained. It wholly discards tonics and all other drugs and substitutes a natural, physiological activity for a pathological one. We heartily commend Dr. Kellogg's vigorous protest against the so-called medicinal tonics.—Editor.

THE ASSOCIATED COLLEGES OF OSTEOPATHY.

L. M. BEECH.
(Professor Northern Institute of Osteopathy and President Associated Colleges.)

The question has been asked a great many times as to what the association known as the "Associated Colleges" is, and what is the object of its existence. This question has been answered in various ways, some people imagining that it is a sort of trust into which the various reputable colleges have merged their identity, and that it is solely for the purpose of keeping up rates of tuition, and for no other purpose. Such is not the case. Its main object, in fact its only object, is the raising of the educational standard of the different colleges of Osteopathy to a high plane, and to keep it there.

The association was organized in 1898 and the requirements of membership for any college of Osteopathy are: that it has to be regularly organized and legally incorporated; that it shall include permanently, as active members of its faculty, at least two persons who are graduates of some reputable school of Osteopathy; that it shall teach Osteopathy pure and unmixed with any other system of healing, in the sense of modifying the science of Osteopathy by combining with such system; that it shall require regular attendance of its pupils for a period of four terms of five months each; that it shall publish a definite date for the opening and closing of each term; that it shall require a preliminary examination of students before entrance. The minimum course of study and lectures required embraces Anatomy, Histology, Chemistry, Physiology, Pathology, Symptomatology, Principles of Osteopathy, Diagnosis, Theory and Practice, Gynecology and Obstetrics, Hygiene and Dietetics, Psychiatry, and Clinics.

At the last meeting of the association in the city of Indianapolis in July, it was decided that in addition to the qualifications named above for membership in the association, the college shall have graduated at least one class on the twenty months' course before it will be eligible to the association.

The association now consists of seven colleges, the Northern Institute of Osteopathy, the American School of Osteopathy, the Boileau College of Osteopathy, the Pacific School of Osteopathy, the S. S. Still College of Osteopathy, the Boston Institute of Osteopathy, the Milwaukee Institute of Osteopathy.

The association at the present time is on a good basis, and there is no doubt but that it will continue to maintain its standard, and it will no doubt do a great deal of good towards building up the science of Osteopathy.

Globe Building, Minneapolis, Minn.

REPORTED CASES.

CHARLES HAZZARD, M.D., D.O.

Case 1.—Mr. A., troubled with a paralytic condition of the lower half of the body, in consequence of a spinal cord disease. The paralytic condition also affected the bowels, which for several years had been moved only by use of cathartics and enemas. It was a slow case, yielding but little to treatment, but showing some general improvement.

After a course of ten months faithful treatment the patient discontinued treatment, but upon July 30, 1899, wrote me that for ten days the bowels had been regular, an unknown thing to him hitherto. I have no further report of the case. The result was an unexpected one because of the paralysis of the bowels.

Case 2.—Mrs. B., a sufferer from uterine trouble, constipation being a notable complication of the case. At periods her suffering was intense; cramping of the abdomen and arms, vomiting, intense headache, extreme weakness and emaciation, pelvic congestion, and a fevered feeling of the lumbar region of the spine, were all features of the case.

The uterine flow lasted most of the month, and the patient was in bed fourteen days at a time. The bowels were moved seldom and with difficulty. Collapse was imminent. Serious derangement of the lumbar portion of the spinal column, coupled with months of overwork, was the cause of the trouble.

After three months' treatment the patient returned to her home for a period of six weeks. Returning for further treatment, she now reports herself much improved. While headache and weakness still continue, the bowels are normal, and the periods are regular and without pain. The result of the treatment upon the spine was entirely change the conformation of the lumbar portion; being before markedly posterior, it now shows the normal anterior sweep.

Case 3.—Mr. C., troubled for years with bad spells of biliousness, being constipated much of the time. The attacks culminated with such regularity that he could mark, some days in advance, the date upon the calendar when he was sure to have a bad attack. The patient declared that he had inherited a weakened bowel mechanism.

A single treatment would always produce a marked result, leading to so copious an evacuation that patient maintained that the stool was a complete cast of the sigmoid flexure.
Acute Ailments.

EVANS, OWENS & OWENS.
Miller Building, Chattanooga, Tenn.

The virtue of Osteopathy in chronic cases has been demonstrated thousands of times, and reports have often been printed in the various Osteopathic publications detailing cures in this class of troubles. Not so much has been said about its efficacy in acute ailments, and as evidence of its power in this line we give the following cases:

Case 1—Will, the son of Mr. John R., was taken sick with fever. Mr. R., having seen Osteopathy successfully handle a serious emergency case, and having himself been greatly relieved of a chronic trouble by the treatment, called us to attend this acute case. Notwithstanding the fact that many of his neighbors thought him deranged because he did not call a doctor who would “give medicine,” he continued us in charge of the case until the boy was perfectly well.

