OSTEOPATHY AND THE BOY — A PROPHECY.

ANNIE RILEY HALE.

Every boy is by nature an Osteopath. Not only does his natural repugnance to drugs incline him favorably toward the system, but his multifarious experience with bumps, bruises and fractures gives him ready acceptance of the theory of "structural abnormalities," and bone impingement on nerves and arteries.

Not that the boy has any knowledge of the meaning of these terms. He may even be ignorant of the very existence of nerves and arteries—if he has not yet reached the point in his public school curriculum where a book on "Anatomy, Physiology and Hygiene" has been inserted for his discomfort. And he would assuredly gape on you with ill-concealed contempt were you to address him on any subject in polysyllabic language.

At the same time, let any sensible doctor of Osteopathy, in plain, simple words, explain a diseased condition, its cause and the proposed remedy, to a 10-year-old boy of average intelligence, and immediately the Osteopathic theory becomes incorporated in his boyish confession of faith. Nothing could be more plausible to his way of thinking.

Another thing—and perhaps the chief thing—which paves the way for the reception of Osteopathic dogma in the boy's mind is his ingrained opposition to a dose.

Of all the terrors, large and small, which affright his youthful imagination, none assume quite such alarming proportions as the family doctor! No wonder, that beside this dread potentate, with his nauseous draughts, nostrum and powders, and his delusive promises that "they won't taste bad," the Osteopath appears to the boyish fancy as an angel of light.

Not that disease or the treatment of it in any shape has any attraction for the boy. He regards all sorts of ailments—slipped vertebrae, obstructed nerve centers and all the rest—as nuisances, altogether impertinent to the main business of life, and quite irrelevant to the all-important and all-absorbing occupations of marble-playing, top-spinning, and kite-flying.

Yet, if these engaging pastimes must suffer interruption from the ills of the flesh, the boy vastly prefers the remedial agency of the Osteopath to that of the M. D. Which may go to show that in making a
Had I known how to care for Osteopathy, His first convert was himself. He had been informed by his physician to 'eat meat' and drink tea, but the sight of a dead cat on his plate caused a fits of convulsions. He began to lose weight, and at the age of 38, he was diagnosed with osteitis. His doctor prescribed a diet of meat and fish, with the occasional slice of bread and a cup of tea. But the boy was not satisfied, and he began to experiment with different diets, until he discovered the gospel of osteopathy. He began to eat meat again, but this time he ate it raw, and he also drank a lot of tea. The results were amazing. In just a few months, he had regained his weight and his health improved dramatically. His doctor was astounded, and he recommended osteopathy to everyone he knew.

The boy, being a medical student, was eager to learn more about osteopathy. He began to study the works of the great osteopaths, and he soon became convinced that osteopathy was the answer to all his problems. He began to practice osteopathy on his own patients, and he soon became a leader in the osteopathic community. He wrote many books on osteopathy, and they were all bestsellers. He was also a very skilled surgeon, and he performed many operations on his patients without anesthesia. His patients were amazed at his skill, and they often referred others to him. He became a very wealthy man, and he used his wealth to fund the osteopathic schools, and to establish osteopathic hospitals in many of the large cities.

The boy was a very popular figure in society, and he was known as the 'father of osteopathy'. He was often invited to speak at the great universities, and he was also invited to many royal courts. He was a very humble man, and he never forgot his humble beginnings. He was always ready to help those in need, and he was known for his generosity. He was also a very spiritual man, and he often spoke about the importance of a pure heart. He was a man of great courage, and he never backed down from a challenge. He was a true hero, and he will always be remembered for his contributions to the field of osteopathy.
er's, and in quite boyish fashion, contributed his mite toward the spread of Osteopathy.

"Why don't you go to the Osteopath doctor to cure your bad cold?" he asked of a playmate in a paroxysm of coughing, who had also remarked that "it felt like a top spinning in his ears"—the effect of the quinine he had been taking.

"I caught a bad cold playing marbles in the rain," said the hero of this sketch, "and I coughed all that night. But next day I went to the Osteopath, who rubbed me all up and down, and that night I didn't cough at all—and my bad cold got well and I didn't have to take a bit of medicine," he concluded exultantly.

THE PHILOSOPHY OF Colds.

SAMUEL BENHAM BARNES, B.S., D.O.

This is the time of year when people are especially prone to take cold. Being warmly housed and seeing the day appear warm and sunny, they go out without due protection against the whistling wind and damp air, that sends a chill to the skin. Or after being out in a rain, getting clothes damp and feet wet, they sit indoors with clothes still damp and feet still cold. There is a vast amount of miscellaneous lore known to everybody about the condition of "cold" that results from such indiscretions, but a few systematic remarks thereon will not be amiss.

The importance of colds is too little appreciated by the general public. Appalling recitals of the evil effects of taking cold are advertised to terrify people into buying Ranvon's Remedies, or somebody's specific, and these statements are not far from the truth; but more of them later. Certainly carefulness to guard against taking cold is not to be characterized as old maid squeamishness—it is plain common sense.

This coryza, or acute nasal catarrh, is an inflammation of the mucus coat lining the upper air passages, sometimes extending down the trachea and becoming bronchitis. Expressed in these technical terms, the condition attains its due importance, too often slighted when it is called "only a cold." The mucus membrane becomes thickened and surcharged with blood, and the little glands secreting the mucus are disturbed in their action. In simple acute cases they make an excessive fluid discharge; in chronic cases, with catarrh, they secrete much less than normal and allow the nasal passages to become dry. Previous to the stages when the membranes become dry or atrophied, its swollen condition is what causes the difficulty of breathing on taking cold.

The swelling means stagnation of blood in the capillaries; stagnation means lowered vitality, and nearly always ends in suppuration or pus formation, and the destruction of tissue. This accordingly takes place in the nose, every cold finally ending with a thick mucopurulent discharge and the desquamation or sloughing of portions of the devitalized membrane. This may seem like a bulldozing aggregation of large words, a la patent medicine advertising, but it is simply the dignifying of plain facts. The process, to be sure, is not very extensive at any one attack of coryza; but I do not believe that the mucus membrane of the nose, once handicapped by a severe cold, ever again comes quite so near to the scene of good health and resisting power as it was before the cold. It certainly does not for a long time recover a good tone, the length of time depending on the climate.

Repetitions of the coryza soon cause a condition of chronic catarrh. This, if unchecked, leads on from a swollen condition to an atrophied condition of the mucus membrane, drying up and sloughing off.

The patent medicine advertisements of the results of catarrh are not so far off, after all.

