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AN ADEQUATE EXPLANATION OF OSTEOPATHY

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It is needless to say that although osteopathy has been in practice for over thirty years, to many the science is still practically new. In a brief way, an explanation of its character and methods will here be given.

Osteopathy is skilled engineering of the human machine, the most complex and intricate machine in operation. It is the science of treating diseases through a technical manipulation by which the practitioner intelligently directs the inherent recuperative resources of the body to the restoration of health. The science of osteopathy rests upon the theory that every diseased condition, not due to a specific poison, is traceable directly or indirectly to some mechanical disorder, which, if corrected, will permit nature to resume her normal function. Osteopathy is a system of curing deformities and diseases without the use of internal medication, and frequently prevents the use of the knife. It regards the human system as capable of keeping itself in perfect health when rightly aided. It holds that the vital processes within the body are capable of producing all the chemicals and vital fluids and substances necessary to the health and repair of the body. It therefore discards drug medicines, and trusts to nature, intelligently aided, to maintain health.

Osteopathy Both New and True.

Many who are strangers to this new science are prone to regard it as a fraud or to class it with the various adjuncts of medicine, such as massage, vibration, etc. A thing may be both new and true.

The description of an automobile or of the simple and practical use of the telephone would have shocked the credulity of the wise men of long ago. Why not improve upon antiquated and superstitious methods of treating diseases, as well as upon old ways of locomotion and of distribution of news?

Is it not reasonable to believe that the past has not made known or

discovered all the methods of reaching or handling diseases, any more than she has all the various kinds of inventions? Osteopathy is not a confidence game, nor does it require faith—any more than that needed to take you to a skillful and competent osteopath. Can you think of anything which requires more faith than the constant and continual use of drugs for years on your old chronic disease, with only a little temporary relief? Be reasonable, and meditate as to the effect and advisability of persistent drugging and its demand upon faith.

Its Credentials.

The credentials of osteopathy will satisfy the most exacting upon close and authoritative investigation. Its legal standing is equal to that of medicine. It was first legalized by the legislature of Vermont in 1896. It has already gained legal recognition in about forty states and territories, and in none is the osteopath prohibited from practice.

Its course of study consists of three years of nine months to the year, and requires from five to eight hours of work daily, besides laboratory work which includes histological, physiological, bacteriological, pathological, and chemical research, etc., and thorough work in dissection of the human body. The course covers practically the same branches as medical schools, with this difference, however, *materia medica* is dropped and osteopathic principles and practice are taken instead.

How Do Drugs Cure?

How can osteopathy cure? How can medicine cure? In most cases, the patient who is most persistent in demanding to know just how osteopathy could possibly cure the disease in question is the one who complacently takes his dose of drugs with the least question and coolly assumes he knows just how medicine can cure, when, forsooth, he has once taken it into his stomach! But why should the stomach be made the receptacle of the drug on its way to a pain in the toe or an ache in the head? Just what does it do and just how does it cure? Have you ever plied yourself with such questions and then tried to answer them? Now, what is the cause of your disease, and just where is the primary cause located? Bear in mind that every effect must have a cause, and the cause may be far from the effect.

Method of Procedure Described.

The question is asked, What does the osteopath do? And how does he treat? Ridiculous tales are sometimes told by ignorant, prejudiced persons, of exposure of the body, violence in treatment, danger to the patient, etc., which are entirely without foundation.

The mode of treatment, osteopathic treatment, is not "rubbing," kneading, tapping, patting or shaking. It is not like faith cure, christian science, nor swedish movement. Read the following carefully, for time and again you have probably wanted to know just what and how the osteopath treats.

He must first make a careful and most thorough examination, chiefly of the spine, and find out just what is the matter. No doctor can successfully treat disease until he has a clear conception of the nature and cause of it. Examination is, therefore, the first important step in beginning treatment; treatment is based upon examination. Keep in mind the theory of osteopathy, that of deranged machinery, unless there is present a specific poison. The competent osteopath will, in nine cases out of ten, find such derangement. Besides attention to diet, habits, exercise, etc., which have a secondary effect, treatment consists of skillful osteopathic manipulation, for the relaxation of tissues, the adjustment of deranged parts, the stimulation or inhibition of nerves and nerve-centers, and the liberation of blood and lymph currents.

Osteopathic treatment commonly requires but a short time, and is not rude or painful. The frequency of treatments depends upon the individual case, and it is determined by the careful judgment of the practitioner, just as a doctor of medicine regulates his *massa* according to the needs of the patient.

Scope of Osteopathy.

Perhaps you think that osteopathy is all right for some things, but that its claims are too broad, that it professes to reach more diseases than it is capable of handling. Upon what is your opinion based? Have you had a wide experience and made a thorough and unbiased investigation of authentic statistics? Is not your opinion largely based upon superficial impressions, or upon general hearsay? Does it not come largely from the uninformed and the prejudiced? As a person of sound judgment, just how much value do you place upon your opinion? You may have in mind some few failures, in the case of particular diseases or of individual practitioners. Is it any argument that there is nothing in the practice of medicine because you see failures of drugs and medical practitioners (and they are numerous)? You say not. The same holds true of the science of osteopathy, except that the failures are far in the minority.

Consider, again, the legal status of the science. You will find it is going forward by leaps and bounds; but that is only after having demonstrated its claims over every inch of ground it covers.

Just what diseases does osteopathy successfully treat? All admittedly curable diseases, and many heretofore regarded as incurable. Osteopathy can cure all diseases that drugs can, and two-thirds more of those which drugs fail to cure.

As to Surgery.

As to surgery, that belongs to osteopathy just as it does to medicine. It is a part. Nevertheless, many cases can be saved from the surgeon's knife by the milder methods of the osteopath.

Osteopathy is also peculiarly effective in treatment of the diseases of women. Confinement cases get a great deal of relief, and make a better recovery, with far fewer lacerations and injuries, under the care of the skillful osteopath. All forms of nervous diseases, stomach and intestinal disturbances, kidney and bladder derangements, prostatic troubles, neuralgias, goiters, throat troubles, lung troubles, spinal and joint disorders, all infectious diseases, and many diseases to which children are subject—all find in osteopathy their most certain relief.

Effects in Acute and Chronic Ailments.

Acute diseases respond much better than chronic. Many patients are prone to think that a few treatments ought to cure their chronic case of years' standing, and that such is a fair trial. Stop and consider: Does it seem reasonable that a case of years' standing, every other system of therapeutics having been thoroughly tried, should yield so rapidly as to mark a great change in a few treatments? You say no; then why expect it in your individual case? Possibly you have been taking medicine for years, and are not cured yet; it does require a deal of faith to take drugs year after year with only temporary improvement, does it not? The following is a good illustration: A lady who had an obstinate chronic disease decided to try osteopathy. After the third or fourth treatment, beginning to make noticeable improvement, she discontinued treatment. Upon inquiry as to why she had not been back for treatment, she replied that "Dr. Jones'" medicine was beginning to take effect, and she thought she had best continue it. The osteopath inquired how long she had been taking Dr. Jones' medicine. She said only about six or seven years. The D. O. told her he guessed she had better keep on with "Dr. Jones'" medicine. And so it is. Some will attribute the results of osteopathy to something else that they have tried for years, when a little child should know where to place the credit. In acute diseases, you may expect results from one or more treatments, the time depending upon the disease and response of patient; but chronic ailments will always demand proportionately a longer period for cure.

Good Sense.

If you are in doubt as to whether osteopathy can do you any good, go to an osteopath who has the proper credentials, and is in good standing, and he will gladly tell you what can be done for you. A large majority of the osteopaths you will find to be frank and honest, and not in the profession to rob people. Before judging the system, give it at least half the trial you would give medicine. It is founded upon true principles, and deserves honest investigation of its claims. By the results of such investigation it is ready to stand or fall.

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INTESTINAL CONTRACTIONS.

LOUISA BURNS, M. S., D. Sc. O.

A few months ago I wrote concerning the possibility of a faulty diagnosis in certain cases of supposed intestinal obstruction. At that time the results of a few autopsies illustrating the conditions were noted, and some observations upon animals were described which indicated the possibility of the occurrence of such intense intestinal contractions that an absolute occlusion might be produced, not to be distinguished by the symptoms alone from intussusception or volvulus.

In Volume X of the Transactions of the American Association of Obstetricians and Gynecologists I find another series of case reports bearing upon this same question. The phenomena observed are explained in somewhat the same manner as were the occurrences noted in my previous paper. The volume now quoted, however, was published several years ago.

Olshausen, in Berlin, (1887) described a form of apparent obstruction, following operation, and usually fatal, in which the post-mortem examination revealed no infection, no peritonitis, and no apparent cause of death save the absorption of the decomposed intestinal contents. Olshausen sees in prolonged eventration of the intestines during operation the source of the intense reflexes responsible for the contractions.

Paresis Caused by Strong Salines.

Later Engstrom gave another series of case reports with the same conclusions, except that he adds the opinion that "a paresis of the intestinal wall can be produced by strong saline purgatives, and it appears to be by no means impossible that, as a consequence of their use, a weakened condition of the gut walls is created before the operation." He considers the weakening of the nervous system, present before the operation, an etiological factor in these cases.

Blume gives an account of such a case. A woman of thirty-six submitted to an operation for the removal of large unilocular intraligamentous cyst of the right ovary, adherent to the bowel and the omentum. Until the third day she seemed as well as usual under such conditions. At that time she began to vomit and to complain of colic. The abdomen was distended, peristalsis was audible, and all of the indications of mechanical obstruction were present. At the operation which followed this diagnosis, about ten inches of the ileum was found firmly contracted, and its lumen in this way obliterated. Above the contracted portion the intestine was enormously distended and sacculated. Below the contracted portion the bowel was soft, empty and

collapsed. There was no fluid, no adhesions, and no evidence of peritonitis. The attempt was made to force gas from above into the contracted portion, in order to dilate it. This was not successful. The ileum above the contracted portion was opened and a quantity of gas escaped. The condition of the patient rendered any further manipulation impossible. The abdomen was closed and she died the next day. There was no autopsy.

Several Cases Described.

Long reports an interesting case with recovery. A neurotic woman of twenty-one had had no movement of the bowels for four weeks, except some washings with the colon tube. She suffered nausea, pains, vomiting and distension. Upon opening the abdomen three different areas of contraction were found,—two in the ileum and one in the sigmoid flexure. Above the contracture the intestines were greatly distended. In this case while the abdomen was open the gas and other contents of the intestine were gently pressed down into the contracted parts, thus dilating them. After this the abdomen was closed. The patient made a good recovery, and was not troubled by a recurrence of the condition.

Another case of Dr. Long's was of a man, an epileptic, twenty-one years old. He had appendicitis in April and did not fully recover. In the next December the abdomen was opened and the appendix enucleated from a mass of adhesions. At a point two feet from the ileocaecal valve the ileum was contracted for about five inches to about one-third its normal size. This portion dilated slowly to about its normal size, while exposed to view. The patient made a good recovery, but had several attacks of apparent "obstruction of the bowels" from which he recovered in about thirty-six hours, without treatment. (Now I should like to know whether, in this man's case, if he had been given doses of strong saline and other purgatives, irritating the intestinal wall still more, he would not have died from exhaustion and intoxication?)

Murphy gives a case of a man of forty who had had several attacks of lead colic. He suffered from acute intestinal obstruction lasting five days. The abdomen was opened and a coil of intestine exposed. About eight inches of the small intestine was contracted to three-eighths of an inch in diameter, and was as stiff as a rope. Within ten minutes the contraction disappeared and the intestine expanded. The abdomen was closed, the man made a good recovery, and he never suffered in the same way again.

X. O. Werder gives other case reports along the same line. The first, "Mrs. W." suffered a salpingo-oophorectomy for small round cell sarcoma. For five days after the operation her condition was excellent. On the sixth day she was given egg-nog, which was followed some hours later by pain, nausea and vomiting. (It was later ascertained that such conditions were always suffered by her when she took egg-nog.)

Two days afterward she became nervous, excitable, delirious, with symptoms of severe depression, temperature 100 F., pulse 150-170. Nausea, retching and vomiting continued, there was visible peristalsis, and no meteorism. Cathartics, enemata, tubage, all failed to secure the passage of gas or feces at this time. She died on the eleventh day after the operation. At the autopsy, four hours after death, the ileum was found distended with gas to within about twenty inches of the ileocaecal valve. The diameter of the ileum above this was about two inches. From the point about twenty inches above the ileo-caecal valve to the anus the intestines were firmly contracted. The contracted portion of the ileum was less than a half-

inch in diameter, the large intestine scarcely more than a half-inch in either diameter. The peritoneum was everywhere normal, the wounds made at the operation were either healed or healing, and, with the exception of the abnormal contractions just noted, the whole abdomen was normal. A piece of the contracted portion was removed. It quickly relaxed to its normal calibre.

A Case Diagnosed as Neoplasm.

In another case, a diagnosis of some neoplasm, probably malignant, upon or near the pylorus, was made. The diagnosis rested upon a history of successive attacks of violent pain and motion, with the presence of a hard, sausage-shaped mass a little above and to the right of the umbilicus. Under anesthesia the mass could not be palpated, but the abdomen was opened. A perfectly normal pylorus and duodenum were exposed. During the manipulation the pylorus and adjoining portion of the duodenum began to be contracted until its thickness was not more than a half-inch, and it became as hard as the finger. It then relaxed completely, then contracted as before. Slight manipulations initiated a recurrence of the phenomena. The abdomen was thoroughly searched, but nothing abnormal was discovered. The patient made a good recovery but her after history is not known.

In another case, a man, with symptoms of acute obstruction lasting two days, the patient was first seen at midnight, and operation was deferred until morning. Early in the morning the patient passed a large renal calculus, and all symptoms of intestinal obstruction disappeared. In this case it seems probable that the renal calculus initiated the reflex contractions of the intestines.

Werder employs the term "enterospasm" in such cases of reflex spasmodic contractions of the intestines. Such enterospasm may be initiated by any severe reflex irritation, and, as he sees it, must be relieved by operation, by exposing the intestine to the air, and by manipulations.

Experimentation and Deduction.

Such enterospasms have been produced experimentally in animals by the use of various salts, by electrical stimulation, and by the production of the "bony lesions" in the splanchnic area. These enterospasms, experimentally produced, are rendered more intense by the very measures usually employed to increase peristalsis, such as irritating salts, massage, etc. The intestines return to their normal condition most quickly, according to most medical observers, when they are permitted to rest, or when they are exposed to the air. According to the observations in the laboratory of physiology of the Pacific College the enterospasm is more quickly relaxed when steady deep pressure is applied to the spinal tissues near the roots of the nerves in most intimate connection with the offending portion of the intestine.

Laboratory of Physiology, The Pacific College of Osteopathy.

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A. S. O. HOSPITAL NOTES.

The following newspaper clippings will give a general idea of the amount of work that is being done at the hospital, and it will be noted that the items mentioned here cover a period of only five days, and only part of the patients operated on during that time.

Friday, November 13, 1908—Many Serious Operations Performed at A. S. O. Hospital This Week.

The past week at the A. S. O. hospital has indeed been a busy one for the surgical staff.

Beginning with last Sunday morning two of the most difficult operations were performed; the first one, a case of adhesion of the intestines with kidney complications, the second being a very severe abdominal operation upon a lady patient from Boise City, Idaho.

On Monday, Dr. Geo. Still operated upon an old case of fracture of the hip and knee. The patient coming from Iowa for the benefit of the work done by Dr. Still.

Mrs. Garrison, of 513 East Scott street, was operated upon for tumors of abdomen on Monday morning.

During the afternoon Monday, Master Max Kellar, an eight months old baby, of Coffeyville, Kansas, had an operation performed for hare lip and cleft palate; Dr. Still stated that this was one of the hardest cases of the sort he had ever seen.

A. H. Porter, of Smithboro, Ill., submitted to an operation on Wednesday for hernia and varicocele.

In addition to these cases there have been eighteen minor operations performed. This morning Dr. Still had five special cases in the clinic, all of them being serious enough to require an anesthetic; the most severe case of these being Adam Pauly of Piedmont, Okla., who was brought here by his brother, Dr. Pauly of Kahoka, Mo. Dr. Pauly assisted Dr. Still in the operation.