When we first saw the patient his pulse rate was 130, temperature about 104, pain in back of head, skin dry and action of kidneys scanty. Our treatment was mainly directed toward keeping the bowels open, kidneys active and liver and spleen in good working order. We also, twice each day, gave him a treatment to induce perspiration, which usually resulted in his perspiring a couple of hours following the treatment. The fever lasted five or six days, but our treatment extended over a period of seven or eight days. During this time, with the exception of one night, the patient was completely free from headache which, before treatment, was quite severe.

Case 2—is that of Mr. S., who has suffered every summer for six years with malaria, it having obliged him to spend from two to four weeks in bed each season. He came to us about four or five weeks ago for treatment, as medicine had failed to give relief. We paid particular attention to his liver and spleen, and also, as in the case above mentioned, gave treatments to cause him to perspire freely. After four weeks’ treatment the patient felt like he had been made over, and enjoyed greater freedom from malaria than he had experienced before at any time during this season of the year since he began suffering with it.

There are two very interesting facts in connection with this case. The first one is that since the first treatment his bowels have been perfectly regular, a remarkable fact, when it is known that he had previously suffered with constipation practically all of his life.

The second fact is that he had long been troubled upon attempting to read with a blurring of the vision, which caused the letters apparently to run together and prevented him from doing so. This troublesome feature has disappeared and he now reads without difficulty.

A World of Difference.

Doctor—Have you taken any remedy for that trouble?
Patient—No, doctor, I have not; but I’ve taken a power of medicine.

The first record we have of the above question is found in II. Samuel 20th chapter and 9th verse. Job asked this question of Amasa only as a blind in order that he might smite him with a sword “and shed his bowels to the ground,” yet this does not prove the question an unimportant one, and thus spoil the text for my purpose. It does go to show that our brother’s health is not always of real concern to us and that the question is often asked for the sake of politeness. Perhaps Cain propounded it to Abel under circumstances somewhat similar to the above. At any rate, I know it is often asked in cases where strained relations exist.

Occasionally this insincerity is sorely punished, for there are those who insist upon a literal reply to a figurative question. Those who chance to ask it of the hypochondriac, he who “enjoys” poor health, is quite likely to be regarded with a description of the pathological anatomy, etiology, symptoms, complications, sequelae and diagnosis of all the diseases the sufferer has endured extending from baldness down the body to lungs, or alphabetically speaking, from anthropocentric to zoophobia.

It is not every one, of course, who has such a variety of diseases, but there with the great majority of people it is unnecessary, for one complaint usually affords enough interest and variety to furnish ample food for the most exhaustive conversation. One who suffers with a lively attack of facial-neuralgia is kept sufficiently interested without the dolorous addition of cramp colic; the dyspeptic endures woes enough without having his miseries complicated with the “grip;” and the man who suffers from rheumatism has his hands full enough wishing it were in some other part of his body, without needing the diversion which gall stones would afford.

“Art thou in health, my brother?” Job was smart enough to know that if he asked this question of Amasa and got him started to talking about his health he could very readily run “his sword into his fifth rib” and Amasa would never know what hurt him.

Then as now, the question of health was of the keenest interest, and now as then, people are anxiously seeking it. “The fountain of youth” is as eagerly sought now as in the day of Ponce de Leon. For thousands of years people have been blest, blessed, pveled, purged and dosed, but it is only in recent years that so many of them have become convinced that there is no panacea nor specific in drugs.

We are accustomed to speak of the “wonderful advance” in science in recent years, and we speak truly, for surely it has made gigantic strides. But medicine—drug medication—is not a science.

Dr. Corisante, at Paris, lecturing to his students says:

“I wish to impress upon you that the practice of medicine is nothing but a succession of experiments,
and one person is just as liable to have success as another. There is no such thing as science in the practice of medicine and no one knows it better than the regular practitioner. * Medicine is a collection of uncertain prescriptions, the result of which taken collectively is far more fatal than useful to mankind. Water, air and cleanliness are the chief articles in my pharmacopeia."

About the only "advance" that can be credited to medicine is the discovery of numerous and divers deadly and dangerous microbes and the bestowal upon them of unpronounceable names. This has been something both fearful and wonderful. As Dr. Abernathy, of London, England, puts it, "There has been a great increase of medical men of late, but upon my life, diseases have increased in proportion."