Ozaena! Yes, that unfortunate condition when, the mucus membrane gone, an offensive odor comes from the nose, caused by the putrefactive changes in the dead and dying tissues. Deafness? Yes; the inflammation extending up the eustachian tubes and clogging the middle ear with a discharge of mucus? Bronchitis? Yes, indeed. Pneumonia, diphtheria, croup, whooping cough—why not all of them? for the membranes and throat are the more susceptible to any disease when weakened by catarrh. Measles, German measles, scarlet fever, all begin with a coryza. Consumption? Yes; we may even whisper this dread disease as the result of catarrh. The advertisements are not so far wrong, after all.

For the reason why colds so commonly affect the nasal membranes rather than other portions of the body, we may look to the habits of life in civilized countries. Coryza is a stranger to savages, as it is to those who labor constantly in outdoor occupations. It is only those who are accustomed from childhood to living in warm rooms, that are susceptible to colds. The frequent sudden changes of temperature from warm indoor air to the cold outdoor air of winter weakens the membrane lining the upper air passages. The more confined the indoor life, the greater the weakening.
Now, when a shock of cold air reaches the skin, the thermal nerves are stimulated, and, reflexly, the vaso-constrictor nerves to the skin. These contract the capillaries and small blood vessels, and the blood of the skin is suddenly driven away from the surface. As there is always about the same amount of blood in a person, naturally it must distend some other vessels to accommodate the quantity pressed from the surface; and the distention will of course occur at the weakest point first. Thus it is that the mucous membrane of the nose has been weakened by heat and sudden changes, its capillaries giving way, and the nose bears the brunt of the shock of a cold more than other portions of the body. There is engorgement of blood in the nose, with the swelling and other phenomena above described.

One attack predisposes to another, especially soon after the attack; the delicate capillaries being very slow to regain their full to-nicity, if indeed they ever do.

A few words on prevention will be of more value than the above descriptive matter. To be true to Osteopathic reasoning, any discussion of the condition must get at the true cause. We have noted the cause of colds to be double: First, the weakened nasal membrane; and second, the cold shock on the thermal nerves, they affecting reflexly the vaso-constrictors and shutting off the blood supply to the surface.

Prophylaxis directed to the first cause may be expressed in three words that cover the ideal prevention of colds: Live out doors. In order to prevent a weakening of the membranes, this must of course be applied especially to children, and the habit kept up with as much diligence as possible in later years.

Prophylaxis directed toward the second part of the cause, the sensitiveness of the skin to cold, may take two forms: (a) the ordinary means of preventing colds, of which the popular knowledge is very complete; avoiding wet feet and damp clothes; avoiding sitting in a draught of air and in a cold room, especially if the body has been heated, etc. It is especially dangerous to sleep in a draught of air. In short, any agency that produces a sudden or prolonged withdrawal of heat from the body tends to induce a cold. (b) The unusual means of preventing colds. I refer to means that can be adopted to train the skin to be less susceptible to changes of temperature; or more accurately speaking, to train the nerves that they and the circulation will retain their equilibrium even in the face of "cold" conditions. And how do this other than by giving them, under favorable conditions and perfect control, frequent doses of the very thing against which we wish to make them immune? What is wanted is to toughen the skin; and though the idea seems harsh, the process is perfectly mild and simple; it consists of the plain, old-fashioned, every day cold, morning sponge bath. The sensation of cold water on the body just warm from bed is far from unpleasant, and except in the coldest weather is really a pleasure. No one who has not formed this delightfully healthy habit can realize how exceedingly useful it is. I say with all seriousness and fervor that there is no one thing a person can do, either for preventing colds, or for preserving the general health, that is so effective as this daily cold bath.

Of course, to be beneficial, it must be done right. It must be administered when the body is warm, not cold—immediately on rising from bed. It must be done quickly; in warmer weather, five minutes will be abundant for the whole operation of wetting and drying, and in cold weather it should be crowded into one minute of not much over sixty seconds.

The aim here is not cleanliness, but the sudden cold tonic, and the way to minimize the time required is to leave off all the frills, not even using a sponge; stand in front of a wash bowl of water and using simply the hands, wet first the face; then splash a handful of water over the chest and abdomen, rubbing a wet hand down each arm and both of them down the back, all in a single breath. Then splash a handful of water down each lower limb and you are done, sixty seconds from the time of rising. In warm weather a sponge can be used and the bath taken with more deliberation and pleasure, and a little less splashing of water on the carpet.

Above all, the body must be quickly and vigorously dried with a rough towel. Rub the skin until it glows with a return of the blood to the surface that was driven in temporarily by the cold. Failure to do this and to promptly reopen the circulation in the skin prevents the tonic effect of the bath, in fact, makes it worse than useless. The shoulders, back and back of the thighs can be best dried by grasping the towel at diagonal corners and drawing it to and fro by extending the arms forward and dragging the towel over the skin with abundant friction.

The effect may be greatly increased by further vigorous rubbing of the whole body with a flesh brush or the bare hands. The essential part of the whole process is quick action—every motion made should be swift. The beneficial effects of the cold bath are not for those who are lazy about it.

If you are an invalid you are in a position to receive all the more benefit from this custom; but you should begin gradually, by having the water warm at first, and a degree or two cooler each morning until it is hydrant cold. In fact, anyone who is in delicate health would do well to begin in this way, using a week to become inured to the cold water. Then look out for improved health. You will surely see it. To adapt a familiar advertisement, "Wanted, a case of bad health that the cold sponge bath will not benefit."

However, in spite of these precautions (though usually for the lack of them, for the well-trained cold-bath man never takes cold) people will sometimes catch cold, and a discussion would be incomplete without a word as to cure. Our old anatomist, Dr. William Smith—brilliant, brainy, bomb-proof Bill, but who is unfortunately always under a cloud—used to put it this way: "To cure a cold, have the patient take a hot tub
bath at night in a hot room, with the water as hot as he can stand it at first, and then make it twice as hot by adding boiling water gradually. Have him go at once, without chilling, to a warm bed and sleep between blankets. In the morning his cold will be gone, but he must stay indoors the whole day to prevent return of the congestion.

There is little use in trying to cure a cold if you cannot stay in a warm room for a whole day or more. Even the shortest sally into cold air will kill the effort. I should require this: go home at noon, prepared to stay in at best a day and a half. Keep the body warm and the feet hot until bed time, taking frequently a glass of hot ginger tea. Take an Osteopathic treatment if you can; if not, the very hot bath, then sleep warm between blankets, and keep up the process of heating the feet and stomach all the next day, and your cold will be gone.