The other patients of the clinic were Miss Winnifred Smith, who is here from Colorado for treatment; Miss Edna Floyd and her little twin sister, of Texas; and Master Frederick Hoskins and Master Brooks Whipple. These patients are either temporary or permanent residents of Kirksville and the progress of their cases are being watched with great interest by the Seniors.

Little Balfour Frost, aged five, of Manning, Kansas, a nephew of Dr. Kenzie of the senior class, who was operated upon Oct. 20th, for double hernia, was taken home the early part of the week having entirely recovered.

Roderick Carle, also a lad of five years, was taken home the middle of the week, having been operated upon ten days ago for hernia.

R. H. Conover, who was operated upon for appendicitis last week was in regular attendance on his classes upon the eighth day after the operation and has made an excellent recovery.

Alberto Vilkin, a fifteen year old native Cuban, whose residence is now in Starkville, Miss., was recently operated upon for hernia and is doing nicely.

Mrs. Jane Malcolm, wife of Mr. Malcolm, president of the Montezuma, Iowa, Telephone Co., returned to her home this week entirely cured of a trouble which caused a severe abdominal operation seventeen days ago.

Mrs. Margaret Harris, who was operated upon Nov. 2, left the hospital to-day for her home in Solomon, Kan.

For fear some one might think that these brief news items in regard to operation would be distasteful to patients, or to anyone else friendly to the hospital, it is well to mention that no cases are published or described, where there is any objection from the patient, and as to the ethics of the thing, it is as well to answer a few thoughtless critics at once by saying that the idea was taken from that most ethical of all presidents of the American Medical Association; that most widely advertised surgeon in the world to-day, William Mayo. News items about the patients of this man and his colleagues appear in the local press of Rochester right along.

It will be noted that no details are entered into, which might be considered as belonging strictly to the professional side of the case. For instance in the above article, both cases, at the beginning of the article have been under treatment for

some time, and the first one had an operation which required two incisions, one in the abdomen, for the breaking up of intestinal adhesions, and one in the back for fixation of a movable kidney. We will mention in conclusion that both wounds were healed and the patient sitting up on the 10th day, which means that she was not only propped up in bed, but dressed and sitting up in a chair. On the 15th day she went home.

In the second case, a double laceration was repaired, the right ovary and left tube removed, the former being cystic and the latter being a pyosalpinx. A fixation was also performed. This case also had the stitches removed, the wounds entirely healed, and everything all right to leave the hospital on the 16th day.

The fourth case mentioned has been treated by different students for the last three or four years for intermittent hemorrhages, due to sub-mucous and intramural fibroids. The hemorrhage at last became almost continuous and the patient was operated on in a much weakened condition. She got healing by first intention, had the stitches removed on the 10th day, and left the hospital on the 16th, able to walk, instead of being carried.

Mr. Conover, who was operated on for appendicitis, had a type of recurrent appendicitis due to complete occlusion at about its middle, leaving a blind pouch at the end. He has had no trouble whatever, and healing was rapid as I always expect it to be in similar cases.

It is well to mention that the little boy sent home on the 10th day following hernia operation, although entirely healed was not allowed to stand erect until a week later. The healing of the skin does not indicate that the muscles and tendons have healed, and therefore even when the skin heals in six or seven days, it is best to wait about three weeks before standing.

The post graduates will probably remember seeing two cases of insanity last summer in young women, who were demonstrated by Dr. Gerdine, before his class in the summer school.

Both of these cases responded temporarily to treatment, but in both cases there was severe pelvic disease, and benefits were only temporary, so that it was at last decided to resort to surgery. Accordingly, this was done shortly after the beginning of school, and in both cases a hysterectomy was performed. In both cases healing was without infection, and in both cases the mental condition cleared up, and up to date there has been no recurrence.

The question is often asked about different chronic conditions, how to tell whether or not they are surgical, and the best rule that has been discovered yet is that "When a chronic case does not respond to osteopathic treatment, in a reasonable length of time, then and then only is it surgical."

Remember that knife cuts, gun shot wounds and fractures are not chronic, and a few cases are beyond the reach of anything.

A very good friend of ours has recently asked if we operate on all the appendices that we get a chance at, and I want to ask him and the other osteopaths to read the last Journal, and compare the number we operate on with the others. Remember that just as the cases the osteopaths get are the refuse of the medical profession, so are the cases that the surgical staff at the hospital get, the refuse and the incurables of the osteopathic profession, and at that, we send more of them back for further treatment that we operate on.

In spite of the large number of abdominal operations at the hospital in the last year, there has not been a single case of peritonitis nor a single death from infection.

On November 14th, Dr. Geo. Still went to Columbus, Ohio, where he met Dr. J. A. Long, and Dr. C. D. Swope, and accompanied them to Lancaster, Ohio, to operate on the sister of the latter, who has been a bed-fast invalid for a year and a half. The operation which was abdominal in nature, was performed the morning of the 15th, at the home of Dr. Swope, and the patient left in the care of a trained nurse. On Nov. 25th the last report was that the patient's condition was perfect, the temperature being normal, and general symptoms greatly relieved.

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VIBRATORY TREATMENT AND CONSTIPATION.

DR. BENJAMIN F. STILL, D. O.

In the Medical Record of August 8, '08, there appears an article by Mary L. H. Arnold Snow, M. D., of New York, on the subject of "Mechanical Vibration in the treatment of Constipation and Pelvic Diseases," (Read at the II. Congress International de Physiotherapie, at Rome, Italy, October, 1907), which is worthy the attention of every osteopathic practitioner,—not because the theories are commended from our standpoint, for we have better and more scientific methods, together with intelligent etiological factors as a compass to guide us, but because of the acknowledgment of some important facts which have been contended for by Dr. A. T. Still, our founder, for nearly forty years, namely, that, (1) The drug theory in treating constipation is a signal failure; not only that, but the practice of drug giving not only fails but aggravates and actually creates a condition of constipation, by the state of atony in the intestinal walls, thereby produced. (2) That the only cure for the condition is by purely mechanical means, without the aid of a drug, even as an auxiliary. (3) That the basic principle of the "new theory" is spinal treatment and the recognition of the fact that impaired function of spinal and other nerves along the various segments related to the intestinal canal is prominently involved in the condition known as constipation. Also that the liver is at fault and that this trouble is also associated with spinal nerve impairment, and that these impairments can be repaired, at least for the most part by treatment along the spinal column by mechanical means, purely.

Such acknowledgments are certainly interesting to our profession, and fully justify the initial statement of the article referred to, which is as follows:

"The progress of the last half century has not only marked an era of advancement in the improvement of therapeutic measures, unparalleled in the history of medical science, but has brought to physical therapeutics long delayed recognition, placing in the hands of the profession a full quiver of practical agents with which to combat disease with greater success and add to the glory of medical science."

The value of this article would appeal to the public, if not to the medical profession, with much greater force, if the author could say even a few words directly on the point of etiology, or the cause of constipation; but as so much is charged up to impaired nerve force along the spine, as will be further quoted from this article, we shall have to assume that it is the "guess" of the author that spinal abnormalities have much to do with the cause, and therefore some general manipulation along the course of the spine, from the sixth dorsal down, would be valuable. This is a good guess, but if the medical fraternity will look further into our principles and teachings and watch the results of our practice, its members would be able to account more specifically for this as well as most diseases, from the standpoint of cause, and then their mechanical manipulations would be more scientific and less of the general treatment variety, which is a fault we so often charge up to the weaker members of our

own profession, who, however, sometimes by their system of guess-work, strike the right spot.

"For many years the treatment of constipation has been chiefly by drugs which gradually bring about an atonic condition of the intestines, demanding a stimulant to induce action that in time aggravates instead of relieving the condition. Physical measures, on the other hand, particularly the static wave current and mechanical vibration, TONE UP THE NERVOUS, MUSCULAR, AND SECRETORY FUNCTIONS, AND, IN CONNECTION WITH THE REGULATION OF THE LIVER AND DIGESTIVE FUNCTIONS, SOON EFFECT A CURE. Vibration has mechanical, chemical, physical, metabolic, and reflex effects. It is an agent whose effects depend much upon the method of application and technique in general. It induces the removal of extravasations, lymph exudations, and transudations, prevents the formation of adhesions, breaks up slight adhesions, and stimulates the circulatory and lymphatic systems. It improves respiration, stimulates excretion and secretion, relaxes contracted parts, and restores tone to relaxed parts."

What an indictment against the old and yet generally-practiced system of drug-giving for constipation, and what a disposition is revealed to absorb some of the principles and practice of osteopathy, as best they can, without giving our science credit for a really scientific discovery. Of course, we reject the necessity of vibrators and such adjuncts, when we can with our hands, get far better results than with any machine. This point should appeal to all intelligent people of any profession. But read again the above quotation and note what wonderful results are obtained with even a machine, along mechanical lines, according to this author, who is good enough to be recognized by the Medical Board. And then pause to reflect and ask why this charge against drug-giving and the mechanical method of treating a most obstinate disease should not with equal truth apply to diseases of the stomach, spleen, kidney, most diseases of the alimentary canal as well as most all diseases to which we are heir? Can you clearly make a distinction?

Of course, we do not accept a considerable part of the theory of the author in treating constipation, as can be better explained by referring to another point, as follows: "If an enlarged or retroverted uterus obstruct the passage, the constipation can be cured, in a majority of cases, by using the static wave current with a metal electrode per rectum, in connection with rectal and body vibrating treatment for constipation." It would certainly occur to our practitioners to restore a retroverted uterus by the manual rather than the shivering method, and maintain it by spinal treatment, of our own brand, as a means of treating the uterus as well as curing resultant constipation.

To show the earnestness of the author in her view of the relationship between spinal nerves and constipation, as well as liver diseases, we copy the following and will add that if it had been pointed out that abnormalities along the spine could probably be found, and that likely such abnormalities constitute at least the predisposing factor in causation, this point would have reflected much deeper study of the subject and thereby relieve her of the criticism of superficial research, as possibly evidenced by the absence of any reference to the cause of the condition she writes about, and about which the world is anxious for intelligent information.

Boardman Reed locates the center of defecation at the second segment of the lumbar part of the spinal cord opposite the tenth dorsal vertebra. From the sixth to the twelfth dorsal inclusive is the inhibition region of the small intestine, the inhibitory nerve being the splanchnic (Pfluger), while the capillaries contain arterial blood;

when this changes to venous the splanchnics are stimulated, and peristalsis is increased. If the nervierigentes are stimulated, contraction of the longitudinal rectal fibers occurs, and the action of the circular fibers is inhibited, even when the hypogastric nerves by which they are supplied are stimulated, which stimulation has "an inhibitory effect on the longitudinal muscles" (Fellner). The vaso constrictors of the colon come from "between the sixth dorsal and second lumbar segment," and the vasodilators are from the same part of the spinal cord and from the nucleus of the pneumogastriacs. The vasoconstrictors of the sigmoid flexure and rectum come from the tenth dorsal to the fourth lumbar" (Reed). The vasodilator fibers for the same arise from "the first to the fourth sacral segments." The vasoconstrictors of the small intestine are "from the sixth dorsal to the second lumbar through the visceral nerves to the solar plexus and then to the blood-vessels of the abdomen, jejunum, and ileum," the dilators of the same rise from "the nucleus of the pneumogastriacs and go to the solar plexus" (Reed). Stimuli applied "at long intervals to the nerves act on the vasodilators while tetanizing stimuli act especially on the vaso-motors," which are not so easily exhausted.

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The Doctor's Fee—The average man will give a lawyer \$300 to \$500, together with a lifetime's praise, to keep him out of the penitentiary for from two to ten years, and at the same time he will raise a phosphorescent glow and a kick that can be heard around the world if a doctor charges him \$50 to \$100 to keep him out of hell for a lifetime. We are the only people under God's ethereal tent to-day who keep open shop 24 hours each day and 365 days in each year. We are also the only laborers to keep on working for people who do not pay. I can carry my part of charity with as good a grace as most men. I can go through rain, snow or mud and do my best, provided the case is one of worthy need, but to reward continually downright rascality, willful drunkenness and wanton laziness is getting out of my line.—Texas State Journal of Medicine.

Opposes Game Wardens—Rural Member of Legislature Who Has a Meaning All His Own for Osteopathy—A group of local politicians were gathered in a downtown office building the other day, discussing the coming session of the state legislature. Soon they began to relate anecdotes of happenings at past sessions in connection with bills that are expected to come up again at the next session. Dr. Harry M. Goehring, who is interested in the bill to be presented by the osteopaths for recognition of their cult, told one regarding the effort to pass the bill at the last session, which had the whole group laughing.

"Our bill had been in committee, and we expected a favorable report," he said, "I was working hard among the members for votes, and was making individual calls on them, paying especial attention to the country members. Finally I got hold of a member from Clearfield county, who had never heard of osteopathy, and hadn't the slightest idea what it meant, but was deeply impressed with his own importance, and didn't want to admit there was anything he didn't know, I asked his support for our bill.

"Wall, now, I don't know," said he, 'I'm agin puttin' any more expense on the state. Taxes is high enough now, as it is.'"

"Why, Mr. Blank," I said, 'The passing of this bill won't put one cent of expense on the state.'

"Now, don't try to tell me that," said the country member. 'We have to pay

game wardens to watch fer people killin' other game out of season, and if we passed your bill there would be more wardens needed to watch for them things.'

"It took me half an hour to convince the old chap that osteopathy was a cult, a profession, and had nothing to do with the game laws. He thought it was a new kind of game that he hadn't heard of, and was too bull headed to inquire."—Pittsburgh Chronicle-Telegraph, Nov. 12.

* * *

ODE TO DR. A. T. STILL.

GEO. W. REID, D. O., SLATER BLDG., WORCESTER, MASS.

Not many years ago
The people everywhere, you know,
They doped with this, and they doped with that,
Health to conserve, disease combat,
And to cure with pill and potion
Seemed to be the only notion
Not many years ago.

But in eighteen and seventy-four
What truth did Dr. Still explore?
"A free blood flow means health," he said,
"Adjustment should be used instead
"Of powders, pills, potations,
"And so many operations
"To overcome disease."

He worked with might and main
But the people said he was insane,
They shook their heads and gave a sigh
When Dr. A. T. Still passed by,
For they thought that no reliance
Could be placed in his health science,
Called Osteopathy.

The M. D's. also said
"Dr. Still has truly lost his head.
"To cure disease without some drug
"Of all this is the worst humbug,
"And this man with his queer notion
"Should be cast into mid ocean,
"Or placed behind the bars!"

But nothing could frustrate
The aim of Dr. Still, so great.
Now people all the world around
Commend the science which he found
For the good it is achieving,
Aches and ills untold relieving,
Blest Osteopathy!

The Journal of Osteopathy

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FRANKLIN FISKE, A. B., D. O., EDITOR.

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FIELD EDITORS.

Changes of Address.—Those sending in, requesting changes of address, will please send both old and new locations, so that the change may be made promptly.

KIRKSVILLE, MO., DECEMBER, 1908.

EDITORIALS.

Associations—Much has been said concerning the value of associations and one thing is noticeable, that most of the successful physicians are allied with some one of these. The question is, how to secure the attention of the others. One of the ways that is being employed more and more is that of pooling fares, by means of which the most distant members can attend as economically as the nearest. Another is the employment of some representative physician to give a miniature post-graduate course at the meeting—not the kind that you can read in text books, but practical thoughts worked out in the laboratory, or operating room.

Legislation—Last year was undoubtedly one of the composite board. While this looks most attractive to some practitioners, who are aching to style themselves M. D's. it is the worst thing possible for the profession as a whole. Drs. Hildreth and Heine have perhaps had more experience in legislative matters than any two other people in the profession, and both are unalterably opposed to the composite board. Better no law, than a poor one, they wisely state.

New Class in January—The A. S. O. will enroll a new class in January for the regular three year course. This is done partly in response to the constant demand of students for mid-year entrance, and partly on account of the greater opportunity offered to students who for sickness or various other reasons find it necessary to drop out of school for a time. At present the school is so equipped that six smaller classes can be more readily handled than three large ones.