It is true that the present generation of medical men have advanced to the point where they have discovered that many of the theories of disease of a generation ago were all wrong, and as Ambassador Chosse once said, "What were good methods and healing doses and saving prescriptions a generation ago are now condemned and all the past is adjudged to be empirical."

But this advance counts for but little with thinking people, for they know that the next generation will discover the same about the methods, doses, and prescriptions of today. In view of these things, a great number of people have come to the conclusion that the stomach was made for a better purpose than to become a receptacle for all manner of poisonous drugs, and especially at a time when the system is already deranged by disease. Now, more than ever before, hygiene, diet, regular habits, and physical culture are doing their part in preserving the health.

Still the world is full of sick people. There are far too many women today in the condition of that woman of old who had a chronic ailment of twelve years' standing and of whom it is said in the fifth chapter of Mark that she "had suffered many things of many physicians and had spent all that she had and was nothing bettered, but rather grew worse."

If this were said of the woman of today it would probably mean that of one physician she had suffered the removal of an ovary, of another extirpation of the vermiform appendix, and of another, salivation with calomel. The rest of the description would be as true now as then—property and health both gone.

It is no wonder that people are turning in disgust from the old system of drugging and carving—of experimental doses and "exploratory incisions" to more rational, humane and scientific methods.

In view of the long train of failures that has attended the practice of medicine it is not surprising that Osteopathy, a scientific method of drugless healing, should in so short a time have attained such prominence. No other system in less than ten years ever grew from an idea in the brain of one man to such proportions as Osteopathy now enjoys. Ten years ago Dr. A. T. Still practiced it alone. Today there are at least six hundred reputable Osteopaths practicing their profession throughout the various states of the union.

There are at least seven good colleges of Osteopathy—that number being in the Associated Colleges—where Osteopathy is being taught to some of the brightest young men and women of the country, and seven state legislatures by special enactment have recognized the practice.

These things have come about, first, because of the simplicity of its basic principles, the common sense ideas upon which it is founded. Most people can readily grasp its truths. There is much philosophy in some of Dr. Still's illustrations. He said, in substance, that man is a machine and needs common sense treatment. "Why," said he, "if a tap gets loose on your wagon you don't pour oil in the wagon bed; you tighten the tap."

It is a scripturally expressed physiological truth that the "life of all flesh is the blood thereof." A perfect circulation of this and the other fluids of the body, together with unobstructed nerve force, means health.

The business of the Osteopath is to keep these fluids and forces free and to remove obstructions where they exist.

As to how well he has succeeded it brings me to the second reason why Osteopathy has attained such a high place as a healing science, and that is because of successes achieved in treating diseases. Cases that have come under the care of the Osteopaths are not the simple, ordinary kind that other physicians meet daily in their practice and that yield to suggestion and placebos. But they are the ones with "something the matter" with them, stubborn, chronic cases usually of long standing. Many of them are so slow and hopeless that a "change of air" has been recommended by the attending physician. They go to the Osteopath, they are treated, they get well.

In the light of demonstration arguments against the system fall flat.

There is no doubt that the closer we keep to nature the better off we will be physically. When people pay more attention to proper rest and exercise, to diet and hygiene; and when the machine does get out of order, if they will consult a skilled Osteopath the answer to the question, "Art thou in health, my brother?" will far more often be in the affirmative.

300-504 Miller Building, Chattanooga, Tenn.

Guest—What have you got?

Waiter—I've got chicken liver, calf's brains, pig's feet.

Guest—I don't want a description of your physical peculiarities. What you have got to eat is what I want to know.—Boston Traveler.

There is a druggist in one of the suburban districts who advertises: "The doctor prescribes, we execute." Such advertising cannot fail to appeal to those who desire to be executed.—Boston Journal.
More Persecution.

A crusade against Osteopaths has again been started in Indiana. At the instance of the State Board of Medical Registration and Examination, Dr. Chas. Sommer, who is practicing Osteopathy at Muncie, Ind., was arrested. He was charged with practicing medicine and surgery and opening an office for such purpose without a license. We give the result in his own words: "I was tried on July 31 in justice's court. I made no defense; had no witnesses in my behalf. The state introduced five M. D.'s, who defined medicine, some of whom made an attempt to define Osteopathy. Three of my patients were placed on the stand by the state, who explained my treatment and said they were improving and were well pleased with my work. The jury found me not guilty." This has ever been the verdict in such cases when left to the judgment of American freemen.

Dr. C. A. Ross has been arrested on a similar charge at Lafayette, Ind. Judgment being rendered against him, Dr. Ross appealed to the circuit court and will be tried there in October. His attorney is confident of winning a verdict in the higher court.