A cold is certainly worthy of as honest and painstaking effort at cure as is measles or scarlet fever; and by careful attention, it can be promptly cured. It is better to give it heroic treatment for a day and a half and then be done with it, than to be suffering along for a couple of weeks with a bruised feeling of general depravity.

310 McCleary Building, Chicago.

IS OSTEOPATHY DANGEROUS?

JOSEPH H. SULLIVAN, D. O.

This question has been raised recently in Kentucky by the disciples of medicine in the progress of their persecution of the Osteopaths in that state.

It is difficult to enter seriously into discussion of this question, knowing as we all do of the utter falsity of the claim and of the perjury committed by these individuals in making the statement. They knew better, very much better.

Most of us personally know one of the Osteopaths whom they are attempting to annoy, and while discussing the possible danger of our treatment we might look back a few years and recall the occasion of this gentleman's entry into the Osteopathic field. Doubtless his case and condition at that time will splendidly illustrate which is more dangerous, medicine or Osteopathy?

As I recall it, he had suffered an injury to his neck and shoulder. In fact, the whole brachial plexus was involved, resulting in muscular atrophy, the arm being almost transparent, and useless. His suffering was intense indeed. Such, briefly, was his condition on his arrival at Kirksville, Mo., to be relieved completely by Osteopathic treatment.

What had medicine done for him? Nothing at all. He had had the best talent possible in surgery.

The surgeons looked very wise and experimented much at his expense, and of course the expense was great. They treated the arm continually for months, when the cause lay in the shoulder and neck; and when his suffering became unbearable the (horribly dangerous) hypodermic was called into play.

We all know this gentleman had been under dangerous treatment prior to his coming to Dr. Still. In fact, he came dangerously ill. Why had his treatment been dangerous? Because of ignorance, ignorance born of pride, in those who had treated him. If they fail to locate the cause of disorder, will they confess? Oh, no, but will still take your money. Will they look over the high wall which surrounds them and see what others are doing? Far from it; they want to enjoin all others from thinking. That is their prerogative. If they will only cease being Pharisees we could forgive, but no; rather will they peruse books one hundred years old on disease and its remedy, hence the patient does not realize on the wonderful discoveries of today.

Should the patient desire up-to-date methods, pray let him call in the Osteopath. Do not fear Osteopathy, its safety is its credential, its brightest jewel among many. None have ever been injured by it. You run no risk of being poisoned by one who perhaps has imbibed too much of his own spirit frumenti before calling on you. You run no risk of having some young medical enthusiast cutting off your appendix vermiformis because of an abdominal pain; an Osteopath removes the pain in a few minutes in most cases.

You run no risk of having both ovaries removed because of having severe headache, neither need you fear having to undergo surgical operation for floating kidney and have your kidney tied to your ribs, when the trouble is elsewhere. And so we might continue for a long time, if necessary, as these people don't realize that they live in a glass house, it is well to bring such fact before them on occasions of this kind.

The whole unvarnished truth is that Osteopathy is a menace, a terribly dangerous thing to the practice of medicine. There's the rub; that is the cause of the uproar. But let our Kentucky medics rest assured that the dust they throw will not conceal the truth from the layman. The people are astir; and the people will all in good time render their verdict. Thousands have done so already, have broken away from the system of guesswork and worse than dangerous treatment.

While on this subject it seems an opportune time to refer to parts of an address delivered by Hon. Zach Shad, of Colorado, before the legislature of that state recently, as follows:

"For fifty years the various schools of medicine have exhausted the English vocabulary to find billingsgate sufficiently vile to express their contempt for each other; each school has vied with the other in denouncing the ignorance of their opponents. * * * But now behold the sudden transformation. * * * We behold them
all crawling into one couch, and with tears in their eyes and uplifted hands imploring this intelligent body to spread the broad mantle of the law over their medical miscegenation and shut out the intellectual development of the nineteenth century." * * *

"If the patient rebelled they bled him; this was to give him strength. When he complained they blistered him. This was done to increase the albumen in his blood. If he showed life for any unnatural period then they slugged him full of mercury, and turned him out in the cold world a limping monument to that mummy-ried science whose God is calomel and whose religion has always been a brutal hatred of progress."

Evidently Mr. Shed would find a fertile field for the expression of such opinions down in old Kentucky. He appears to know much of the dangerous drug and entirely harmless science of Osteopathy.

Masonic Temple, Chicago.

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**DRUGS VS. OSTEOPATHY — REVIEW OF THE EVIDENCE.**

A. I. Evans, D. O.

As Osteopaths we do not ask or expect people to accept dogmatically what we may say about the merits of our system of healing. In this matter we favor the fullest investigation. We do not say that because our system is new and a radical departure from old and established systems that therefore it is right. We realize that change does not necessarily imply reform. A departure from ancient theories and practices may or may not be in the line of improvement.

Neither is it wise in this the golden age of advancement and discovery to accept as irrevocably and unalterably true any doctrine or dogma merely because it is hoar with the frost of time.

On this point Wm. Goodell, M. D., in his excellent introduction to Keating & Coe's Gynaecology says: "As one of the results of this age of unrestful progress, at every turn of the hour glass some cherished scientific creed is found wanting, some accepted philosophic dogma is proved a heresy, and not a tradition stands unchallenged. Hence the seeker after truth often has to unlearn as well as to learn."

Then, with unbiased minds, let those who are honest desirous of getting at the truth, as to the relative merits of drugs and Osteopathy as healing agencies, subject the testimony offered on behalf of either to those tests which apply to evidence in courts of law. Let them as jurors divest themselves of all prejudice and preconceived notions and judge of the matter according to the evidence.

In reviewing the evidence I make no pretension to taking it in the order in which evidence is introduced in trials in court.

I will consider first the testimony of medical doctors. Practically all of the opposition to Osteopathy comes from the medical doctors. Applying the rules of evidence to these witnesses, let us see what value attaches to their testimony. One of the primary rules of evidence is that a witness can only testify to facts within his personal knowledge. Hearsevidence is inadmissible. If this rule were invoked against our medical brethren, these volunteer witnesses, their mouths would be stopped. Some editor of a medical journal has said, "Osteopathy is massage," and, "It is massage," croaks the little doctors all over the country. But this is not evidence.

Their testimony would for the same reason be inadmissible as "expert testimony," for the law wisely says that before a witness can qualify as an expert he must be able to show a good knowledge of the subject about which he offers to testify. Only a few doctors have given Osteopathy such study as would entitle them to testify, and in those instances where they have done so their testimony is highly favorable to it.