Catalogs—Those who desire catalogs sent to prospective students may send the names of the prospectives to the secretary of the A. S. O., and the catalogs will be sent. Practitioners who desire a few extra catalogs, can secure them by sending their request to the secretary of the A. S. O.

The Osteopathic Journal—Dr. F. P. Walker's article will be the leading one in the Osteopathic Journal for January, (Vol. VI, No. 1,) which will be ready about Dec. 21st. To insure prompt delivery, get your orders in early. If you have not the rate card, send for sample of the Journal and rate card.

Inviting the M. D's. to Teach Osteopathy—The Journal of the A. M. A., Nov. 14th, as its chief correspondent letter, has a wail by Dr. A. C. Jacobson of Brooklyn, in which he says, "we must teach systematically all the freak systems in the regular schools * * * * All truth does not reside in us, we are not the divinely appointed, sole and sacred depositories and custodians of it after all * * * * * The irregulars cure a class that we do not cure,—a bitter truth. * * * * * Let's swallow the pill gracefully, teach the freak systems for what they are worth, and in so doing, destroy the incentive of patients to consult sectarian practitioners, thus absorbing the sustenance of the latter at its very source. They would suffer inanition. Legislation has done no more than recognize and license the freak systems and give representation to them on our examining boards. This is not a cure, nor yet a palliative. Indeed, it safeguards, wet-nurses and perpetuates these systems. It lies with ourselves to deal with a subtle enemy in a subtle fashion. The fire must be fought with the water of a subtle adequate resourcefulness, not through a legislative fire department through whose hose runs the kerosene of expediency and compromise. * * *

Can we not learn a lesson from the phagocytes, whose methods we study with such assiduity? In the human body's admirable scheme of things there is no license bureau for pathogenic bacteria. Let us invoke the opsonin of a broader type of medical school to the end that the professional blood stream be cleared of its unwholesome elements."

Does not this remind one of Dr. Heine's clarion call to the profession, which some of the self satisfied ones are wont to regard as a Jeremiad?

In the same issue, under the head of Medical Economics was an account of Dr. Foxy McCormick's tour through Ohio organizing "sanitary defense leagues."

Data on Smallpox—Dr. Asa Willard is after data regarding vaccination followed by disastrous effects, and will send blanks to all osteopaths applying. These contain the following.

Name? Address? Date of birth? Complexion? Color of hair? What diseases of childhood had? Had any other diseases prior to last vaccination? Was person, as far as was known, in good general health prior to last vaccination? How many times vaccinated? Give date of and name of doctor for each time and his address if possible. Which of these, if any, took? Was the arm well cared for as regards cleanliness? Tell what was the result of this last vaccination, mentioning date of vaccination and doctor who performed the operation; and his address if possible. Give with the utmost detail the patient's symptoms as soon as the results of vaccination began to be felt. Do this on the next page, sign, and have your signature witnessed and sworn to. Description of results of vaccination in case of —.

At the bottom of the blank is given space for witnesses. This is a matter of importance to the profession, and we hope that it will receive the attention which it deserves. Send to Dr. Willard, for some blanks and fill them out.

* * *

A hint may be gathered from the witty remark of an Irish patient, who said that he liked osteopathy better than medicine, for an M. D. so "drenched him with drugs during his illness that he was sick for a long time after he got well."

DR. STILL'S CHRISTMAS GREETINGS.

QUESTION.

Why did osteopathy come before the world as a healing art? One says, or has said, that necessity is the mother of invention. It becomes necessary to have some method or system of the healing art based upon a philosophical foundation, because all authors who have written on diseases when their philosophy was carefully read, practiced and weighed, proved itself to be a lamentable failure.

All writers have simply given us the effects minus cause after all their theorizing, experimenting, diagnosis and treatment. We have found that all of their theories do tremble when we ask the writer to show us the cause of such diseases as shaking palsy, asthma, pneumonia, consumption, goitre, gall stones, spasms, diseases of the heart, locomotor ataxia, facial neuralgia, rheumatism, and the whole list of diseases of which the human is heir from the crown of the head to the sole of the foot. This necessity is the mother of this invention or discovery, known as the mechanics remedy for disease known as osteopathy. Thus you see that the mechanical healer or osteopath is the legitimate child of the mother of inventions. Her name is necessity.

* * *

As a mechanical engineer who has lived a long time in both worlds, the world of medication and guess work and the world of a mechanic who has long occupied the seat of an engineer and conducted the repairing and running of the locomotive of human life, I want to say that I left medication as a healing art because it proved by long experience that the medical man had no claim to be called a scientific demonstrator of truth by the so-called science of medication. And notwithstanding the fact that the whole world, so far as I interviewed it, said No, and Pshaw, when I proclaimed that man is the proof of the work that shows a perfect plan, a perfect specification, a perfect construction with all parts and principles to demonstrate the human body is a machine of unlimited perfection in performing the duties for which it was constructed whether physical or intellectual, and the fact that for thirty-five years man's body both male and female has stood before my eyes so I could behold and see the execution of the work for which it was designed, I have come to this conclusion: The better I am acquainted with the parts and principles of this machine—man—the louder it speaks that from start to finish it is the work of some trustworthy architect; and all the mysteries concerning health disappear just in proportion to man's acquaintance with this sacred product, its parts and principles, separate, united or in action. It is an honor to its builder who should be respected for the perfection set forth and shown by man as a product of life and its constructive intelligence.

I consider man the answer to the question, does nature prove its perfection by its work? I say yes, and treat the human body as a machine should be treated by the mechanical head of an osteopath. I have found that there is no equivocation, no "may-be-so's." The answer is absolute, and it says, I am the answer to all questions that can possibly be asked by the anatomical, the physiological and the chemical conductor of this engine either in the normal or the abnormal condition. These are facts that each osteopath must possess or he is a failure in proportion to his lack of perfect knowledge of the form and works of the human body both physical and mental.

SHAKING PALSY.

We have shaking palsy to-day and have had during all ages. The question is, what is the cause that produces the effect known as cervical, brachial and dorsal agitans? All authors know and have for all time agreed that it is an unsolved mystery, and they declare that the chances for recovery are absolutely impossible, but as a mechanic I am not satisfied to be governed by that conclusion. I have made a careful mechanical search for the cause or causes producing shaking palsy and found what I think produces the shaking of the head, neck and upper vertebrae, also the cause that produces the agitation of one or both arms. This supposable cause is in the upper dorsal and neck where the facets and spines are misplaced laterally or forward by strains or mechanical injuries. The bones are moved enough from their natural places to put the ligaments on a strain and are held in this unnatural position by these tightened ligaments. To illustrate we will say that the fifth cervical is so far to the right or left that the facets are removed from their normal articulations and are held there by the ligaments which are now on a strain produced by the partial dislocation of this vertebrae.

In shaking palsy there is a partial dislocation of the bones of the lower half of the neck or some of the upper dorsal, causing lateral, posterior or anterior pressure, and this trembling is a natural effort of the muscles to pull the bones back to their normal position. On a careful examination of the posterior surfaces of the vertebrae of the neck and upper dorsal, particularly the lower four of the cervical and upper four of the dorsal, you will find on the outer end of the lower facet of each articulation a natural prominence or tubercle which allows the outer facets to slide downward and backward so far, then it stops because it strikes this natural prominence on the facet with which it articulates.

In all cases of cervical or brachial agitans I have found these facets drawn from their normal position and the trembling produced is an effort of the muscles to return the facets to their normal positions. After reasoning on this line and adjusting such cases to their normal articulation agitation ceased. I believe here is the key which will unlock and solve the question, "What is shaking palsy?" Though I have philosophied and experimented for only three years on this question, I have been gratified with the result and confirmed in my opinion that this is the solution of the question that has puzzled the world so long and which reads, "what is shaking palsy?" I will emphasize that I believe the door is open for the satisfactory solution of the question.

When I treated such cases quietude of the neck and arm took the place of agitation. I believe the discovery of the cause is in our possession and from now on we will treat and report the results obtained by proceeding under the above indicated philosophy.

Three years ago the writer of the above was on a Sante Fe train which was running at a speed of sixty miles an hour. We ran into a dead freight which was left on the track. A tremendous crash followed and my head which was towards the engine struck against the berth and partially dislocated my neck at the fourth and fifth cervical. A few weeks later I had shaking palsy of head and neck which continued until I placed my walking cane in a vice and brought the hook end of the cane on to the spinous process of the dislocated vertebrae. I pulled with force enough to adjust the bones. Since that time my neck and head have had no more shaking palsy. I find the same rule of treatment to be just as good on other necks as it was on mine.

MENTAL ENDURANCE.

If the brain is overworked as a result of the attempt to master too many studies while in school injurious results follow. If the stomach is overloaded by injudicious eating there is a failure of digestion resulting in dyspepsia. If the brain is overloaded what is the result? Is it the destruction of mental activity? Is this mental condition classed as dyspepsia? Why is it that so many so-called "highly educated men" after having spent six or eight years in a college or university are business failures? Are they laboring under mental dyspepsia? Has that mental dyspepsia destroyed the power of the mind to select and prosecute some useful branch of business in a successful way? Had they been educated for usefulness in the necessary branches for business would they be leaders or would they be, as many hundreds of them now are, day laborers. They have been under control of collegiate masters so long that they have lost all useful individuality. They have spent so many years in college that their minds have given up in the attempt to grasp so many subjects and they have become the dyspeptic servants of men who have spent much less time in receiving a business education.

I think our school should teach the useful, be that much or little. Then the young man will go into the world qualified to support himself and those depending upon him.

A. T. STILL.

* * *

ASSOCIATIONS.

Colorado—Denver Association elect officers.

The Denver Osteopathic Association held its annual monthly meeting at the Brown Palace Hotel on the evening of November 7th. In the absence of the president the meeting was called to order by Dr. Nettie Bolles.

The paper on the Eye and Ear was read by Dr. Laura F. Bartlett, which was very good, and was followed by discussion of the various members present on their work on Eye and Ear diseases.

It being the regular evening for the election of officers for the ensuing year, this was taken up next in order. The following officers for the ensuing year were elected: President, J. T. Bass; first vice-president, C. G. Parmalee; second vice-president, Julia V. Frey; secretary, J. Alvin Stewart; treasurer, M. W. Bailey. After the election of officers, a short discussion of legislative matters was taken up by the association.

The meeting was very well attended, and the Denver Osteopathic Association seems to be growing and increasing each time in attendance.—J. ALVIN STEWART, Secretary.

Gulf States—New Association will meet in Jacksonville—The Gulf States Osteopathic Society will hold its annual meeting at Jacksonville, Fla., the last week in December, the exact date to be announced later. All osteopaths living in the states of Florida, Georgia, Alabama, Louisiana and Mississippi are earnestly requested to attend.—FRANK F. JONES, Sec'y, G. S. O. S.

Illinois—Fourth District Osteopaths Hold Banquet—A large attendance met in the parlors and convention hall of the Illinois Hotel at Bloomington, Nov. 8th. Matters of considerable importance to the state association were considered. Dr. Hildreth of St. Louis conducted the clinics. Dr. Ethel Louise Burner was re-elected president, Dr. Homer D. Stewart was elected secretary-treasurer in place of Dr. Bone of Pontiac.

Iowa—Tuberculosis and Lorenz Operation Interest Seventh District Osteopaths—At the meeting on Nov. 27th, at Still College, president D. E. McAlpin was in the chair. The attendance consisted of resident osteopaths and the faculty and students of Still College. After the song by the men's glee club, and remarks by the president, Dr. J. A. Still read an interesting and somewhat sensational paper on infectious diseases, in which he advocated the compulsory reporting of venereal as well as other infectious diseases, and gave statistics which tend to controvert the contention that milk from tuberculous cows is a fruitful source of the human disease. Dr. Della Caldwell gave some case reports that were most encouraging, showing what earnest persistent effort will accomplish, even after the drug doctors have given up. She also gave her experience as an osteopath trying to get into the public hospitals of Des Moines. In discussion of this latter subject, Dr. Weddell brought out the fact that Dr. S. S. Still had made the largest individual contribution to one of these hospitals, and was one of the first to be refused admittance. Also the fact that when the \$50,000 osteopathic hospital is built, if ever, the osteopaths of Des Moines will take their patients to it. In the discussion it developed that in other parts of the state, osteopaths have access to the hospitals on the same footing as other physicians, but in Des Moines, until recently, they have been denied admission, and if the privilege is now accorded them, it is not generally known. Dr. C. W. Johnson gave a very interesting lecture on Pathology of Infectious Diseases of the Lungs, giving stereopticon illustrations. Dr. G. W. Weddell exhibited specimens showing macroscopic pathology of aortic aneurism and endocarditis.

In the afternoon the program was opened with a "Discussion" by Dr. S. S. Still of the "Lorenz operation," in which he severely served the false claims and exaggerated advertizing of practitioners who profess to have reduced a number of congenital dislocations by the improved osteopathic methods but whose claims had not been verified.

The program was concluded by Dr. Geo. W. Weddell who gave a demonstration from specimens from the dissecting room of Endocarditis and Aneurism of the Aorta.

Music was also furnished by the Ladies' Glee Club of the College.

The next meeting will be held at Ames, the latter part of February.

Kansas—Kansas Osteopaths Discuss Kirksville Surgery—The Southern Kansas Osteopathic Association met at Wichita, Kans., in Dr. Montgomery's office, Tuesday, November, 17, 1908.

B. Daniel Fordyce, of Ellsworth, Kans., called the convention to order at 10 a. m., and the forenoon was devoted to case reports and a very interesting paper on the "A. O. A. Convention at Kirksville" read by Florence McCoy, of Wichita. Among the many good features of the paper with which the convention was especially impressed, were what she had to say about the "Surgical Atmosphere at Kirksville" and "What Women are doing in Osteopathy."

The afternoon was given over to J. W. Hofsess, president of the Central College of Osteopathy, Kansas City, Missouri. The Doctor conducted a clinic and lectured on Spinal Curvatures. The lecture was ably presented in a masterly style, and showed a profound knowledge of the subject that few attain. The osteopaths were greatly pleased with the lecture and were very glad to have him on the program.

The association will hold another meeting next February.—G. O. SHOEMAKER, Secretary.

Kansas-Missouri—Border Line Association Have Mental Feast—Drs. Geeslin

of Lamar, Mo., entertained the S. W. Mo. and S. E. Kan. O. A. at their regular monthly meeting, Oct. 31st. The nine members present enjoyed the following osteopathic feast: The Alimentary Canal and its Functions, Dr. Boswell; General Paresis, Dr. Strickland; Rheumatism, Dr. Gass. Clinic. Session adjourned at 1:30 a. m., to meet Nov. 28 with Dr. Cox at Joplin.—FLORENCE GEESLIN; Sec'y.

Kentucky—Bluegrass Osteopaths Study Technique—At the meeting of the Central Kentucky Association, Nov. 10th, at Paris, with Drs. Petree and Longan, Osteopathic Technique was the subject under consideration. The following taking part: The Osteopathic Lesion, S. W. Longan; Technique, "Cervical Region," O. L. Robinson; Technique, "Dorsal Region," E. O. Vance; Technique, "Lumbar Region," O. L. Buckmaster; Technique, "Sacral Region," Josephine Hoggins.

Business session after dinner hour.

Drs. Vance and Buckmaster were unable to be with us, so we will use those divisions for next meeting.

The next meeting will be in Cynthiana with Dr. O. C. Robertson, where we will discuss the dorsal lesion. Fraternally, Martha Petree.

Maine Osteopaths Discuss Legislation—November 14th, the Maine Osteopathic Association held a special meeting to discuss State Osteopathic Legislation. Geo. W. Riley of New York was the guest and speaker of the evening. Dr. Riley's recent experiences made his advice instructive and valuable.