The attorney-general at the request of the Board of Trustees has filed a learned and lengthy opinion as to the applicability of the Indiana medical law to the practice of the Christian Scientists, Faith Curists, Mental Healers, Metaphysical Mediators, Osteopaths, and Magnetic Healers. He sums up and disposes of all but the latter two classes in the following language: "In so far, then, as they advertise themselves as physicians, and accept fees for treating disease, by silent or other forms of prayer, or by moral advice, or by profound thought, or by absolute non-action, they unquestionably, in my opinion, violate the law."

He then disposes of Osteopaths and Magnetic Healers in the following words:

"On the other hand, Osteopaths and Magnetic Healers, who hold themselves out as physicians and advertise an ability to cure diseases, or who accept fees for the treatment of diseases, by prescribing for them either medicines or the simple laying on of hands, are, if unlicensed, violating the law. On the other hand, if they abstain from claiming to be doctors, and from advising treatment, but simply administer massage under another name, there is nothing in the law which forbids them giving to their treatment what name they please, and there is nothing in the law which requires massurers to be licensed, and one who administers massage, whether recommended by a physician or voluntarily sought by an afflicted person, is at liberty to charge for his services whatever he deems them to be worth."

If the opinion of the attorney-general made law the Osteopaths of Indiana might well tremble for their rights. For what reputable, competent, and scientific Osteopath would ever consent to "simply administer massage" under any name? Fortunately, however, it is not the opinion of the attorney-general but of the courts that govern in such matters.

Dr. F. W. Hannaf, of Indianapolis, who was asked for information in regard to the controversy, and whose views of the situation, in his state were solicited, comments as follows:

"Different shades of opinion are being expressed in the papers from day to day and a strong anti-medical sentiment may set in any time, as it has elsewhere. As to the attorney-general's opinion, it is purely technical, and may be taken, on the whole, as unfavorable to the practice of Osteopathy as a full and complete system of therapeutics, under the present medical law. It is, however, only one man's opinion and has met a storm of opposition from broad-minded, common-sense people."

Dr. Chas. Saxton, of Rushville, Ind., late president of Indiana State Medical Society, says: "The law will fail because it makes a policeman of the doctor." He favors discrimination between competent and incompetent practitioners only of whatever school, not between "pathies."

The Indianapolis Journal for Sunday, August 20, contained the following question and answer:

Q.—Is Osteopathy considered a reputable system of therapeutics?

A.—It depends altogether on who does the considering. Its advocates claim for it wonderful powers, while medical writers denounce it, without investigation, as arrant quackery.

We print in this issue, and will henceforth keep standing, a direc-
tory of the officers and committees of the A. A. A. O. We do this for the benefit of the members who may wish to communicate with any of them.

The Official Directory.

The Osteopathic profession, or more strictly speaking, the A. A. A. O., has for some time felt the need of an official directory of its members. Steps toward the publication of one were taken at the annual convention of the Association at Kansas City a year ago, but nothing came of it. The matter was again brought up and discussed at the Indianapolis convention, where the consensus of opinion seemed to be that it should appear at stated intervals, preferably monthly, so that it could be kept corrected and revised. After due discussion the following motion was passed—we quote from the minutes of Secretary Harwood: “Moved that it be the sense of this convention that the Trustees give to a paper—preferably The Popular Osteopath—a directory of the members of the A. A. A. O. for publication. Carried.”

In conformity with this action Dr. E. W. Goetz, chairman of the Board of Trustees, referred the matter to the Printing and Advertising Committee. This committee unanimously agreed upon The Popular Osteopath as the medium for its publication, and arrangements have been perfected for its appearance in October.

By the plan adopted by the Trustees the members of the profession may have the official directory and official organ combined for ten cents per copy, the usual price of the magazine. Inasmuch, however, as there will necessarily be some inaccuracies in the first issue, and constant changes of address in succeeding issues, the better plan is for each member of the Association to become a regular annual subscriber to The Popular Osteopath. On account of our efforts for the advancement of Osteopathy we feel that this much is our due. And now that we will publish monthly the official directory, thus increasing the size of the magazine, and necessarily its cost, we ask for the subscriptions of the members. Each subscriber will get the full worth of his dollar, and, if enough subscribe, The Popular Osteopath will be better enabled to continue to work for the best interests of the profession.

Look Out for Incompetent Osteopaths.

While there may be a difference in regard to capability as between graduate Osteopaths, yet the fact that they are graduates signifies that they have each attended school twenty months, done the required work in the treating rooms, and passed the examinations preliminary to graduation.

On the other hand, there are those claiming to be Osteopaths who have attended fake institutions for a few days, weeks or months, as the case may be, and in some instances, who have bought diplomas outright without any attendance at all.