Another thing to consider in connection with what medical men say of Osteopathy is the interest they have in the result of the controversy. Any court when so requested by either party will instruct a jury that in determining the weight to be given to the testimony of any witness they are at liberty to take into consideration the interest such witness may have in the result of the suit.

In the light of such an instruction, what must be thought of those doctors who testified in a Kentucky court that Osteopathy was barbarous and inhuman and would likely kill more than it would cure? Their interest is so apparent, their statements so partisan, absurd and palpably untrue that their testimony is utterly worthless—to the party introducing it. A too willing witness is a bad witness. It is such testimony as the above quoted that entitles the opposing party to the benefit of another rule of evidence, which takes the form of an instruction from the court and is as follows: "If the jury believe from the evidence that any witness has wilfully sworn falsely to any material point in issue they are at liberty to disregard the whole or any part of his testimony."

Thus tested by the rules of evidence, as applied in courts of law, we effectually dispose of the testimony against Osteopathy.

But we are not yet through with the testimony of the medical doctors. Admissions of a party and declarations against interest are taken most strongly against the party making them, and are considered the best evidence of a fact. With these rules of evidence in mind, I will give some evidence, as to the worthlessness of drugging from physicians renowned in their profession.

I believe that that famous medical doctor, teacher and writer, Oliver Wendell Holmes, voiced his honest conviction when he said: "Mankind has been drugged to death, and the world would be better off if the contents of every apothecary shop were emptied into
the sea, though the consequences to the fishes would be lamentable.”

Sir Astley Cooper, M. D., of England, says: “The science of medicine is founded on conjecture and improved by murder.”

John Mason Goodie, M. D., F. R. S., says: “The effects of our medicines on the human system are in the highest degree uncertain, except, indeed, that they have destroyed more lives than war, pestilence and famine combined.”

Dr. Alonzo Clark, of New York College of Physicians and Surgeons, says: “All our curative agents are poisonous, and every dose diminishes the patient’s vitality.”

Dr. F. Coggeswell, of Boston, says: “My conscience cannot withhold acknowledgement of my firm belief that the medical profession is productive of vastly more harm than good, and were it absolutely abolished mankind would be the gainer.”

J. M. Da Costa, M. D., L. L. D., president of the College of Physicians and Surgeons, of Philadelphia, in his work on Medical Diagnosis 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.”

Dr. S. Weir Mitchell, though a believer in the use of drugs, has this to say in his little work on Doctor and Patient: “There are those of my profession who have a credulity about the action of drugs, a belief in their supreme control and exactness of effect which amounts to superstition, and fills many of us with amazement.”

Medical doctors are great faddists. Perhaps the most widespread as well as heartless and wicked fad practiced by them is that which takes the form of ovariotomy. On this matter I will quote the testimony of Wm. Goodell, M. D.: “In the treatment of the diseases of women at the present time there seems to be a tendency to lay too much stress upon lesions of the reproductive organs. Too little heed is therefore given to the nerve element, and as a natural sequence, the surgical antenae of the medical profession, always too keenly sensitive, vibrate most vehemently at the approach of an alluring woman. This trend of the profession to appeal to the knife as the great panacea for woman’s diseases is seen everywhere. It prevails alike in city, town, village and hamlet. It asserts itself in every medical discussion, and stands out in bold relief upon the pages of every medical journal. This, in my opinion, is the great medical error of the nineteenth century.”

H. H. McIntyre, M. D., D. O., has pointed out that Osler, in his great work, “Principles and Practice of Medicine,” has declared the uselessness and, in many cases, the positive harmfulness of drugs in the treatment of over twenty-five of the common diseases. Medical testimony of this character could be multiplied, but I have already introduced more witnesses than would be allowed on one point in a court of justice.

In presenting a few witnesses for Osteopathy I will keep in mind the rule about the interest of a witness and not introduce an Osteopath.

Here are a few that give direct testimony about matters that they have either seen or experienced:

Rev. Sam P. Jones: “I have seen the lame walk, the sick healed and the invalid brought back to health and vigor under the touch of the skillful Osteopath.”

Helen De Landrecie: “I know what it has done for me, and I am now and ever expect to be the firm friend and loyal defender of Osteopathy.”

Hon. John P. Altgeld: “I am indebted to Osteopathy for great good to both Mrs. Altgeld and myself. When prescriptions and drugs were as ineffectual as empty words it came to our rescue and did that which other things had failed to do.”

Gov. T. A. Briggs: “Osteopathy has helped me. It has also done good in my family and will hurt no one.”

Judge I. H. Goodright: “Certainly Osteopathy is a science of high attainment and utility. No one capable of thinking fairly can withhold applause for a system which is daily curing the most stubborn and serious affections without knife or drug.”

Mrs. J. B. Foraker: “If Dr. A. T. Still had discovered nothing new in medical science but what he has done for woman his name would go down the ages as the greatest physician of any age and one of the historical benefactors of the race.”

Mrs. W. M. Springer: “I can never say enough in praise of Osteopathy. It relieved me from unbearable invalidism.”

Hon. Robert L. Taylor: “When a century later historians are sifting the events of this time for the epoch making discoveries of science and civilization there will be few chapters more important, I think, than that devoted to the reformation in medicine which will have come about through the acceptance and practice of Dr. Still’s system, known as Osteopathy.”

Here is the plain and direct testimony of a few people who are not the propagandists of any particular school of healing. They speak of what they know, only in the interest of truth and science. Many other names of renown could be added to the list, to say nothing of the great numbers of plain people who have experienced the benefits of Osteopathy. The testimony of those people whose health has been restored to them by this new science, though they may not be able to explain how, comes with the force and directness of that of the blind man of old, who only knew that whereas once he was blind, now he could see. It is of inestimably more worth than the so-called scientific evidence of the paid expert.

Chattanooga, Tenn.

Hewitt—I have been threatened with appendicitis.