J. Ralph Smith of Bangor came and will join the M. O. A. at the next regular meeting.—VIOLA D. HOWE, Sec'y.

Maryland—Dr. Earl Willard Tells How to Prolong Life—On the 10th, in the offices of Dr. Harrison McMains, in Baltimore, the Maryland Osteopathic Association held its third annual meeting, electing officers for the ensuing year as follows: Edward L. D. Schmid, Frederick, Md., president; Alfred M. Smith, Hagerstown, Md., secretary and treasurer; John Wesley Jones, Baltimore, member of executive committee.

Although sickness and professional duties prevented the attendance of several members, the meeting was one of interest and profit. A specially enjoyable feature of the session was afforded by Earle S. Willard, of the Instructor's staff of the Philadelphia College and Infirmary of Osteopathy, who gave us an interesting, unique and instructive address on the subject: "The Prolongation of Human Life," wherein the Doctor predicts the manifest future acceptance of the philosophy of osteopathy as the potent factor that will favorably influence longevity, his theory offering a rational and available method of arriving at the "sine quo non" of the interesting "Theory of Metchnikoff" regarding the prolongation of human life. We understand Dr. Willard's address will be published in serial form, in the Philadelphia Journal, and anticipate wide attention and interest manifested in his article.

Unavoidable delays in surrendering the books of the office of secretary-treasurer to myself, has delayed my report of this meeting.—Fraternally yours, A. M. SMITH, D. O., secretary-treasurer.

New Jerseyans Will Eat—Dr. Milbourne Munroe, secretary of the New Jersey Society has sent out the following clarion call:

"There will be a rousing good meeting of the N. J. O. S. held at Achtel-Stetter's 844 Broad Street, Newark, Saturday, December 5, 1908. Dinner at 6:30 p. m. (Informal)—one dollar per plate. We who were present at our last dinner had such a good time that we all voted to have this one, as a preliminary to the very important business meeting, which is to follow the dinner, so we are assured a good attendance. You who were absent last time be sure to be present to absorb some of the enthusiasm."

Greater New York Society Study the Pelvis—The pelvic region was the subject of the meeting at the Imperial Hotel, Saturday evening, Nov. 21st. As a preliminary warming up exercise, Dr. J. A. West conducted a quiz on the anatomy of the region. This was followed by an address "Non-surgical Treatment of Ovarian Diseases," by Dr. M. E. Clark. A business meeting concluded the evening's work.

New York—Hudson River D. O's. Meet—The annual meeting of the Hudson River, North, Osteopathic Association was held at the residence of Dr. Emma Wing Thompson, Schenectady, Nov. 10, and the following officers elected: President, W. E. Greene; vice-president, M. E. McDowell; secretary and treasurer, E. Frink. There was an address by the retiring president, Grant Phillips, and the secretary and treasurer, A. A. Brown, rendered a report. A paper entitled, "Diseases of the Kidneys," was read by S. Y. Kennedy.

Ohio—Osteopaths Will Listen to Dr. Forbes—At the State Convention at Toledo, January 6th and 7th, Dr. Forbes will talk and demonstrate his theories with regard to the Lorenz method. The convention will be held at the Secor.

Pennsylvania—Dr. M. E. Clark Discusses Non-surgical Treatment—A meeting of the Philadelphia County Osteopathic Society was held in Grand Fraternity Hall 1414 Arch St., Philadelphia, Friday evening, Nov. 20th, 1908, Dr. W. L. Beitel presiding. At the close of the business portion of the meeting, Dr. Beitel introduced Dr. M. E. Clark of Indianapolis, Ind., as the speaker of the evening.

Dr. Clark read a paper on "The Non-surgical treatment of Ovarian Diseases" expressing his views on the subject in a clear and comprehensive manner. Dr. Clark is a great believer in using prophylactic measures, and gave much good advice as to the best methods for accomplishing the same in these cases. After the close of his talk, he kindly answered numerous questions, propounded to him by those present, with profit to the latter. The meeting was well attended by the local doctors, and also, a few from out of the city were noted among the audience.—ABBIE JANE PENNOCK, Sec'y.

Rhode Island—Dr. Booth Lectures on Efficiency of our System—Dr. E. R. Booth, of Cincinnati, Ohio, met with the Rhode Island State Society on the last Saturday of October. The early part of the evening was devoted to the clinic work and this was followed by a lecture by Dr. Booth. His subject was "The Adequacy of Osteopathy" and it was treated in a very interesting and instructive manner. All present enjoyed a profitable evening.—A. M. ROBERTS, Sec'y.

Washington—Kings County Elects—The Kings County Osteopathic Association, Seattle, Wash., elected following officers for the ensuing year: President, F. J. Feidler; vice-president, Anna C. Beebe; secretary, Roberta Wimer Ford; treasurer, Celia J. Newman.

Legislation and Vaccination were the subjects of discussion for the evening.

The King County Osteopathic Association is one of the largest local associations in the land. Having a membership of thirty-nine out of forty-seven D. O's. in the county.

The meetings are always interesting, an average of over twenty usually attending.—Respt. F. J. FEIDLER.

Wisconsin Osteopaths Will Meet Early—Our Association will meet earlier this year on account of having the opportunity of listening to Dr. Harry W. Forbes of Los Angeles.

Wednesday and Thursday, December 30 and 31st are the dates.

Wisconsin practitioners will please bear this change in mind and make a desperate

effort to be at Eau Claire by the early train of Wednesday—two full days with Dr. Forbes—think of it—what better post-graduate instruction can we expect within two days discussing "Diagnosis and Technique of Cervical and Innominate Lesions."

We are promised some red-hot liners straight from the bat as ours will be one of the first meeting in the circuit.

Come—put on those Christmas gloves and pretty new tie—look your best and meet us all with the happy countenance characteristic of an osteopath.

We're going to have a grand good meeting—"The best ever."—E. J. ELTON, D. O., Chairman, Press and Publication Committee.

Illinois—Third District Will Meet With Dr. Halladay—The third district will listen to the following program at Dr. Halladay's office in Galesburg, Dec. 2nd:

Cystitis, Lucy V. Henderson, Dallas City; The Cervical Region, Daisy Walker, Quincy; Differential Diagnosis and Treatment of Gall Stones, J. S. Barker, La Harpe; Pulmonary Tuberculosis, R. S. Hallady, Galesburg; Osteopathic Methods in Inflammation, G. E. Thompson, Elmwood. General discussion; Report of the Bloomington Meeting, Ethel Louise Burner, Bloomington.

Iowa—Fourth District—The Fourth District Osteopaths met with Dr. MacClern at Iowa Falls, Nov. 18th.

Iowa—Polk County—Regular meeting of the Polk County Society was held at the office of Dr. S. S. Still, Nov. 10th, and Dr. Ella Crowley addressed the meeting.

Missouri—Northwest Missourians Organize New Association—The annual meeting of the Northwest Missouri Osteopathic Association was held yesterday afternoon at the Hotel Baltimore. One hundred and twenty-five members attended.

Papers were read by Anna H. Hurst of St. Joseph; R. E. Nuckles of Marshall; H. J. Richardson of Excelsior Springs and Matilda Loper, W. J. Connor and R. W. Brown of Kansas City.

These officers were elected: R. E. Nuckles of Marshall, president; W. E. Beets of St. Joseph, first vice-president; S. T. Lyne of Kansas City, second vice-president, and Sophia Hemstreet of Liberty, secretary and treasurer."

This was a very enthusiastic meeting and much interest shown by all present. The next meeting of the Association will be held in February, at Kansas City, Mo.—Fraternally yours, SOPHIA E. HEMSTREET, Sec'y.

Missouri—St. Louis Women D. O's. Have the First Osteopathic Society Incorporated in Missouri—Nine women practitioners of osteopathy in St. Louis applied to Judge Muench's Division of the Circuit Court for a proforma decree incorporating the St. Louis Osteopathic Society. The articles filed state the object of the organization to be to foster closer relations among persons of similar pursuits. The incorporators are Minnie Schaub, 2725 North Taylor avenue, president; Elizabeth M. Ingraham, 506 North Vandeventer avenue, vice-president; Arlowyne Orr, secretary and treasurer; Nannie J. Chappell, Eleanore L. Moore, Bertha A. Buddecke, Nettie E. Hoffman, Mayme Williams and Juliette Williams.

The women are certainly doing things in St. Louis, and they continue to keep in the lead.

* * *

Ambiguous Ad—"Drs. Blank & Blank * * * * are treating successfully all chronic and acute diseases. Dr. ———— A specializes in nerve disorders, Dr. ———— B divides his attention exclusively to women and children. Osteopathic is nature's 'first aid' and is rapidly gaining in favor among the intelligent people. Phone Main * * * " The printer was apparently asleep when he wrote the above, or set it up.

STATE BOARDS AND LEGISLATIVE.

N. Carolina—Dr. A. R. Tucker speaking of a recent addition to the Carolina osteopaths, says, that he "passed a very satisfactory examination, and we consider him a valuable addition to our little band. I wish you could send us ten such men every year for the next few years, for this state is splendid territory for good osteopaths.

I trust you will encourage good men to come to our state, and while we don't reciprocate with other state boards we don't mean to keep people from coming to our state for we need more osteopaths."

North Carolina—A Personal Letter From Dr. Glascock—The following letter, although written personally, is of such general interest that we have received permission to publish it.

"I have had a great many experiences here, and while I am writing I will give you a few of them. You know that I was turned down here by the head surgeon of the local hospital in that I gave him a surgical case and he flatly refused to let me witness the operation. I told him in plain words what I thought of him, and since then I have been sending my cases to Richmond I had an occasion to take a case of gall stones there to Dr. Stewart McGuire. I guess that you are well aware of Dr. McGuire's reputation as a surgeon. He is well known throughout the East, and is a great surgeon. I wish to say that I never saw nicer, smoother work than that which Dr. McGuire does. I was never treated nicer in my life by any one. He invited me to be present at all his operations that evening while I was there. He is well equipped for work. Owns the hospital, and is inclined to treat the osteopathic profession kindly. I think that all osteopaths in the East that have surgical cases will do well to send their cases of surgical nature to Dr. McGuire. I feel sure that they will be treated right.

I was turned down in the hospital here before we got our law in this state, and now they are building a new hospital, so I wrote them a letter the other day and asked them if they would admit patients now under my direction. They have it before the trustees at present and I do not know what will be the outcome. I only know that I have a right there and I am going in there if I have to bring suit against them.

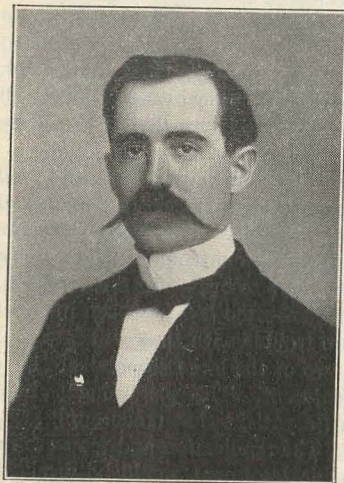
I lost a case the other day which was the first since the law has been in effect here, and it may be of interest to say that I had no trouble with the certificate.

It might be interesting to you to know that two of the large schools here have prohibited their pupils from taking osteopathic treatment. This was brought about by the M. D's. who were trustees. This fall I had a patient that made application to one of these schools and sent the required fee. The application and fee were returned and was told that no one taking osteopathic treatment would be received. I am powerless to do any thing about this though I put up the fight of my life when the Baptist University for Women was making the change. I held my own there pretty well as all the faculty but a few were patients of mine. The faculty can come from the institution to my office, but the student body can not, neither can any one of the students or faculty have me there on the campus. I am forbidden by the medics and the trustees to go on the campus professionally, but you wait until I get a call there and you will see whether I will go or not. I told them if I should get a call from that institution I was going if I had to go through blood and water. They knew I meant it too. However, I am still getting my usual amount of work from there. They come to the office and those that preferred osteopathic treatment alto-

gether moved off the grounds. We had one of the biggest fusses that was ever fussed about that thing, and I came near prosecuting some of the old sinners too. That was the only way to get them to shut up.

I was out in the country to see a case the other day, and while I was gone one of my cases took very ill. They 'phoned several times for me but could not get me so they called in four medics. I got there while they were all there, and went in and took charge of my case. The family wanted one of the medics to take the case along with me (I told them that it was perfectly agreeable to me) and one of them spoke up and said "I do not practice with Dr. Glascock." The head of the family said "Good bye," and the Doctor took his leave. The next one spoke up and said that he would take the case with me.

A man here the other day said that he thought that I was the only osteopath in the world. Said that he had never heard of any other. I surprised him by telling him that there were over five thousand, and more coming. This pioneer work here in this state has been great. I was called out here in the country last Sunday about 10 miles to see a case, and the whole neighborhood was there to see what I looked like. I guess that they wanted to see if I was just the same as any other man. Mine has been equal to parts of the Old Doctor's experience. People here from out in the country come in and come to my office and say "I have heard so many things about you that I thought that I would just like to see you." I tell them to look as long as they like."



DR. O. C. KELLER,
First Osteopathic Coroner.

The Royal Highlanders have decided that a D. O. is not capable or qualified to make examinations for their order. I was a member of this latter order until they declared themselves on osteopathy and—well I belong no more.

I give you the foregoing information thinking it might be of help to you in answering queries that come to your office.

Just got through with a case that has set some of the natives out here in the sage

Idaho—Better Way Than Bandel's—In Idaho they do not wait to mandamus the health board, but they elect an osteopath coroner. This is certainly an easier and a more satisfactory way. Dr. O. C. Keller, of Moscow, Idaho, enjoys the distinction of being the first osteopathic physician to be elected to this office, although several others have been nominated.

Idaho—Insurance News and a Case—In view of the many articles in osteopathic publications I beg to add a bit of information for the benefit of those who may be interested.

The Peoples Mutual Life Insurance Association & League of Syracuse, N. Y., accepted without hesitation and paid claim based on sickness report signed by the writer.

The North American Accident Insurance Co. of Chicago in letter signed by their General Manager have assured us that they will accept accident or sickness report signed by an osteopath on the same basis as one signed by an M. D.

brush to guessing. On Nov. 5th, was called to see a woman suffering with appendicitis (diagnosed as such by very prominent M. D.). Said M. D. said "Operation—Operate at once—send her to the hospital, to-day."

Both the patient and her husband failed to take kindly to the operation stunt and thus I was called. From all appearances and symptoms appendicitis was her trouble. Will make it short. First treatment relieved her—succeeding treatments secured steady improvement—patient discharged O. K. Cured Nov. 12th and no part of her anatomy is in a glass bottle.

Fraternally yours, EARL D. JONES, A. S. O., June, '01.

Minnesota—St. Paul Chiro "Clean Up"—Dr. Rehfield of Fairmount, Minn., states that the St. Paul Chiro, who fractured a vertebral disk for a patient, disappeared. He had accumulated \$14,000 in one year, teaching "Chiropractic Science" to people, mostly farmers, for a fee of \$500 and a six weeks' course, and then besides, treating patients for \$10.00 per week. If the patients brought in a new one, he allowed credit for a number of treatments. The suit was for \$10,000 damages.

Pennsylvania—Digest of Proposed Law—The bill provides for a straight osteopathic board, the licensing of those of the osteopaths in the state at the time of passing of the act, who are graduates of a school of four terms of five months each, recognized by the A. O. A. After the act goes into effect, three years of nine months each are required, and after 1912 four years of eight months, or three of nine months with five months post graduate, are required. Reciprocity is provided for, and any reputable graduate who has been in practice any where for ten years is given a license without an examination. The bill states that it is not to effect "the so-called practice of medicine."

Minnesota—Another Bull-Headed Coroner—At Mankato, Minn., Dr. D. B. Catlin signed the certificate for the late Harvey Buck of Garden City, Minn., who died of uremic poisoning. Dr. A. O. Bjelland, City Health Officer, refused to sign the burial permit, and the undertaker then called up the state board of health in St. Paul, and was told by them that they would accept the certificate from Dr. Catlin only on the same conditions as they would from a layman. Dr. Catlin then got in communication with Dr. Huntington of the osteopathic board. Dr. Catlin writes under date of Nov. 28th:

"We had writ of mandamus ready to serve when the health officer called up the undertaker and said, "Tell Dr. Catlin's lawyers that the burial permit has been issued." It seems to me that we might secure damages if we carried case further."