There are others whose only knowledge of the subject has been gained from reading some book, or from having taken a few treatments from an Osteopath, or from having seen a few treatments given.

Beware of such. Where any doubts exist as to the competency of the person in your community claiming to be an Osteopath address a letter of inquiry to the secretary of the A. A. A. O., Miss Irene Harwood, 308 New York Life Building, Kansas City, Mo. She can inform you whether or not the party inquired about is a graduate of a reputable school.

J. M. Da Costa, M. D., LL. D., president of the College of Physicians, of Philadelphia, etc., and author of one of the standard works on Medical Diagnosis, in the latest edition of his work, under the head of General Considerations says: “It is sometimes urged that accurate detection of disease makes timid practitioners and deprives them of confidence in medicines. More just is it to say that it shows how wide is the chasm between our acquaintance with morbid conditions and our acquaintance with remedies; how far our skill to detect disease still outruns our power to cure it.”

With thermometers, urinometers, microscopes, stethoscopes, laryngoscopes and ophthalmoscopes an amazing lot of information about pathology may be gathered. In this branch of medicine considerable advance has been made in recent years, but in the really important work of curing disease the medical men are as impotent as they ever were. If they would succeed let them discard drugs, acquire the Osteopathic idea, and the Osteopathic technique.

At the request of the Indiana State Board of Medical Registration and Examination, the attorney-general has rendered an opinion which is, on the whole, distinctly unfavorable to the practice of Osteopathy in the Hoosier State.

Indiana, unlike Tennessee, Michigan, Iowa, Vermont, Missouri and the two Dakotas, has no law recognizing the practice of Osteopathy, and though there are graduate Osteopaths practicing in most of the principal cities of the state, we believe no conviction has ever been secured against any of them.

The medical practice act, under which convictions are sought by the Board of Registration, was never intended to apply to the Osteopath and it may be safely predicted that no conviction of an Osteopath for practicing his profession will ever be secured in the higher courts of the state.

The persecution that the Board is now waging against Osteopathy will result, however, in a demand by the people for such legislation as will place the Osteopath upon the same professional footing as the practitioners of medicine.

So, if our medical brethren in Indiana choose to invoke the law to prevent the people of that commonwealth from having the attendance of the physician of their choice, we say, “Lay on, Macduff.”

The article by Dr. C. M. Case which appears in this issue is of more than ordinary interest from the point that he is a medical doctor,
who for several years had exceptionally good opportunities to see the results of drug therapeutics. Besides some years spent in private practice, he was assistant physician at St. Louis City Hospital, St. Louis Female Hospital, St. Louis Poor House, and Acting Assistant Surgeon in the U. S. Army. After October 1 Dr. Case will become a member of the faculty of the Southern Institute of Osteopathy. We congratulate this institution on its good fortune in securing a man of such varied attainments and excellent abilities as Dr. Case.

We are informed that the authorities in South Dakota have refused to grant licenses to Osteopaths to practice in that state. Mandamus proceedings will probably be instituted to compel the issuance of licenses in accordance with the law recently passed by the state legislature. Arrogant officials should not be permitted to thwart the will of the people as expressed in their statutes.

We desire to call attention to the advertisement of the Northern Institute of Osteopathy, of Minneapolis, Minn., which appears in this issue. Some of the brightest men and women in the profession are graduates of this excellent institution. Dr. Rheem, its president, is also president of the Associated Colleges of Osteopathy.

Osteopathy can hardly be said to have a local habitation, and hence "the home of Osteopathy" is wherever an earnest, conscientious and intelligent Osteopath is doing business. Poetically speaking, it might be said that its home is in the hearts of grateful people who have been relieved of suffering through its application, and there would be more truth than poetry in the remark. At any rate Osteopathy is too broad to be confined within the narrow limits of any town, and too big to be owned by any institution.

The Northern Institute of Osteopathy, from which we did not hear in time to report in our last issue, graduated a class of eight members in June. Henceforth classes will be matriculated only in February and September of each year.

Mr. H. R. Bynum has in contemplation the publication of an Osteopathic quarterly to be called the American Osteopath.

The latest Osteopathic publication to reach our table, and by the way, it is one of the best, is Osteopathy, a magazine published by the Washington Institute of Osteopathy, Seattle, Washington.

To the Practitioner.

Henceforth the Popular Osteopath will be mailed only to regular subscribers or to those purchasing copies. The subscription is $1 a year or 10 cents a copy. No practitioner can afford to be without it. If you desire prices on the magazine in quantities, address

The Popular Osteopath,
Chattanooga, Tenn.