Jewett—Who threatened you—the doctor?—Life.
A case for illustration was a Mr. M—, of a small Illinois town, who had what his local physician had pronounced as neuralgia of the arm and shoulder, or rheumatism, with a tendency to paralysis of that member. He suffered excruciating pain the entire length of the arm, and all through the chest as low as the fifth rib on left side (it was his left arm that was affected) and he suffered a great deal of pain between the shoulders. He was left in this condition after a severe attack of la grippe last February, one year ago, and constantly grew worse until he came to me on July 3, following. His arm at that time had begun to waste away and the pain was continuous. Upon examination, I found at the junction of first and second dorsal a marked lesion. The spinous processes at that point were not in line, the first being twisted quite markedly to the right. This caused an obstruction, if you will, to nerves at that point, resulting in a contraction of all of the muscles of the upper part of the spine and producing the pain between the shoulders. And this same contraction of muscles was interfering with the natural flow of nerve force to the brachial plexus. Were I to say just what I considered the condition of his arm to be when he came to me, and in the most simple way, I would say that it was a case of starvation of the nerves, pure and simple. They were hungry and asking for nourishment. The contraction of muscles there was shutting off the vaso-motor control of circulation to the arm, and pain was the result. I said the lesion was at the junction of first and second dorsal vertebrae. How did I know that to be the point of obstruction, or the center where the primary cause was produced? For three reasons: First, because of the unnatural position of the spinous processes or the marked lesion at that point, which any competent Osteopath could readily detect. Secondly, because of the extreme tenderness to the touch at that point of the spine; and thirdly, from looking at the arm, I knew his condition to be one of obstruction or interference with the law of nutrition to the arm, and we all know that the vaso-motor nerves which control the circulation of the arm leave the sympathetic system through the ganglia situated at the junction of the first and second dorsal vertebrae. Here now are three reasons, any one of which should be a guide to a correct diagnosis or, rather, to the location of the direct cause of this patient’s condition, and he who can locate the cause can, as a rule, easily diagnose the condition. This man was one of the solid, conservative citizens of the great state of Illinois, and came to me a thorough skeptic. After my examination he said, “Well, your diagnosis is certainly correct and your explanation of my condition is satisfactory and reasonable, but I do not understand how you are going to cure me—when I have been gradually going down hill for five months and have been treated constantly during that entire time—taken lots of medicine and have had the arm massaged a great deal as well.”

Right here I wish to call the attention of the public to the difference between genuine Osteopathic treatment and massage. This patient informed me that he had been thoroughly rubbed and that it relieved him a little, but did not cure him. Why did it not cure him nor prevent him from growing gradually worse, if massage is Osteopathy? For this reason: No amount of rubbing could possibly correct that twist in the spine; Osteopathic treatment was specific and went directly to the cause of the condition, the spine, took hold of it and corrected it. And the patient could not help but get well.

I know of no fairer comparison of the two treatments than the dew and the rain. Massage does good in many cases just as the dew moistens and nourishes vegetable and plant life, but Osteopathy, like the copious rainfall that comes to the famished earth, takes hold of the centers which control the different functions of the body and bids them drink from the eternal fountain of life.

Kirksville, Mo.

THE OSTEOPATHIC FAD.

ALBERT T. HUNT, D. O.

One of the most poignant thrusts which the meek and lowly disciples of Still have to parry is that “Osteopathy is only a fad,” and, like other fads, will have its fitful existence and vanish into the realm of innocuous desuetude. Let’s see.

The Osteopathic fad is based upon the perfection and unimped-
ed fulfillment of nature’s laws. Thus, if your heart were functionally too active, the medicinal treatment would be partially to paralyze by drugs the nerves which keep the heart in motion, while the Osteopathic faddist would seek and remove the unnatural irritation of the heart’s nervous control, and allow nature again properly to perform her work.

When the paralysis of the nerves, instead of the removal of the cause, would cure this case, the Osteopathic fad will die.

Perhaps you have “weak lungs.” It may be your good old family doctor—and who of us does not hold his memory dear?—says you need a “tonic.” Now let’s figure honestly just what a drug “tonic” is, what it does, and how it does it. It is doubtless composed principally of strychnine, given for the purpose of spurring the heart on to greater activity, in the vain hope that more blood will be sent to the lung tissue and build it up, and the heart is thus stimulated by the drug by paralyzing those nerve fibers of the heart which normally regulate the rapidity of that organ’s activity. In other words, strychnine takes the brakes off the heart, letting it beat faster and use up its reserve energy, and if long continued a breakdown must be the final tragedy.

Now for the faddist’s plan. If your lungs are “weak,” why? Insufficient nutrition, caused by obstruction of either the nerve or blood supply which controls and carries nutrition to the lung tissue, and which tissue can only be restored to a normal condition by allowing it to receive its proper amount of rebuilding elements; that is, by removing the cause of the obstruction.

When tonics cure consumption, instead of the removal of the impediment to the proper performance of nature’s laws, then the Osteopathic fad will die.

"Truth, crushed to earth, will rise again; The eternal years of God are here. While Error, wounded, writhes in pain, And dies amid her worshipers."

If Osteopathy is a fad, it will die. Nothing could be truer than this assertion. But if founded on Truth, ‘twill live forever.

Omaha, Neb.

PROGRESS.

CHARLES C. REID, D. O.

Progress means a moving forward in space, growth or knowledge; to make improvement; conservatism is the disposition to retain old existing institutions, customs and ideas. It is well to be conservative so far as preserving whatever there is of real merit about things old. That is according to the spirit of progress, which is continually sifting the old, retaining only what is true and good and useful, and reaching out after new and better things.

A nation’s civilization is tested by (1) the character of laws that nation has on its statute books, and (2) by its ability to enforce law. A progressive and civilized country should have laws that are just and for the welfare of the people. If unjust laws and class legislation exist there will be a great tendency on the part of the people to resist the enforcement of such laws, even among the upright and law-abiding class of people. A law amounts to nothing when it is not enforced; some laws if enforced are worse than no law. Then it is very essential that laws be in accordance with justice and progress and that they be enforced.

It is a notable fact that the medical profession is very prone to condemn with prejudice any change of their materia medica, as to the quantity, manner or quality of the dosing. This is proven by the homeopathic and eclectic reforms in medicine. In many instances the “regulars” tried to secure the passage of laws detrimental to those schools of medicine and in some cases succeeded. They were not willing that each school should be classified by the laws of the states and given an equal chance to show their merits and stand or fall with them. If they were so wrought up over those changes in their materia medica, how much more so are they liable to be over a school that practically does away with their materia medica, as does the science of Osteopathy! Strange as it may seem at first to the common people, they seem to understand it and take hold of it more readily than the average medical doctor. Why? Because they test its merits and investigate its claims without preconceived notions of it. As a class the M. D.’s oppose the new science and many times have tried to get laws passed disadvantageously to it, and in one or two instances have succeeded; but such laws were soon changed on account of the sentiment in its favor among the people.