Massachusetts—"Osteopath" Sentenced—"Dr." John A. Taff, mentioned in the November Journal as appealing to the Supreme Court, was given three months. The secretary of the state board testified that last March Mr. Taff tried the state examination, getting only 13% as against 75% required. Mr. Taff evidently believed in charges, as he charged one individual \$2,000, \$1,000 payable in advance. One Dr. Earl S. Slocum of Baldwin, Mass., is said to have paid \$1,000 for treatment for loco and is bedridden with a broken leg, having tried to walk without a cane on Mr. Taff's advice.

Massachusetts—Massachusetts papers contain reviews concerning the bill to be proposed in the legislature, an account of which is given elsewhere, by our Boston correspondent.

New York—Dr. Williams Makes a Correction—My attention has just been called to the fact that you printed the decision of the Appellate Div. of the Supreme Court in the Bandel case in your November issue of the Journal, and I regret to say

that the decision gives some erroneous impressions. I am afraid that the honorable judges did not study the matter as closely as they might.

You quote them correctly but their statement is not in accordance with the facts and as this has already created some misunderstanding, I will be pleased if you will correct it in your next issue.

On page 701 of the Journal you quote as follows "to be examined upon the same subjects as other applicants except that sanitation, surgery and gynecology are excepted from the examination, and the theory and practice of osteopathy are excepted from the examination of all other candidates."

I am unable to imagine how they got such an impression as there is no foundation for it in fact. The facts are that the examination is alike for all and does include sanitation, surgery and gynecology, and there is no examination in the theory and practice of osteopathy or of medicine.

Hoping that the correction will prevent any misapprehensions, I beg to remain, Yours very truly, RALPH H. WILLIAMS.

Ohio—Chiropractor Beats Injunction Suit—Some months ago, it was stated that the Ohio physicians thought they had discovered a way of taking care of chiros by enjoining them, and this was the method used on one H. L. Murchison, of Sandusky. Dr. G. B. Merz of Sandusky had brought the suit before the state board. The Toledo Blade, of Nov. 14, says:

"The case," the court holds, "presents an interesting and important question, so far as we are apprised, not heretofore specifically considered or determined in any court of this state or any other jurisdiction. The defendant was engaged in the practice of what he denominates not medicine or surgery, for which he concedes that he has no license under the state medical examination and regulation laws of Ohio, but the chiropractic adjustment of displaced spinal vertebrae, with the result, as claimed, of effecting remarkable and speedy cure of numerous if not all bodily ailments."

The ground on which the injunction was dissolved was that the property rights of Dr. C. H. Merz, who inaugurated the legal contest on behalf of the medical society, have not been interfered with as he claimed in his petition.

This emphasizes what Dr. Fiske has contended ever since he served as the first witness against chiropractors, viz., that the only way to touch this fake on osteopathy, is to come out plain and square, and admit that it is such, and so treat it.

Pennsylvania—Coroner Held Postmortem on Pneumonia Case—Dr. O. O. Snedeker treated a gentleman by the name of William Werner, of Derry Pa., one of the doctor's regular patients. The case was pneumonia and Dr. Snedeker advised the family to call in an M. D. to help the man die, as he was past hope. The family refused, so Dr. Snedeker signed the death certificate, being the only physician in attendance, and crossing off the "M. D's." on the paper. Later the coroner held an inquest which substantiated Dr. Snedeker's diagnosis and the case was referred to the district attorney for action, if he desired to take any. It is not expected that any action will be taken. The papers in the neighborhood seem all to favor Dr. Snedeker, and also to favor the passing of an act legalizing osteopathy.

Scotland—Dr. Hudson Discusses Situation in Edinburgh—I will say that personally I have always liked "Osteopath" best, but admit that "Osteopathic Physician" conveys a more favorable meaning to the un-initiated, however, there is not much meaning in either, until one has a few treatments. I think it would be much

better if we could settle on some thing and stick to that, and "Osteopath" is rather the easiest term. When I was in Massachusetts, I used "Osteopathist" because it was the more common term. Here I use "Mr. Hudson Osteopath" on my door plate, because the M. D. has a copyright, or law which makes it a penalty for any one not registered under the Medical act, to use Dr. or Physician. The best surgeons and dentists here have their door plate to read "Mr. J. J. Jones, Surgeon, or Dental Surgeon." The unregistered man has no protection under the law in collecting his accounts and of course is much more liable to prosecution for damages. So far I have been unable to find any thing in the laws which I have secured, that prohibits any one from treating the sick in any way he sees fit.

I am afraid if the agitation for laws to protect osteopaths, M. D's. and other healing (?) paths, continues in the states, under the guise of protecting the "dear public" that the people will have an attack of "peri-nocia" and feel sick at the sight of any kind of a Doctor. It is never too late to make laws for the future, the past can't be remedied, and I believe the best plan would be for the Government to take the matter in hand and annul all state laws giving special privileges to a special school, and abolish all examining boards, and appoint a medical counsel say of five men, one man each recommended by the school of allopaths, homeopaths, osteopaths, electropath, and one without any path, to supervise the various colleges, and their examinations, to that any one granted a diploma may be registered to treat the sick in any way he and the patient agreed to, in any or all of the states and territories of the U. S. A.

F. HUDSON.

Texas—Latest in the Collins Case—On account of an error in the indictment, the case against Dr. Ira Collins was thrown out in part, and in part withdrawn. New indictment has been found, which we are informed will be brought up later.

Texas—A Satisfactory State Board Examination—One of those who took the Texas State Board examination writes:

Well, the Texas examination is over. It was hard and long but fair, sixty-three took it. They expected about 250 or 300 to take it as there are 500 physicians in the state who need to qualify or get out.

Dr. Bailey of state board was so nice to us, so were all the members. There were but two women who took it.

There were men there, who had practiced in the state 10-25-35 and 41 years, who didn't know they had to have state license till they were notified to take down their signs. I wonder where they lived, what they read?

Texas—Arrested for Reckless Motoring—Dr. J. J. Pearce, on Nov. 13th, in an attempt to miss a gentleman ran into a plate glass window, completely demolishing it. He was unhurt. The Doctor was arrested for reckless driving, but when the case came to trial, the prosecution having insufficient evidence, the case was dismissed.

Wisconsin—Sawyer Dismissed—Dr. O. W. LaPlount writes that Dr. Sawyer made partial restitution all round, and left the city. The Portage Register, says:

W. E. Sawyer, charged with forgery by Dr. W. O. LaPlount, was brought before Justice Heidt, Nov. 12th, and after hearing his testimony, was held to answer in circuit court under \$500 bonds to a charge of receiving money under false pretenses. He appeared before Judge Stroud Nov. 13th and pleaded guilty to the minor charge and was fined \$10 and costs, amounting in all to \$69.36. Sawyer was again arrested by Sheriff Hawkos for leaving his board bill at the Farmers hotel unpaid. It appears Sawyer adjusted the matter with Landlord Heefs and case was dropped.

Washington—"Osteopath" in Trouble—"Dr." B. C. Pollman of unascertainable

osteopathic qualifications, was arrested at Bellingham charged with practicing medicine without a license, and found guilty. He appealed successively to the courts and finally in the Supreme Court was found guilty. The Bellingham paper, says:

"The testimony in Pollman's trial in justice court was to the effect that the defendant advertised to cure all diseases within the province of the medical fraternity, although it was admitted that he did not administer drugs in his treatments. He took the title of "Doctor," kept an office as a practicing physician and advertised under the same title. His treatments, he said, consisted of massages, flexions of the muscles and external rubbings, although by this method he claimed to cure practically everything from a bad cold or a headache to tuberculosis and pneumonia.

Pollman is liable, under the state law, to prosecution for his practice since his arrest for the first offense, since the statute provides that every day of practice without a license shall constitute a separate offense. Pollman has removed from Bellingham and is practicing in Seattle."

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NORTHEAST MISSOURI OSTEOPATHIC MEETING.

January 1st and 2nd, 1909, (Friday and Saturday), the Northeast division of the Missouri Osteopathic Association will meet in Kirksville. An interesting and intensely practical program is being prepared. All osteopaths invited.

R. E. HAMILTON, G. A. STILL, E. H. LAUGHLIN, Local Committee.

* * *

June Class, 1905, (A. S. O.) Resolutions—Thirty-eight members of the June class, 1905 of the American School of Osteopathy in attendance at the National Convention of the American Osteopathic Association at Kirksville, Mo., met in reunion. The time was profitably spent and many incidents of school days recalled, as well as later field experiences related. The following resolutions were adopted:

Resolved, That we extend to the relatives and friends of our deceased members, Doctors Dora P. Boyce, James Otey, Emily Rutledge, Charles Struble, and Lizzie Heberer, our most sincere condolence, and that we share with them the grief they bear for those who have left our ranks.

Resolved, That the June class of '05 heartily congratulate Dr. A. T. Still on reaching this, his 80th anniversary, and we hope he may be spared to us many years to come.

Resolved, That we believe the American Osteopathic Association stands for all that is best in osteopathy, and is the best means for the advancement of our science. We commend it for its stand for orthodox osteopathy and osteopaths; for its stand the ethical conduct of the profession, and we believe annual meetings are a great source of profit and inspiration to all who attend. We therefore recommend that the members of our class support it with their membership and by attendance at its annual meetings if possible.

Resolved, That the June class of '05 have an annual reunion at each annual meeting of the A. O. A. and that an evening be set apart and suitable entertainment be provided for same. To this end suggestions and plans may be addressed to Dr. Josephine Trabue, class secretary, Pittsburg, Kansas.

A. E. DAUGHERTY,
ANNIE McC. BROWNLEE,
DAISY WASHBURN,

Committee.

Bloomington, Ill., Sept. 31, 1908.

OSTEOPATHIC ADVERTISING.

The osteopaths from various parts of the country use many different methods of advertising. We will discuss a few of them, leaving out the names and locations in those we criticise.

A Modest One—The following is from Hoquiam Sawyer: "Dr. Walsh, Osteopath, room 10, Post Office Bldg."

A Method of City Advertising—The Sunday Magazine of the Post Dispatch, Oct. 18th, published a page on Osteopathy, illustrated by large cuts of reducing a hip subluxation; one of Dr. Still, one of normal cervical vertebrae and one of cervical subluxation. One draw-back was the roast of the local St. Louis doctor, but these probably furnish good amusement to the readers of the paper. They are so amusing that we append them.

"NINE-TENTHS IMAGINATION"

Osteopathy, in the opinion of the medical profession, amounts to nine tenths imagination and perhaps one-tenth of good performed. Out of 10 cases of illness, eight will probably recover, on an average, of their own accord. One will die, whatever is done. One will owe its recovery to the benefits of science.

Osteopathy, therefore, can profess to cure eight of ten cases subjected to its treatment, when, as a matter of fact, they would have recovered anyhow. Osteopathy can cure the majority of its patients by simply doing nothing.

In the case of the one in which death will surely result, neither osteopathy nor any other system can avail anything. In the one doubtful case, where life and death hang on skilled treatment, osteopathy is powerless, where the administration of medicine has an even chance against death.—DR. F. W. ABEKEN, Coroner's Physician, City of St. Louis.

What I think about osteopathy would not look well in print.—DR. WALTER C. G. KIRCHNER, Superintendent of the St. Louis City Hospital.

Osteopathy has only the standing of a good system of massage. Its name implies a manipulation of the bones and limbs, and lots of people feel better for a rubbing. When one of my patients needs a massage, I tell him to go either to a massage parlor or to an osteopath. One will do him as much good as another.

But when osteopathy offers itself as a complete system of healing it goes too far. Such claims are preposterous, and are not seriously regarded by the medical profession. Osteopathy has won a vogue and legal standing through the cures it has led politicians to believe it effected upon them. Doctors regard it as merely another of the fads of healing of which so many have sprung up.—DR. MARC RAY HUGHES, St. Louis.

RUBBED SENATOR PLATT'S LEG.

A scandal of long duration agitated medical circles in the State of New York when Senator Thomas C. Platt even then in his dotage, forced through the Legislature by mere dint of boss power a statute legalizing the practice of osteopathy.

The "Easy Boss," suffering with the aches and ailments of age, fell into the hands of an osteopath, who massaged the senatorial limbs. Feeling somewhat enlivened after this treatment, Platt declared that osteopathy was a genuine scientific boon to mankind. In vain did the medical profession rage.

"I know as much about it as the doctors do," said Platt, and his law stands on the statute books of New York to-day.

Method in Washington—Under the head of "Osteopathic Physicians, Members

National, State and County Association," the regulars of Seattle have their cards. These are controlled by the Kings County Association, which excludes the fakes rampant in that western city.

Rather Self-Flattering Ad—In an interurban time table occurs the following:

"The gentleman with intellect, education, skill and honesty, practicing osteopathy scientifically, who is noted for cures of all Acute and Chronic Diseases. If you are deformed or undeveloped, Dr. — will tell what he can do for you free."

A Claim of Osteopathy—This is a heading of a number of pointed paragraphs occupying half a column in a newspaper, being placed in with the news and no name appearing in connection.

Signed Talks—A number of physicians have been publishing series of osteopathic talks in their local papers. Some of the best of these have been given by Drs. J. E. Downing, of Bay City, Michigan, Neville E. Harris, of Flint, Michigan, and B. A. Bullock, of Hastings, Michigan. Drs. Downing and Bullock discuss various aspects each time while Dr. Harris uses the question and answer method. In the placing of the add Drs. Bullock and Downing are more fortunate.

Copying Magazine Articles—One very popular method recently is the copying of the articles appearing in the Home Journal, Cosmopolitan and Metropolitan Magazines.

The Pamphlet Method—A number of osteopaths have adopted the pamphlet method, using various folders which can be placed in letters or given to patients. If you have this method we would be pleased to have you send your folder, as we are making a collection of such.

A Kind to be Condemned—The following looks like the physician either did not have the practice, or could not make his collections. It is from a California practitioner:

For Exchange—Graduate Licensed, Osteopathic physician; 6 years in practice; will exchange treatment for fine tailoring. Address E. Box 173. Times Office.

* * *

OSTEOPATH OR OSTEOPATHIC PHYSICIAN.

Several responses to the editorial of the October Journal have been received, among which, the following are notable:

We are Physicians—Anent the appellation of an osteopathist: We are poorly enough understood by the dear public, at best; classed with the dentists, opticians and chiropractors as useful to consult for certain conditions but not looked upon as general practitioners, as the homeopaths, for instance, are. We are, or should be, physicians in the fullest sense of the term and should so proclaim ourselves; but as there are different schools of therapy, we should designate our particular system by prefixing the word "Osteopathic." The terms "Osteopath" or "Osteopathist" do not meet the requirements.—Fraternally, F. I. FURRY, Osteopathic Physician.

Osteopath is Good Enough—I see by October number you have started something. Didn't the Founder name it. Don't Pap say Osteopath. What does he think about his child being nick-named. That reminds me. You know there used to be just dozens of Mary's. Of course they didn't all have lambs but now there are no Mary's or Lambs, but Marys and poodles. Goodness knows the laity have troubles enough trying to say Osteopath, but when you add the ist, their distress is awful. Osteopath for me. Yours truly, HARRY PHILLIPS, Osteopath-ist Physician.

Physician Means to Heal—I think Bunting right. We should be known as Osteopathic Physicians. Why? Because we are physicians in the true and only true sense of the meaning of the word (to treat).—Yours, M. Hook, Osteopathic Physician.

From an "Open" State—To nine-tenths of the people the word "Osteopath or Osteopathist" has no meaning. They do not know if it is a new kind of a flying machine, or a new fangled breakfast food.

Almost the same would be true if the word "Osteopath" was used.

The letters "D. O." mean nothing to even a greater proportion of humanity.

The word "Physician" is well understood to be a healer of the sick, and when qualified with "Osteopath" they at once know that it means a new kind of a "doctor,"—not an M. D.—and at once they "sit up and take notice."

The unqualified use of the prefix "Dr." is prohibited by the laws of this state to any one not an M. D.

I think the medics have some cause in asserting that some osteopaths who use the prefix "Dr." often try to pass themselves as medics—or at any rate say they were M. D. before they became D. O.

As I am meekly law abiding, do not needlessly flaunt the red rag at the medics. Have no desire to be classed with the medics. Do not want them, or any one, to insinuate that I am trying to steal their thunder. I, therefore, never use the "Dr." nor "Doctor."

As I desire that the people should know, unmistakably, that I am a healer of the sick,—a physician, and of the tribe of Osteo, I therefore call myself an Osteopathic Physician.—Respectfully, F. J. FEIDLER, D. O.

Osteopathist is too Long—Why Osteopathist? Aren't four syllables enough? Why add to the burden of the layman who stumbles enough with osteopath and is hopelessly tongue-twisted with osteopathist? And what is gained by it? Does it define itself better? Do we more often say homeopath or homeopathist, allopath or allopathist? Isn't the shorter term more consistent with American life in general in which short-cuts are chosen in speech as in everything else?

As between osteopathic physician and osteopath there is something to be said on both sides. The term physician tells something—that this osteopath, whatever he is, is a kind of a doctor. The whole expression, osteopathic physician, is dignified. But it has the fault of being too long to be always conveniently used on signs and in states where we are not adequately protected by law our friends the medical men take exception to our claim for the title of doctor in any way. Then the question becomes whether to fight for our right to that title or to give in and lie low until we can get our law. That is the situation in Colorado to-day. But that consideration aside, I should say that Dr. John Smith, Osteopath or John Smith, Osteopathic Physician were about equally good, the former having the advantage of brevity and the latter of dignity.

"Them's my sentiments." However I recognize that there is always room for a difference of opinion.—Fraternally yours. CORA G. PARMELEE.

The Whole Subject Summed Up—Personally I prefer the shorter word "Osteopath" and to the initiated this is all-sufficient. But not so to the laity and general public. Far from it; to them neither "Osteopath" nor "Osteopathist" conveys aught of the nature or extent of the practitioners powers or prowess. They, and they are the ones we wish to reach, with one accord and almost universal voice prefer "Osteopathic Physician." This is comprehensive and reaches their understanding.

By it they perceive that the practitioner is a physician, and that is important, for centuries of training has schooled their minds to know that a physician can minister to all of their bodily ailments, not to any particular class of ailments, but all of them.

This is the text of the arguments that were advanced to me when I sought advice as to what to put on my cards, and I profited by it. As I said before, I preferred the word "Osteopath" but after listening to the arguments I have quoted I have since used "Osteopathic Physician". It tells the public that I am a physician; it tells them what kind of a physician I am; and it conveys the idea that I am competent to treat all classes of diseases, and that is why I think it best to use the words "Osteopathic Physician."—Fraternally, WALTER L. BETTEL.

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NUTRITION AS AFFECTING INFLAMMATIONS OF THE MUCOUS MEMBRANE.

Great strides have been made in the practical management of most diseases during the last few years, but it must be admitted, in some respects, mortuary statistics are not very encouraging. Among those diseases, which do not seem to respond favorably to recent therapeutic innovations, pneumonia, bronchitis, influenza, gonorrhoea, gleet, cystitis are notable examples. It is not only possible, but very probable, that treatment is too often addressed to the local disease without due reference to the general condition of the patient. In nearly all of the above inflammatory conditions the morbid processes seem to be localized, but they are not. The local concentration is probably the result of a toxæmia which is a constitutional one and not infrequently affects one or several important organs of the body. If these organs which are so affected are not properly cared for their co-operation in the elimination or neutralization of toxins and restoration of organs primarily involved, will be lacking. Treatment in this class of cases must not only be local but constitutional; for instance, it will not do to depend upon a sedative to relieve a cough nor will any agent which relieves the urgent symptoms of a bronchitis or pneumonia, cure the disease.

In pneumonia a large percentage of the fatal cases are the result of toxæmia and mechanical embarrassment of the circulation. There is, first, a congestion of blood stasis in a portion of the lungs. If the cause is not promptly removed, the blood, which should pass freely from the right ventricle to the lungs and thence back to the left side of the heart, is gradually forced back on the right side, with resulting dilatation, hypertrophy, valvular disease, and general derangement of the circulation. At this stage of the condition, the congestion of the lungs should be relieved by lowering blood pressure without impairing the integrity of the heart and by diverting the blood to other parts of the body and keeping its quality to a normal standard. This same line of treatment applies also to the congestion and inflammatory stages of all the other mucous membranes. To combat the constitutional indications in this class of diseases, it is of the greatest importance to supply to the system a full and complete nutrition which assures normal heart action as well as normal anabolism and catabolism. The local lesions much more rapidly subside under local treatment where the general nutrition of the patient is kept up, than where it is neglected. Resolution of all inflammations from all causes much more rapidly occurs where the constitutional condition is taken care of. How best to obtain this has always been a matter of much concern to the profession, and as a result of clinical study forms of tonics and modes of feeding have been employed, each of value but some more so than others. It has been demonstrated conclusively by a large clinical experimentation that Bovine as a food and tonic in this class of cases gives a most happy result.—Adv.

OSTEOPATHIC RACE SUICIDE.

It has been impossible for me to reply individually to the very many letters from members of the profession in all parts of the country who have written to me in regard to my article in the Journal of last month under the above caption. Allow me to take this opportunity of thanking my correspondents for their letters, and to state that not a single one of them differed in opinion from the views which were expressed in that article. One or two requested me to "continue the fight"—brethren, I have no fight with anyone; I have only striven to point out errors, it is for the profession, individually, in the schools and in the Association to remedy them. I have done all that I started out to do, to point out the dangers which confront us. My work on the matter is finished.

There is one thing, however, which strikes me as so strongly confirmatory of what I said regarding the A. O. A. that I must refer to it. In the same issue of the Journal as appeared that article President Ray of the A. O. A. gives several reasons for joining it, and among the reasons for so doing occurs the following which I break up in sections for consideration and at once let me say that in Dr. Ray I have much faith for a clean administration.

"Are there persons or cliques that are too much in control?" The answer to that is simply an unqualified "Yes," the same persons and the same identical clique which has dominated the affairs of osteopathy since the institution or organization of the association. Then President Ray continues and proposes his remedy, "Come in and let the Association have your services in ousting them." "Come in, nice little doggie and let me muzzle you, get our pretty collar on and then you will be able to do just as you (we) like." To finish the "reason" referred to this promise is now given, "If your ideas and rules for conducting affairs are better than those in use, the profession will burden you with honors." Just think of that, just tell us who is to say "the ideas are better," who is to do the "burdening with honors?" An idea would be proposed incomparably superior to one now in regular employment, along the line of the "Special Control Party" would pass a whisper, then one man would be nodded at, and he would rise and in a tremendously solemn voice say "That which Dr. So-and-so proposes is not by any means a novel plan, it has been suggested to the Trustees more than once, but after due consideration, I may say very careful and thorough consideration, it was decided to be impractical. I may add that the matter is now under consideration to correct that which the good Doctor (here the voice trembles) alludes to, but the plans of the trustees are not complete." That shuts the thing up for a year! Who has not seen that done, not once but fifty times? "Burdened with honors by the profession," did I not point out last month how the honors go? It is perfectly true that the statement of the President in the third last paragraph of his "Reasons for joining the A. O. A." is true—"what a power our A. O. A. would be if it contained all of the good material that we have in the field." That is true, we want it, but there are very many strong, good men in the field who feel just as I do that as things are they are more comfortable outside that organization. I trust we will see as much advance over present conditions as President Moore's term of office showed over previous conditions.

A few years ago, only three or so, the A. O. A. demanded that the period of study be raised to three years, "as it was impossible to get the proper education in two." So far so good. At that time such a change meant a vast peril to the American School as it was not then prepared to make the change, Dr. Charlie Still plead for a year's time to prepare for the change; but no, one man in especial of the "Perpetual

Board of Control" was especially firm, he would listen to no delay. But that very man sent in at once his nephew to take a course in the A. S. O., telling him that "if you enter now you will get through in two years and that's plenty, if you wait till next term it will take you three years." That sounds pretty hard but it is true and has been acknowledged above the signature of that same man. Now, since we are at it, we all acknowledge that two years is too short a time to get a good osteopathic education, but will anyone give to me the name of any individual, a member of the higher and inner circles of the A. O. A., especially of those who were so anxious for higher education and a longer school term a few years ago, who has ever, at any school, taken a Post Graduate course to lengthen out his confessedly, weak and imperfect two years' of instruction to that magical three years which was declared absolutely essential for even the slightest knowledge of osteopathy. Personally, I hope to see a four year's course, but I doubt very much if we will ever see the Solons of our profession crowding our academic halls in their thirst after knowledge.

Once more let me thank my correspondents and assure them that I by no means believe that osteopathy will go to the wall if the profession awakes to its danger, acts and acts quickly. My criticisms were not directed at the osteopathic profession but at some of its constituent parts, with the eradication of some elements, the alteration of others and the determination on the part of all of us to work for osteopathy—good must come, but it will take effort, earnest, honest effort, then the reward is sure. The other course taken,—I can see nought else save what was stated last month.

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WILLIAM SMITH.

DR. GEO. STILL SUGGESTS A BIG OUTING AFTER THE CONVENTION NEXT SUMMER, AT CAMP OSTEOPATHY.

Next summer, if the convention is held at the usual time, we will be in a locality which is, compared to the most of the country, ideal at this time of the year, and to those who desire to go for an outing and a rest after the convention this is the ideal country.

I possibly don't know the State of Minnesota as well as some others, and yet, along with several others, I have selected it as my permanent address, during those few days or weeks per year that I can secure for rest and recreation, and if, next summer, I can help some of the overworked practitioners, who are not otherwise engaged, to select an ideal side trip, I want to do so. To the man who likes a real outing, I particularly appeal. To the man who likes Black Bass fishing, Grey Bass, Little Mouth Bass or the Tiny Rock Bass, I have a message. The man who likes to troll for pickerel or who likes to catch his own wall eyed pike an hour before dinner; also the man who likes to fill the boat with one to three pound croppies and perch, that man has a letter waiting for him at Camp Osteopathy, Crow Wing Co. Minn., and the man who likes real fishing—Muscallonge trolling; there are muscallonge waiting for him in Lake Emily that were born the year osteopathy was discovered. Now those who like the summer resort hotel can locate themselves by using the Railroad folders, but those who want to go for a real outing, where the lakes aren't fished out, drop me a line. Camp Osteopathy and the 1908 Ranch near Emily, Minn., cover almost a thousand acres including three miles of river and lake front, and one nice island and are in reach of 24 other good lakes from one and a half to six miles long. I am not running a hotel, but a camp for my own and my friends' pleasure, and those interested, I will help arrange for accommodations in advance. Especially I would like to have the class of 1908 come up and camp on their own ranch. The best fishing in this part of the country is in the middle of August and September and the wild ducks and geese which nest here and further north are most edible in September and late August.

Another nice group of lakes where you won't be an entire stranger are near the home of Mr. Jay Curtis, of the Junior class, A. S. O.

August or late July in most parts of the country is usually very warm, and yet I judge that August has been so regularly selected because it is the time when most practitioners have the least patients and the locations have been selected partly on account of the side trips, and yet with the exception of the Denver meeting and part of last summer who has enjoyed the side trips like they would have at another season?

We have been to Put-in-Bay in August and seen the Great Lakes; we have been South in August and viewed the scenes of the late unpleasantness; we have been to Norfolk in August and seen the Atlantic Ocean and the place where the fleet once was; we have been to Cleveland in August and seen Cleveland; we have been to Kirksville in August and seen the Old Doctor and each time we have sweltered, except that, by a miracle of the weather, it was comfortable in Kirksville, after the first two days, last summer.

Next Summer, however, we will be where the weather won't bother us, and the side trips are all from a few to a few hundred miles further north. Minnesota has 10,000 registered lakes and most of them in the north part of the state and most of them good fishing and the only difference between those near Camp Osteopathy and the others is that "ours are the best." If you like real camping, come up and try them.

If you want to retain the true osteopathic atmosphere, come to Camp Osteopathy where we have already named every cave, beach, island, hill, etc., something that reminds one of home.

Fraternally, G. A. STILL.

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ANOTHER VIEW OF APPENDICITIS.

EDITOR JOURNAL OF OSTEOPATHY, Kirksville, Mo.

I have read article in November number on Dr. Littlejohn's address on Appendicitis. I fully agree with Dr. J. H. Tilden, that no case of appendicitis is operative. The secret of appendicitis treatment is in emptying the caecum.

Usually physics have already been given before the doctor is called. Use high saline enemas, and manipulations, in any way indicated, gently at first, deeper later, but empty the caecum as soon as possible. It may take only few minutes or several long treatments within a few hours of each other. Empty the caecum as soon as possible. That is the key to the situation.

Remove the obstruction to the outlet of the appendix and the cure is certain.

Abscess in the appendix, like an abscess in other parts of the intestinal tract, will empty inwardly, if given a chance, because the inner layer of intestinal wall is the weakest, offering less resistance.

After the abscess breaks, high enemas should be quickly given repeatedly, to prevent absorption of the pus and consequent peritonitis.

In 1906,—the "crazy appendicitis" year,—I treated, and cured, sixty-four cases after each had been ordered for an operation by an M. D., some of the cases had even been abandoned to die, as hopeless. I have never lost a case of appendicitis.

I like appendicitis cases. Get great credit for a simple affair. I would rather cure a case of appendicitis than a hard cold. Appendicitis is almost a joke. The spinal inhibition simply desensitizes the nerve, allays the pain, acts as a temporary anaesthetic. Is very valuable for that reason, but has no curative effect.

After abscess is formed care must be exercised to avoid rupture, but the caecum can be emptied. After pus formation surgical interference is very dangerous, almost always fatal.

Empty the caecum.

F. J. FEIDLER, D. O.

NEW YORK NEWS ITEMS.

Dr. I. T. Whitney, of Upper Montclair, N. J., has been laid up by a sprained ankle, but is again able to attend to her practice.

Dr. O. A. Barrett, recently had a serious fall in a Philadelphia department store, which kept her from her practice for several weeks. She is now able to do a little work but it will be some time before she is in good condition.

Dr. Lillian Held, of New York City, shortly goes to Europe for an extended tour.

Dr. George Riley has found it necessary to double his office room and now has one of the finest suites in New York.

Dr. E. M. Herring has removed from 273 Lenox Avenue to a four-story mansion at 102 West 123 Street, N. Y.

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PACIFIC COAST NOTES.

Dr. Susan Balfe has been joined by her sisters, Eleanor and Anna, who came for a visit and rest, but who have decided to remain permanently and the trio occupy a suite of rooms in the Mason Building.

Dr. Nettie Olds Haight is taking a much needed vacation of a week or so in the country. The Drs. Balfe are caring for her practice during her absence.

Dr. G. G. Paul of San Diego is a visitor in Los Angeles this week. Dr. Paul has a good practice in San Diego and it is a matter of interest for his old friends to meet him again.

Dr. Ralph Miller of the class of June, 1908, of the Pacific College of Osteopathy has just returned from a trip to Europe. Dr. Miller spent some time in the hospitals of Vienna and in that way acquired wide experience in skin diseases. On his return he presented the Pacific College with a magnificent collection of slides, showing pathological conditions. These slides were prepared in Vienna hospitals.

The November meeting of the Los Angeles City and County Osteopathic Association was held at the Pacific College of Osteopathy on the evening of the 16th. The early part of the meeting was devoted to an exhibition of lantern slides, which had been prepared by Mr. Roy Crist. These slides were devoted to histology and anatomy. The rest of the evening was devoted to an address by Dr. Miller, in which he described his European experiences. In the absence of the President, Dr. W. J. Hayden acted as chairman of the evening.

The Biological Section of the Academy of Sciences met in the histology laboratory of the Pacific College of Osteopathy on the evening of November 10th. Dr. E. L. Leonard spoke in a most instructive and interesting manner on bacterial cultures. The next meeting will be held in the same place on the evening of December 14th.