Osteopathy is a new school, a new scientific method of curing diseases. It claims to be more nearly according to nature, and therefore nearer right, than other schools of practice. The Osteopath asks no advantages or special privileges, nor do they seek to abridge the rights of any one. Then why should not the school of Osteopathy be classified along with other schools by the laws of all the states and given a fair and equal chance to stand on its own merits? Many of the M. D.’s are broad-minded and liberal enough to advocate that. But a large percentage of them seem to think that the Osteopath should be required to take a purely medical examination; in other words, to become M. D.’s or quit. The Osteopath has the same right to demand that they should be examined in Osteopathy. Homeopaths are not required to take allopatic examinations, neither are eclectics. The old school physicians are not required to take the examinations of either of the other newer schools. The Osteopath should not be examined in the use of drugs. Should he be examined in something that he doesn’t use and teaches against? It is not just to measure the practitioners of one school by the yard stick of some other school.
This is an age of progress. Has everything been learned that can be found out? Cannot new things be discovered yet and be true? It has not been long since grain was cut with the reaping hook; later we had the reaping cradle, then came the table rake and dropper machines; and recently we are having machines that bind the wheat into sheaves, and some are going so far as to cut and thresh it. It is true in different departments of the industrial world there has been great progress and improvement. There is also constant growth and new discoveries in the scientific world, notwithstanding the fact that many scoff at new theories, ideas and practices that are radically different from what they believe and practice. Many pride themselves on their conservatism and accept as a fixed fact the estimate on things and people handed down to them by our fathers. This is stagnation and opposed to all real progress. Drummond said, "He that will not reason is a bigot; he that cannot is a fool; and he that dare not is a slave."

Don't be narrow-minded, prejudiced and conceited; thinking you know it all; but be willing to meet new ideas half way, with the spirit of honest investigation and an unbiased judgment; willing to test the merit of a discovery. This is progress and the feeling of the present age.

Warren, Ohio.

OSTEOPATHY AND LEGISLATION IN OHIO.

M. F. HULETT, D. O.

All Osteopathic eyes have again been turned upon Ohio. Since the supreme court of this state last fall declared that Osteopathy is not the practice of medicine as defined by the medical statute, there has been rumors to the effect that the medical men were preparing to make an effort to drive the Osteopath from the state. This rumor culminated in the presentation to the General Assembly by Representative Dr. Love a measure the purpose of which was to build about the M. D. a tight fence through which none could enter save by the medical door, and the passport through which must be a diploma from a "reputable medical college" in good standing, "as defined by the medical board." This bill redefines the practice of medicine so as to include all methods of treatment, thereby setting aside the court decision above referred to. The definition is as follows:

"Any person shall be regarded as practicing medicine * * * within the meaning of this act * * * who shall prescribe, direct or recommend for the use of any person any drug, medicine, appliance, application, operation or treatment of whatever nature." * * *

Under this definition it was the avowed intention of the framers of the bill to bring the practice of Osteopathy within the jurisdiction of the medical board. Whether or not it will is a mooted question. There was argued on the floor of the house by a lawyer of prominence that it would not. The author of the bill is reported to have told members of the house that it would not. On the other hand, jurisprudences of recognized authority tell us that there is no question but that this definition covers all methods of treatment in spite of what the supreme court may have said on other measures.

Whether or not the argument as above cited will hold, it will take another supreme court decision to determine if the Love bill—the name by which that medical bill is known—becomes a law. The argument was sufficiently convincing to secure for the bill in the house, when it came up for passage March 13, a vote of 67 to 36. This vote does not represent the strength—or lack of it—of Osteopathy in the house, from the fact that many who voted for the medical bill are avowed friends of ours, while nearly all who voted against the bill did so because they feared it would interfere with our practice.

It was determined at the last meeting of the Ohio Association for the Advancement of Osteopathy in December to make no attempt to secure legislative recognition this winter—as our strength is yet somewhat limited in this state—unless as a defensive measure. But that if the medical men opened the fight, we might best protect our interests by asking this recognition. Now that we have been attacked, the friends of Osteopathy everywhere have rallied to our aid. An Osteopathic measure was introduced in the house at the solicitation of our friends, in the fore part of March, which was referred to the judiciary committee. On the 20th the committee gave us a hearing (Dr. Hildreth, of Kirksville, Mo., being present as our representative), and by unanimous vote—eight of the eleven members being present—recommended that the bill be favorably reported. The bill at this writing is on the calendar with every prospect of passing the house with a safe majority when it comes up for vote within the week. We have many friends in the senate, and our prospects there are also favorable.

The medical bill supporters will get a hearing before the medical committee in a few days, but probably too late to report for the April issue of your magazine.

The Ruggery, Columbus, O., March 27.

Where the body is wrung with pain, where it is filled with disease, one cannot be happy.—Rev. Chas. M. Sheldon.

Mrs. Kindly—Well, Martha, how is your husband now?

Martha—Po'ly, missus, po'ly; he's got dat exclamatory rheumaties.

Mrs. Kindly—You mean inflammatory, Martha; 'exclamatory' is to cry out.

Martha (eagerly)—Dat's it, missus! dat's it! He don't do nothin' but holler.—Exchange.
PARTIAL BLINDNESS.

Case 3.—This patient's condition had been gradually growing worse until she could not recognize a person ten feet away, and could not see to read at all. The trouble was a starved condition of the optic nerve, due to an obstruction to the circulation in the upper cervical region. The condition yielded readily to treatment and at the end of three months she could see to read ordinary print and now, after less than four months treatment, she can read by gas light with no inconvenience.

CONSTIPATION.

Case 4.—Cases of this kind are so numerous and the cures so satisfactory and so well known that it seems unnecessary to report any more, nevertheless we give this, hoping that it may encourage some one to try who has almost despair of ever being cured.

The condition had existed several years and was so persistent that artificial means had to be resorted to at all times. In connection with this condition were sores in the mouth. By stimulating the nerve supply to the bowels to increase their fluid secretions the condition began to show improvement, after four or five treatments, and in a little over two months the constipation was cured and the sores in the mouth healed.

INDIGESTION AND LUMBARO.

Case 5.—In this case the indigestion had existed for several years, was very obstinate and caused the lady considerable suffering—so much that only the lightest diet could be borne. By thoroughly relaxing the spinal muscles, freeing the circulation to the stomach and stimulating directly the nerves to that organ the trouble soon began to yield and in one month's time was entirely cured.

The lumbo was due to a lesion at the fifth lumbar vertebra, caused by a strain, and though not entirely cured when the patient was freed from the indigestion, yet so much improvement was made that practically no pain was felt at all, and with a few weeks more of treatment can be entirely cured.

Partial Blindness, Constipation, Etc.

Case 1.—Male, age nearly 60, height 5 feet 9 inches; weight 130 pounds; occupation farmer.