Dr. Smith's very timely and thoughtful article in the November number of the Journal of Osteopathy has been carefully read by more than one Pacific College osteopath and the wisdom of his views is evident. It is of course a serious question as to the means of profiting by the suggestion which he has made, but it is evident to us all that better schools are needed much more than an additional number of schools and that one strong college is much more valuable than two weak ones.

There has been considerable talk of changing the place of meeting of the City and County Association from the Pacific College to a more central place. Up to the present time, however, no definite arrangements have been made for changing the place of meeting.

LOS ANGELES NOTES.

Dr. Dain L. Tasker, who is a member of the California State Board of Medical Examiners, addressed the students of the Los Angeles College of Osteopathy in his usual able manner at a recent Tuesday morning assembly. Dr. "Billy" Laughlin has also favored the L. A. C. O. students in like manner.

Dr. L. L. Phelps has returned to sunny California after a year's absence in Nebraska, where he has been recuperating from a period of ill health. He will resume practice in Monrovia, Calif.

Dr. E. H. Jones has located in Bridgeport, Wash.

Dr. and Mrs. W. V. Goodfellow have removed from La Morado Appartments to Boyle Heights, where they have equipped a fine suite of offices in the new Bank Bldg., corner of First and Cummings streets.

Dr. Frederick H. Martin has removed from Los Angeles to 230 N. Garey Ave., Pomona, Calif.

Dr. and Mrs. P. J. Volkman entertained recently at an informal wedding reception, at their home, for Dr. and Mrs. A. L. Sherwood, who were married Oct. 12th.

Dr. and Mrs. A. L. Sherwood have departed from Los Angeles for Oakland, Calif., where they will reside opening offices in San Francisco.

The Iota Tau Sigma Fraternity, Gamma Chapter, of L. A. C. O., entertained the Kappa Psi Delta Sorority and friends at a delightful dancing party on Nov. 20th.

Following is the itinerary of Dr. Forbes' eastern trip up to date: Minneapolis, Minn., Tuesday, Dec. 29, '08; Eau Claire, Wis., Wednesday and Thursday, Dec. 30-31, '08; Kalamazoo, Mich., Friday, Jan. 1st, '09; Boston, Mass., Monday, Jan. 4th, '09; New York, N. Y., Tuesday, Jan. 5th, '09; Philadelphia, Pa., Wednesday, Jan. 6th, '09; Toledo, Ohio, Thursday and Friday, Jan. 7 and 8, '09; Chicago, Ill., Saturday, Jan. 9th, '09; Kirksville, Mo., Sunday, Jan. 10th, '09; Perhaps Denver, Colo., on the return trip reaching Los Angeles Jan. 14th.

An old fashioned candy-pull was enjoyed by the faculty and students of the L. A. C. O. and their friends, during Thanksgiving vacation.

Dr. Mary Marts has removed from Pomona, Calif., to Fresno, where she has associated herself with Dr. Minerva K. Chappell.

This announcement of Dr. Van Scoyoc's death brought regret to not only the Pacific Coast of Osteopathy, where he occupied the chair of surgery, but to the Los Angeles College also, for Dr. Van Scoyoc at one time occupied the chair of Orificial Surgery in the L. A. C. O. He was a man of sterling qualities and his many friends and patients will miss him.

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MASSACHUSETTS CORRESPONDENCE.

The legislative committee of the Massachusetts Osteopathic Society, consisting of Drs. W. E. Harris, George W. Goode, Aubrey W. Hart, Josiah H. Brown, and Gilman A. Wheeler, have sent out to the profession a proposed bill which was unanimously adopted at the last meeting of the society. They say that "it aims to give adequate protection to the unregistered osteopaths now in the field, and will shut out the fakirs and incompetents who find an open door in this state." They urge the "active aid of all in support of the bill." This reads as follows:

Proposed Bill for Enactment by Legislature of 1909.

Section 1. Any person who shall have been actively engaged in the practice of Osteopathy in this Commonwealth prior to July 1, 1908, and who shall present to

the Board of Registration in Medicine satisfactory evidence that he is a graduate in good standing, of a regularly conducted school or college of Osteopathy which has been recognized by the American Osteopathic Association, shall, upon application, and payment of a fee of ten dollars, be given a certificate, provided such application shall be made before July 1, 1909. Said certificate shall allow him the privileges of a registered physician, except that it shall not allow him to administer drugs internally nor to perform major surgery.

Sec. 2. Section 9 of Chapter 76 of the Revised Laws is hereby amended by striking out the word "Osteopaths" in the eighteenth line, (thus taking them from the list of people exempted and make them subject to the law same as other practitioners).

Sec. 3. Osteopathy and Osteopathic are hereby declared to be subject to the same legal construction as the terms "medicine" and "medical" wherever appearing in Chapter 76 of the revised laws.

Sec. 4. This act shall take effect upon its passage.

Your correspondent is of the opinion that the entire profession is favorable to the passage of this bill just as it stands. An unfortunate mix-up at the very end of the last state meeting over a report of the ethics committee may split the society, in which event the bill will fail. However, cooler heads are at work to effect a truce. In matters concerning the whole profession the members thereof ought, through mutual concessions, to be of one mind. Weighing all matters it would seem that the outlook for the passage of this bill is very bright, and that the days of the unregistered osteopath, real or fakir, are numbered.

Dr. E. R. Booth was present at the Freshman reception of the Massachusetts College of Osteopathy on Friday evening, Oct. 30th, and made a very interesting address to the student body. The following Monday evening he addressed the Boston Osteopathic Society. This was the first of a series of popular lectures on osteopathy to be given by this society during the winter.

Dr. Lyman W. Walker, of Glasgow, Scotland, visited Boston this summer, and reported so great an interest in that city in the science which he represents that he was forced to take in, as a partner, Dr. Wilfrid A. Streeter to enable him to handle the practice. Dr. Streeter was formerly located in Worcester, Mass., and had just opened an office in London, when called to Glasgow by Dr. Walker. He left his London office in charge of Dr. Georgianna Watson, formerly of Haverhill, Mass. All three doctors are Massachusetts College graduates.

Interest at the M. C. O. has been focused in the new foot ball team. This is the first team of the kind in the history of the college, and the students are backing it up loyally. Although under a handicap in starting late, it played Cambridge Latin School two very even practice games, and held the heavy and experienced Boston College team to a 9-0 score.

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CHICAGO AND COOK COUNTY NOTES.

Meeting Chicago Osteopathic Association, Nov. 5, 1908—The program committee was authorized to arrange for a series of lectures in January to the association, by Dr. Harry Forbes.

The program of the evening was a discussion on diagnosis and treatment of Functional Nerve Diseases led by Dr. W. Burr Allen. Dr. Allen said that the physicians had been delving in pathological conditions, taking it for granted that they

understood the psychical side of these matters and pretending to use them when it was practical. The time had come when not only gross pathology, but pathology of the individual mentality must be considered and that if the Eddy school, Emanuel workers and others only succeeded in arousing the scientific physician to realize how high his calling was, that their existence had not been in vain.

The discussion was participated in by a number of the profession including Drs. McConnell, Proctor, Kottler and others. In all it was a very profitable meeting.

The Littlejohn Hospital was opened November 1st. The chief of nurses is Miss Sanderson, a graduate of the Garfield Park Sanitarium. She has been under training there during the past three years while the Drs. Littlejohn were attending physicians and surgeons at the sanitarium. A full corps of nurses has been selected. Within the first week the half of the full complement of patients were admitted to the hospital. The hospital looks well and is an ornament to the block in which it is located.

The name of the American College of Osteopathic Medicine and Surgery has been changed to the Littlejohn College and Hospital. This does not modify or alter the charter of the college but enlarges its scope so as to provide for college, hospital and nurses school under a single charter. Provision is thus made for osteopathy and surgery in the College and Hospital as well as in the training School for Nurses. The Junior and Senior classes entertained the Freshmen on Hallowe'en Oct. 31. This is the largest freshman class in the history of the college. A gay set of decorations ornament the room. A program of music and speeches was rendered in honor of the event.

The senior class furnished one room complete in the new hospital. Drs. H. H. and Myrtle Fryette furnished another room. Both of these rooms bespeak the kindly good will and graceful tastes of the donors.

Among the attending physicians at the hospital are Drs. H. H. Fryette, W. B. Allen, John H. Lucas, W. E. Elfrink, Morris Lychenheim, Margaret E. Schramm, R. F. Connor, W. E. Connor, C. H. Morris.

The surgical staff includes Drs. J. B. Littlejohn, E. L. Smith, F. C. Ford, D. Littlejohn, F. A. Leusman, Thomas Griffiths, C. W. Winne, Wm. B. West, R. T. O'Neil.

The hospital is one of the receiving stations for emergency work under city supervision. The first case admitted was a case of a lady run down by an automobile on the street.

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NEWS NOTES AND COMMENTS.

Goes for a Rest—Dr. W. B. Van de Sand, of Bonner Springs, Kans., is taking an indefinite vacation.

Brings Patient to Kirksville—Dr. Sophia E. Hemstreet, of Liberty, Mo., recently brought a patient to the A. S. O. Hospital.

Is Still in Yonkers—Dr. Geo. T. Leeds states that he has two offices, one in New York City, and the other in Yonkers.

Is Proving Claim—Dr. Geo. A. Enos has taken a claim at Cottonwood, S. D., and is engaged in proving it up.

Takes P. G.—Dr. Helen E. Walker states that she is taking a post-graduate at the L. A. C. O. Dr. B. H. White of Salem, Ore., is also at the L. A. C. O., with address at 1017 Berendo St. Dr. White will return to Salem in June.

Accompanies Patient—Dr. Robert W. Rogers of Clearfield, Pa., is absent on a two months trip with a patient.

Goes to Montrose—Dr. Margaret Coleman, P-03, has opened an office on Cascade Ave., at Montrose, Colo.

Opens Office—Dr. T. C. Ewing has opened an office in Buckley, Wash. He is a graduate of L. A. C. O., '06.

Resumes Practice—Dr. Lenna K. Prater, of Springfield, N. Y., has resumed her practice after an attack of tonsillitis.

Recovers From Peritonitis—Dr. Martha D. Foss, of Cincinnati, is recovering from a severe attack of peritonitis.

Active in Church Circles—Dr. F. P. Walker, was recently elected president of the Union C. E. Societies of St. Joseph, Mo.

Will Locate in Tacoma—Dr. Mary Walters, formerly in charge of the A. S. O. Hospital, expects soon to locate in Tacoma, Wash.

Held Rummage Sale—The Ladies' Auxiliary of the Philadelphia Osteopathic Dispensary held a rummage sale 12-13 and 14th of November.

Talks On "Bugs"—Dr. Ethel L. Leonard spoke on "How Bacteria Grow; Cultures and Culture Media," at the Pacific College, Nov. 8th.

Speaks Before the Railway Men—At the Pennsylvania Railroad Y. M. C. A., Dr. C. J. Muttart, Dean of the P. C. O., talked on "The Body at Work".

Will Rest and Recuperate—Dr. Samuel M. Knauss, of Montpelier, Vt., has lost his health, and will spend the winter in the south in an effort to regain it.

Dr Booth Says Osteopathy Is Not New—According to the Boston Transcript, Dr. E. R. Booth stated in his lecture that the principle of osteopathy is old.

American Medicine in China—A medical dictionary has recently been translated into Chinese using one of the popular American medical dictionaries as a basis.

Closes Branch Office—Dr. A. W. Patten, of South Bend, Wash., has found his practice there requires his entire time, and has closed his office at Raymond, Wash.

Talks Straight to the People—Dr. Homer D. Bowers, of Newberg, Ore., in the Graphic of Nov. 12th has a two column letter full of good osteopathic common sense.

Goes to Danville—Dr. McMasters, according to the Aurora Beacon has left St. Charles and Geneva and has located at Danville, Ill., taking the practice of Dr. J. D. Hoyt.

Breaks Two Ribs—The Herald, Boston, Mass., tells of right half-back Cowan, one of the best men on the M. C. O. foot-ball team being out of the game with two fractured ribs.

A Correction—We wish to put straight a misstatement made with reference to Dr. Geo. E. Perkins announced as Haverhill, Mass. The correct address is 755 Boylston St., Boston.

Will Join Her Husband—Mrs. Lumley, who is in school at Kirksville, on graduation, will join her husband, Dr. J. M. Lumley in practice at DeLand, Fla., where he owns a residence.

Purchases Property—Dr. Morten K. Cole is stated by the So. Farmingham Gazette to have purchased property in that city, which he is remodeling to consist of two suites of apartments.

In the Land of Oranges—Dr. S. R. Love, of DeLand, Fla., sends a copy of the Volusia County Record, which tells of dealers buying crops of 10,000 boxes of oranges considering the item of sufficient interest to warrant no more notice than a few line local.

Called in Consultation—Dr. A. E. Freeman, of Cairo, Ill., was recently called in consultation on a special case near Galesburg, Ill. Dr. Freeman says the case is improving nicely.

Opens Branch Office—Dr. J. P. Burlingham of Canandaigua has opened a branch office at 143-4-5 Cutler Bldg., Rochester, where he will practice on Mondays, Wednesdays and Fridays.

Writes in Home Paper—Mr. A. M. Smith, of Petersburg, Va., member of the Freshman class, A. S. O., has a very excellent article on Osteopathy in the Daily Progress, his home paper.

Dr. Pressley Objects to Salome—Philadelphia papers have published extensive notices of Dr. Mason W. Pressley, objecting, as an ex-minister, to the production of Salome in Philadelphia.

Forms Partnership—Dr. S. H. Bright of Johnson City, Tenn., is now in partnership with Dr. W. D. Willard, of Norfolk. Dr. Bright receives a very complimentary notice from his home paper.

Treats the Governor—The Ukiah, Calif. Times stated that Dr. C. E. Pierce was called upon to restore by osteopathic means, the voice of California's Governor, so that he could continue his campaign.

Another Successful Lecture—Dr. William Smith lectured at Missouri Valley, Ia., under the auspices of Dr. Gamble and Gamble. Dr. Gamble writes most enthusiastically of the lecture, feeling himself many times repaid for his expense.

Is Enjoying Good Practice—Dr. Meta Lucas, who is located at the Stuart Hotel, Thomasville, Ga., writes to the Editor "I am reaping the benefits that I received from the Summer P. G. Course, that I took with you last summer."

A Modern Deer Slayer—Dr. W. B. Davis of Milwaukee has braved the wilds of northern Wisconsin, and the dangers of high power cartridges to slay the inoffensive ruminant. Dr. Davis is an expert hunter, and we predict that he will have his usual success.

An Osteopathic Town—Volumes are spoken for the success of Drs. Curl in Paris, Ill., by the number of students from that little city. There are six now in attendance at the A. S. O., and one at another college, and still another expects to enter the A. S. O., January class.

Made a Good Fight—Dr. J. S. Allison states that all the other officers in Monrovia were elected by increased majority except his opponent whose was reduced 21%. Dr. Allison received nearly a thousand votes more than the successful contestant received two years ago.

Buys Practice—Dr. Walter C. Stephens for a long time associated with Dr. D. L. Tasker, has purchased Dr. A. L. Wilson's practice in Fullerton, Calif., conducting the Fullerton office, mornings, and in his Los Angeles office, 526 Auditorium Bldg., afternoons. Dr. Wilson has gone to North Yakima, Wash.

Purchases Another Fine Residence—Dr. C. C. Crampton recently purchased one of the finest residences in Kankakee, Ill., where he is practicing. The house which is located on East Front street, was built two years ago by the president of the Schaeffer Piano Company, no expense being spared in its construction.

On Vacation Trip—Dr. G. W. Pauly and wife of Colorado Springs, stopped in Kirksville, enroute to Florida, where they will spend a short vacation. Dr. Pauly has an excellent practice in his home town being very well spoken of by different patients of the Editor who have taken treatment of the Doctor, while in Colorado Springs.

Successfull Sanitarium—Kansas papers in Hutchison and vicinity contained a good account of Dr. H. C. Hook, who owns a large sanitarium in Hutchison, a \$4,000 residence, three quarter sections of land, besides other real estate and business investments. Dr. Hook started with practically nothing, and has certainly done well.