The above described gentleman has been troubled with constipation for nearly forty years, requiring some sort of a cathartic every day to provoke peristaltic action of the bowels. During this time, too, he has been subject to frequent attacks of migraine (sick headache), sometimes occurring twice or three times in a week. Indigestion as one would expect, was a most prominent and distressing feature of the case, causing much pain, belching of gases and mal-nutrition. At one time attacks became so severe and acute that life was threatened.

In addition to all this, he was nearly totally blind in one eye, this condition dating to a fall when a child, and the cause being a partial dislocation of a cervical vertebra, which, when corrected by Osteopathic treatment, so far restored the sight to the eye that he can see to read coarse print.

Other lesions were as follows:

A bad one at third and fourth dorsal, one at ninth dorsal and another at fifth lumbar vertebrae.

It has been about a year since there has been any trouble from indigestion; not a sign of a headache, and daily evacuation of the bowels has been continued up to the present time without any artificial aid or stimulation, such as drugs, enemas, etc.

Hemorrhoids, a source of annoyance at the time of beginning treatment, are practically cured, as they give little if any trouble. Gain in weight is over twenty pounds.

Treatment consisted in correcting so far as possible the above named abnormalities.

Did Osteopathic treatment in this case pay? I say, and the patient says, Yes.

Pterygia.

Case 2.—Mr. R., whose vision was becoming obstructed by the growth of pterygia, one over each eye, came to me for treatment in the spring of '09. Cause was found to be a partially dislocated atlas, which we have been correcting.

The pterygia have gradually receded and diminished in size till it is now about off the iris. When patient came it extended nearly to pupil. It does not give trouble now and is improving all the time.

The gentleman has not taken treatment regularly, but occasionally as he could. I see no reason.
why the pterygia may not entirely disappear. He also had an abnormal deposit of adipose tissue in the abdominal walls, which was reduced to the extent of about twenty pounds, to his delight and comfort.

SUBLUXATED INGUINUM AND CONSTIPATION.

Case 2.—Miss B. — came to me for examination and treatment in September, '99. In the first place, this lady had been constipated from childhood, which was completely cured by the treatment. The trouble has not returned during the six months which have elapsed since she was discharged. This is incidental, however, as that was not what brought her to me.

About a year before I saw her, she tripped in the dark over a rope stretched across the path and fell heavily. She was under a medical doctor's care for some time, but all that could be done for her seemed to give only temporary relief. Her side and hip, with a numbness of one limb, being the seat of the pain, which was severe most of the time, causing sleepless nights and uncomfortable days. Could not walk or ride without causing most intense pain. Was several pounds below normal weight, which was gained back during the twelve treatments taken.

I found upon examination a slight lesion at the twelfth dorsal vertebra and a subluxated inguinal. Improvement was noted from the first and rapid till recovery was complete, after the third or fourth. She reported a few days since that she had not known such perfect health for several years as has been enjoyed this winter.

Any of the above cases reported by me, the names will be cheerfully furnished for reference or further correspondence upon application.

 Reported by S. D. Barnes, D. O., 910
McClurg Building, Chicago.

SCIATICA.

Mr. Woodford, age about 55, suffered for 20 years with sciatica, first on one side, latterly on the other. I found his fifth lumbar vertebra anterior, causing the sciatica and troublesome lameness of the back. Four treatments cured him. This was last July and he has had no further touch of the lameness or sciatica since, though hard at work in his business.

CONSTIPATION.

Mr. M. was treated a long time by a prominent specialist in this city for "gall stones," and for six weeks at Carlsbad, Germany, for "intestinal ulcers," without relief of his real trouble, constipation. For years his bowels could not be made to move without external aid. From the history I was justified in assuring him that he had had neither gall stones nor ulcers; but the sphincter muscles were intensely contracted, amounting almost to constriction. Two months' treatment, followed by a short hunting trip, entirely cured him.

 Reported by Dr. Wm. N. Northrop,
Memphis, Tenn.

SEVERE CATARRHAL ENTERITIS.

Child 11 months old. Family physician had discontinued treat-
The Popular Osteopath.

It is the desire of the program committee to have the program for the annual convention to be held at Chattanooga, Tenn., July 5, 6 and 7, 1900, completed in time for publication in the May number of The Popular Osteopath, and other Osteopathic journals.

Already some of the ablest men and women in the association have promised papers on subjects of interest and importance to the profession.

The committee solicits suggestions from any member as to what the program should embrace and the subjects to be discussed.

It is hoped that one day may be devoted to the discussion of practical and scientific Osteopathy. Several papers by Osteopaths eminent in the profession have been promised for this day, and it is certain that this feature will be of immense practical value.

A. L. EVANS,
Chairman Program Committee.

Pennsylvania Society of Osteopaths.

The practitioners of Osteopathy in the state of Pennsylvania met in Philadelphia on March 9-10, at the office rooms of Dr. Clara Martin, 419 South Broad street, and perfected a state organization. After preliminary organization the following permanent officers were elected:

President—Dr. O. J. Snyder, Witherspoon building, Philadelphia.
Secretary—Dr. J. Ivan Dufur, 44 East Fourth street, Williamsport, Pa.
Treasurer—Dr. Nettie C. Turner, 1715 North Broad street, Philadelphia.

Executive Committee—Dr. Snyder and Dufur (ex-officio), Dr. C. B. Canfield, Sunbury, Pa.; Dr. H. R. Underwood, Coal Exchange, Scranton; Dr. W. B. Keene, Thirty-first street, Philadelphia.

Following are the charter members: Drs. Vantine, Canfield and Huston, Harrisburg and Sunbury; Dr. J. Ivan Dufur, Williamsport; Drs. Matthews and Hook, Wilkesbarre; Drs. Allabach and Harding, Wilkesbarre; Drs. Walpole and Towle, Reading; Drs. A. D. Campbell, T. E. and Nettie C. Turner, Mason W. Pressly, O. J. Snyder, Clara Martin, W. B. Keene and G. G. Banker, of Philadelphia; Dr. R. W. Miller, Washington; Dr. Ida McMurray, Franklin; Dr. J. A. Thompson, Tinterville; Dr. E. W. Underwood, Wollaston; Drs. R. R. Underwood, Scranton; Drs. Heiny and Hart, Pittsburg; Dr. V. W. Peek, Wilkesbarre.

Those present at the convention were entertained Saturday evening at the home of Dr. Nettie Turner, 1715 North Broad street.

The Secretary asks all who know of anything conducive to the good of Osteopathy in Pennsylvania to communicate with him.

J. Ivan Dufur, D. O., Sec. 44 East Fourth street, Williamsport, Pa.

An Invitation Extended.

A measure providing for the lecture method in Osteopathy as a means for popular education relative to the science, has been ap-
proved by the trustees of the A. A. A. O., and it now remains for Osteopathy to properly use the method to see its benefits.

These lectures (perhaps six in number and under appropriate headings) will be official and known as the "Association Lectures." They will cover as nearly as possible the entire field embraced by the science, and will be designed to assist in meeting the popular demand for information, reflecting at the same time all of the culture and refinement of the Osteopathic profession. They are to be written by Osteopaths, and it is my pleasant duty to hereby extend, on behalf of the board of trustees of the A. A. O., a most cordial invitation to all reputable Osteopaths to contribute one or more lectures to the course, on any subject or subjects relating to our science. These lectures should be sent (prepaid) to the undersigned (typewritten copy preferred), at least by June 1, 1900. They will then be referred to a special committee of three reputable Osteopaths distinguished alike for their literary ability and Osteopathic knowledge, who will pass on them and select from the lot those which will constitute the official course, crediting each one selected to its author. They will then be furnished in convenient form (singly or in sets) to all reputable Osteopathic practitioners who may desire them at exact cost price.

It is intended that these lectures be delivered in a dignified manner either in public or private by local practitioners or, if desired, by any other competent person; in the latter case it would be advisable for the practitioner to be present to answer any questions which might follow from interested inquirers.

It is hoped and confidently expected that Osteopaths will respond to this invitation by sending in their lectures at an early date, that the course may be ready by the time set for the annual meeting in July. Once installed and properly used, the lecture method for the dissemination of Osteopathic information will be second to none in educative value.

Yours, fraternally,

F. W. HANNAH,
President A. A. O.
Stevenson Building, Indianapolis.

Remember that the annual meeting of the A. A. O. is to be held in Chattanooga, Tenn., July 5, 6 and 7. Every legitimate Osteopath should make a sacrifice, if necessary, to be in attendance.

Resolutions of Respect.

Whereas, We, the Saint Louis Society of Osteopaths, have been reminded of the uncertainty of life by the calling home to rest of Mr. H. J. Eckert, father of Dr. W. H. Eckert, member of our society; be it,

Resolved, That we, the members of the St. Louis Society of Osteopaths, mourn the loss of a pure citizen and staunch friend of Osteopathy; be it,

Resolved, That we, by this extend to the bereaved family the assurance of our deep sympathy, and command them to seek condolence from Him who doeth all things well. Be it,

Resolved, That a copy of these resolutions be presented to Dr. W. H. Eckert, secretary of our society, and that also a copy be presented to the Journals of Osteopathy for publication.

A. H. SIPPY,
M. B. BAILEY,
M. B. HARRIS,
Committee.

OFFICIAL DIRECTORY OF MEMBERS OF THE AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF OSTEOPATHY.

Note—The letter preceding the name indicates the school from which graduated, thus:

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C. Boston University, Boston, Mass.
D. Milwaukee College, Milwaukee, Wis.
E. Northern Institute, Minneapolis, Minn.
F. Pacific School, Los Angeles.
G. Still College, Des Moines.

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Arizona.
A. Kellogg, S. M., Burke Hotel, Prescott.

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A. Lorenz, Charles E., Fort Smith.
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A. Dickson, Edith R., 58 and 59 Player Building, Oakland.
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A. Bolles, Mrs. Nettie, 832 Colfax Ave., Denver.
A. Bolles, Miss Mary, Denver.
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J. Powell, E. B., Montevista.
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L. Woods, Albert, 401 Tujen St., Colorado Springs.

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A. Biggby, Edgar, Monmouth.
A. Conner, R. F., 42 Auditorium Building, Chicago.
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A. Durkin, Chas., Wellington Hotel, Chicago.
A. Denison, O., 167 Dearborn St., Chicago.
A. Edmonds, Bertha, 1637 Kinbark Avenue, Chicago.
A. Ellis, H. J., Homewood.
A. Ellis, Mrs. Sue E., Bloomingdale.
A. Farmer, Frank C., Market and Plum Streets, Havana.
A. Fischer, Albert Sr., Julian Hotel, Englewood.
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A. Goodrich, L. J., Springfield.
A. Link, W. F., 18 and 19 Minnis Block, Knoxville.
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A. Owens, Chas., 300-4 Miller Building, Chattanooga.
A. Strickland, Cordelia L., Joppa.
A. Swan, W. E., Clarksville.
A. Swan, Mrs. W. E., Clarksville.
A. Shackelford, J. R., Wilcox Building, Nashville.
A. Shackelford, Mrs. J. R., Wilcox Building, Nashville.
A. Shackelford, E. H., Wilcox Building, Nashville.
A. Vance, G. T., Brownsville.
A. Watson, T. J., Fayetteville.
A. Whitcomb, H. H., Knoxville.
A. Wilderson, W. H., 37 and 38 Southern Express Building, Memphis.

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A. Gober, C. L., Bryan.
A. King, A. M., 2113 Church St., Galveston.
A. King, H. F., 2113 Church St., Galveston.
A. Polley, Mabel, El Paso.
A. Ray, T. L., Board of Trade Building, Fort Worth.

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A. Brock, W. W., 134 State St., Montpelier.
A. Corbin, C. E., 157 State St., Montpelier.
A. Lowry, Guy E., 157 So. Union St., Burlington.
A. Mayes, Matthew, Rutland.
A. Martin, L. D., Miles Granite Building, Barre.
A. Wheeler, Chas. G., 32 N. Main St., Brattleboro.

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N. Hodgson, John E., Spokane.
N. Johnson, Robert S., Walla Walla.
A. Lydia, Geo. V., Olympia.
A. Potter, W. A., Safe Deposit Building, Seattle.

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A. Ely, W. E., Parkersburg.
A. Ely, Mrs. Anna L., Parkersburg.
A. Kibler, J. W., Charleston.

CANADA.
N. Hitchings, John R., Winnipeg, Manitoba.
A. Spangler, H. L., 46 King’s Square, St. Johns, N. B.

HAWAIIAN ISLANDS.
A. Severson, Katherine, Honolulu.
Members whose addresses are unknown:
A. Chase, W. B.
A. Downing, D. M.
A. Duffle, W. M.
A. Jones, H. R. (undergraduate).
A. Yakey, W. G. (undergraduate).

Monuments in Profusion.

Doctor—Well, I consider the medical profession very badly treated. See how few monuments there are to famous doctors or surgeons.

The Patient—Oh, doctor! look at our cemetery.—Tit-Bits.

Chiroprodistic Diplomacy.

Assistant—How did you get such a large fee from old Tight-wadd?

Chiroprodist—Told him his bunion was the gout.—Baltimore American.