Goes to Calgary, Alberta—Dr. M. E. Church is in Calgary, Alberta, where his address is Box 156. He is not decided as to locating there on account of the provincial law passed in 1906 which practically excludes osteopathic practitioners. The osteopaths in Calgary make no pretense of being practitioners, not even having door plates.

Goes to Argentine—Dr. Ralph L. West of New York City accompanied by his brother Theodore, has gone to Argentine Republic, to take charge of a ranch recently purchased by Dr. William West of New York City. Dr. R. L. expects to remain in Argentine until there is improvement in his health, which has been broken by his strenuous practice.

Visits Mayo Hopital—Dr. Frances A. Howe, after a visit to the Mayo Hospital at Rochester, Minn., spent a few days in Kirksville and left for the east to visit through the holidays. Dr. Howe wishes to warn all osteopaths against one Dr. A. A. Hubbell of Buffalo, N. Y., an eye specialist, whom Dr. Howe says over charged her, and insulted her on account of her being an osteopathic practitioner.

Pioneer in Manchester—Dr. Stanley Hunter is visiting in Manchester, his boyhood home and demonstrating to his relatives the efficiency of osteopathy. He expects to be there several months, and will thus be the pioneer in that thriving city. While in Philadelphia, Dr. Hunter spoke before the Neuron Society on Importance to the General Practitioner of the Knowledge of the Eye.

Sanitarium to be Investigated—The Denver Republican states that a supposed osteopathic sanitarium in that city was to be investigated on account of a death occurring there. When the officers reached the place no physicians were to be found. In Colorado, any fake can call himself an osteopath, but the practitioners expect ultimately to secure an adequate law, which will rid them of these pretenders.

Good Ethical Advertising—Dr. C. C. Teal sends in an Ad clipped from a paper published in one of the New York City suburbs, which is so exceeding ethical, and shows that the individual has so much to do that we reprint it.

"In order to demonstrate the efficacy of osteopathy in chronic cases, Dr. _____ of _____ street, 'phone _____ will, until further notice, give treatment for \$1 each. Mondays, and Thursday at _____ street, New York City."

He's After Smoke Inspector's Job—Under the above head the St. Louis Republic gives an account of Dr. Still's latest contribution to humanity, a means for burning the smoke thrown off from boilers. This smoke does not ordinarily burn, because the carbon is cooled below the kindling point. Dr. Still's idea is to force the drafts so to converge, that the heat is concentrated and the carbon is entirely burned. Tests on the A. S. O. boilers have proved that the scheme is practical.

Thinks Osteopathy is Not Suggestion—Dr. Harry Ellington Brook, in the Los Angeles Times quotes a physician who says "Autosuggestion is unquestionably the basis of all systems of drugless healing, by whatever name called," and dubs it nonsense, saying that when an osteopath "corrects a lesion in the spine, and you hear the vertebra click back into place, there is no suggestion about that. As well say a plumber uses suggestion in soldering a leaky pipe.

It would be more accurate to say that all drugging systems are founded on suggestion, for any improvement the drugs effect must be through the mind, as physical-ly they do but interfere with the effort of nature to cure."

Gets Results in Paralysis—The Anderson, Ind., Herald of Nov. 24th gives a half column to an account of a paralytic case treated at St. Johns Hospital, by Dr. F. W. Hanna. The patient, a Mr. Bachmann, it seems is aged fifty-one, and for the last six years has been helpless from paralysis. The case was variously diagnosed, and finally an operation was performed for a spinal tumor. Owing to profuse hemorrhage, the cord was left intact, and a month ago, Dr. Hanna accepted the case, he being tried as a last resort. The patient is now walking.

Was Not an Osteopath—Minnesota papers told of one "Dr." Tollman who was supposed to be a Chicago osteopath, locating in New Ulm. In response to our inquiry, he says, "I am not an osteopath or chiropractor, consequently, practice neither. My work is mechano-therapeutics, suggestive therapeutics, etc., which does not come under the above form. If you have information of the kind, you are misinformed. If you wish further information, shall be pleased to submit same. Very respectfully, Dr. P. H. Tollman, M. T." We would like to ask just where these individuals belong in the legislative matter. They certainly should come under some head of therapeutics.

Recommends Osteopathy—The following question and answer appeared in the November issue of Health:

"Would like to know if you could mention some remedy for a stiff neck. It is not a case, as you sometimes see it, of a neck which has to be constantly in one way, but the joints seem to be affected. Do you think this could result from the nerves being somewhat out of order? * * *

Answer—If it were a nervous affection it would be a form of paralysis, and a larger area would probably be involved. Possibly there is some slight vertebral derangement, which a good osteopath would quickly discover, and in all probability, remedy. In the meantime, thorough massage of the neck, first applying a little warm sweet oil will be found of value." * * *

Still Cutting Up—Dr. Murray Graves, of Monroe, La., sends in the following humorous clippings:

"The wanderer had returned to his native heath. He was inquiring of all the friends of his early youth. "And what has become of Bill, the village cut-up?" he asked. "Grown up and married now, I suppose, and carrying the dignity that goes with age and responsibility."

"Bill has the responsibility all right, but he is still a great cut-up. He writes M. D. after his name now, and has the veriform appendixes of half the village in bottles up at his office on Main street."

"John, why are you raising the window? Don't you know that I will be unable to speak above a whisper by morning?"

"Yes'm."

Hospital Day at the A. S. O.—Saturday, Nov. 21st was observed as Hospital Day at the A. S. O., and over \$650.00 was collected by the students in their various methods of tagging. Old Blind Organ Grinders, Dainty Milk Maids, Teddy Bears, and many other unique costumes were in evidence. In the morning the students with the A. S. O. band at the head, formed a parade reaching from the A. S. O., across the railroad on Jefferson street. The Bowling Alleys gave the proceeds of first game played by each player during the day. Many merchants contributed and on the evening of December 4th, exhibitions, wrestling matches, and skating will be given by students at the Skating Rink, the A. S. O. Band furnishing the music, and the proceeds being given to the students ward at the hospital.

A New Method for Locomotor Ataxia—Dr. LeGrand Denslow, of New York, has been studying locomotor ataxia and thinks that the disease is due to an irritation coming reflexly from erosions in the urethra and he has apparently gotten good results on a number of cases given by Dr. A. M. Cunningham in charge of the clinics at Columbia University Medical College, New York. A paper which he read at the academy of medicine Oct. 1st is printed in the Medical Record of Nov. 21st, and is very interesting reading.

Surgeon Trying Osteopathy—Clippings all over the United States have told of one Albert Ashton, of Camden, N. J., an acrobat who dislocated a vertebra causing paralysis. At the Cooper Hospital the surgeon was reported to have reduced the luxation and cured the paralysis. In response to inquires both direct and through our eastern correspondents, we succeeded in getting only the statement that the newspapers had given a sufficient account. The authorities of the Cooper Hospital, apparently are unwilling to furnish any information for osteopaths.

Jersey Jollies—Dr. R. W. Rogers contributes a copy of the Philadelphia North America, in which the cartoonist describes a trip to Vineland, N. J. It says:

"A quiet place is Vineland, they seldom raise the deuce
They take it out in raising grapes and turn 'em into juice.
They put it up in bottles, in demijohns and bags
And though you drink a barrel of it, it will make no jags.
The citizens are thrifty, and law abiding, too,
They go to bed at 9 o'clock, (there's nothing else to do)
Doc. Howell, the osteopath's a most respected man,
And every one takes off their hats to Doc. Cunningham, (*)
(*He is a Dress Reformer and wears a fly paper hat.)

A Good Advertiser—One James Austin Larson, has been extensively advertising in Minneapolis and other Minnesota papers that he cured a prominent railroad man after he had "tried osteopathy in vain." Desiring to ascertain the truth of the statement, it was ascertained that I. B. Richards, Gen. Supt. of Transportation of the Northern Pacific was the gentleman, and writing to Mr. Richards, he said, "I tried osteopathy for several months and got great benefit in a general way, but did not cure me of constipation. Larson did cure me. I took twenty treatments from him, beginning October 1st, and since then have taken no medicine at any time, and am all right and hope to continue so." Since the letter from Mr. Richards was received in the last of November, it seems a little early to announce a definite cure. Mr. Richards says that Larson's method is merely a kind of osteopathy. In this way do people fake on osteopathy and claim they have "something better," thus seeking to steal from the venerable founder his rightful honor.

Cross Bill in Divorce Case—Dr. Ottie M. Maxey, of Springfield, Ill., Nov. 20th, filed an answer to the divorce suit commenced by Dr. Chas. M. Maxey. The Seattle Post Intelligencer says:

"Mrs. Ottie M. Maxey, an osteopath physician, of Springfield, Ill., yesterday filed an answer in the superior court, in the divorce suit commenced against her by Charles N. Maxey, also an osteopath, of this city, in which she denied that she interfered with her husband's business when he was a resident of Springfield, or criticised his diagnosis of cases brought to him. She admits that he left his office and household furniture, for her use, but denies that the horse and buggy that the husband left were his property.

The wife states that for a long time prior to her husband's departure from Spring-

field he had been doing a large business and laying aside large sums of money, and that he secretly deserted her and the 12-year-old son, taking his savings with him.

The complaint of the husband charges that it was a habit of his wife to criticise his diagnosis in the presence of his patients, and that after she secured an osteopathic education at the Kirksville college she returned home and practically drove him out of business. In the reply of the husband, also filed yesterday, he denies that he saved money in Springfield which he took away with him, and tells the court that he left \$500 in the bank for his wife, and has sent her \$140 since his departure in August, 1907. Both parties to the suit ask for a decree of divorce on the grounds of desertion."

Music at the A. S. O.—The big two hundred member freshman class at the A. S. O., embraces a large amount of musical talent, and have considerably augmented the musical organization at the A. S. O. Dr. C. E. Still showed his appreciation of the excellent work being done by the Band, of twenty pieces, by donating them caps and military shirts. The band was quite in demand for campaign work being the best musical organization in Northeast Missouri. The orchestra has about twenty-five members, most of whom are soloists on their respective instruments. This, like the band, is under the leadership of Mr. Dejardin, an expert band and orchestra leader, who is a member of the freshman class. A Choral society with over sixty members is at work on an oratorio, The Holy City, under the leadership of Mrs. Russ Coplantz, the wife of a Junior student. Mrs. Coplantz has studied under some of the leading vocal instructors of the world, and her work with the Choral society gives evidence of her preparation. All of these organizations are under student management entirely, which results in greater interest and a better class of work. At the A. S. O., outside things are not allowed to interfere with the school work, but they serve to break the strain of constant study and give a more pronounced and keener zest for the home study and class room work. The result shows in the high standard of scholarship existing among the students.

Lost Ones—McGee, J. H., Portland, Ore.; McLaughlin, E. Thos., Knoxville, Tenn.; McMillan, Alexander F., New Haven, Pa.; Moody, Effie, Berkeley, Calif.; Moore, Irmi L., San Jose, Calif.; Wheeler, Sarah E., Winchester, Tenn.

Some of Those Brought to Life—Our directory clerk gives the following addresses of those advertised for in October:

Armstrong, Antonia, Granger Bldg., San Diego, Calif.
Bissonette, Corene J., 726 Park View, Los Angeles, Calif.
Bodwell, D. M., Holly, Colo.
Emil, Axel, Granger Blk., San Diego, Calif.
Hampton, Maty E., Holton, Kans.
Hamilton, W. A., Greeley, Colo.
Hansberger, H. S., Deceased.
Isbell, Sid., Plano, Ky.
Lynch, F. J., San Luis Obispo, Calif.
Marshall, Alice, Randolph Bldg., Memphis, Tenn.
Mallory, Emma Doughty, Vaile, S. D.
Perea, Laure D., Los Angeles, Calif.
Phelps, Fannie J., Belleville, Kans.
Shifflett, C. E., Cameron, Mo.
Skinner, Edw., El Paso Bank Bldg., Colorado Springs, Colo.
Smith, R. E., Lyons, Kans.
Stone, W. J., Tupelo, Miss.

EXAMINATION IN OSTEOPATHIC DIAGNOSIS.

Many have inquired as to the scope of the course in Osteopathic Diagnosis at the A. S. O. The following questions were asked by Dr. Fiske in the examination, Nov. 10, the student being required to answer ten.

1. Describe the normal curves of the spine.
 - (b) What is the curve of the spine in utero?
 - (c) When does this curve first change, and name in order the changes as they occur.
2. What is the mechanical center of the body and discuss your reasons for answer given.
3. Describe (a) typical lumbar vertebra. (b) Typical dorsal vertebra. (c) Typical cervical vertebra.
4. What is the normal movement in each region of the spine?
 - (b) What divisions can be made mechanically in the cervical region, and what articulations are included in each division?
5. Where is the center of rotation, osteopathically considered, in the lumbar region? (b) Same in the dorsal region. (c) Same in each division of the cervical region.
6. Discuss the mechanics of the lumbar lesion, and give diagnostic points, discussing the value of each as to accuracy.
7. What are the points of diagnosis with regard to innominate lesions? (b) Give symptoms of a posterior rotation of the innominate, discussing the importance and accuracy of each symptom given.
8. Name the four most common subluxations of the innominate. Discuss the forces producing them, tell which lesion is the most common, and explain why.
9. Give diagnostic points in dorsal vertebral lesion, discuss the relative importance and reliability of each.
10. What are the diagnostic points in rib lesions, in general. (b) In what divisions can the ribs be grouped mechanically, and why?
11. Discuss lesions of the first rib with reference to cause and diagnosis. (b) Same of second rib.
12. Discuss mechanics of lower cervical region. What lesions are mechanically possible, why, and how would you diagnose them?
13. What are the diagnostic points in lesions of the atlas, and what lesions are mechanically possible? (b) Same of the hyoid.
14. Discuss occipital lesions, giving diagnostic points, naming kinds that can occur, and why.

* * *
BIRTH.

Born—To Dr. and Mrs. N. B. Rundal, of Petaluma, Nov. 22nd, a daughter.

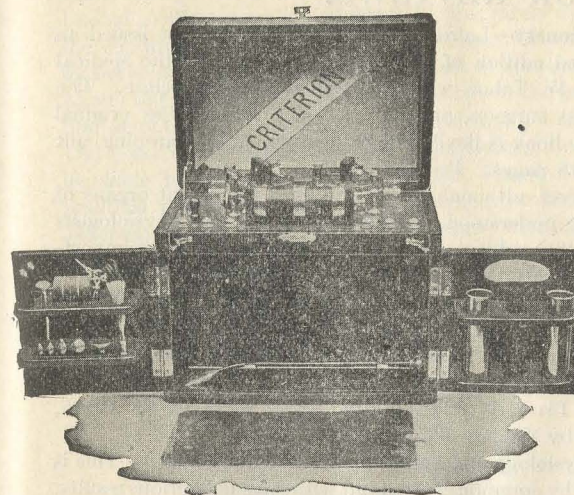
* * *

ASSOCIATIONS.

New York—Rochester District Elects—At the annual meeting of the Rochester District Osteopathic Society held Nov. 22nd, the following officers were elected: President, Helen E. Thayer; vice-president, C. D. Berry; secretary and treasurer, Rose E. Brienstein.

Speaks on Tuberculosis—Dr. Ralph K. Smith, of Boston, read a paper upon the prevention and cure of tuberculosis at the Reading, (Mass) Woman's Club, Nov. 27. The National Federation of Woman's Clubs is making a concerted effort in this direction and the chairman of the federation committee also spoke.

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BOOK REVIEWS.

New Edition of Tabor's Dictionary—Laird & Lea, Chicago, have just issued an important work, the third revised edition of Tabor's Pocket Encyclopedic Medical Dictionary. Edited by Clarence W. Tabor, with Nicholas Senn, as associate. The late Dr. Senn was a world famous surgeon, and his part in preparing the original volume was a valuable one. The book is flexible black leather, gold stamping, gilt edges, cross index, illustrated, 418 pages. Price \$1.50.

A Book on the Liver—The liver, although one of the most important organs of the body, is yet one of the least understood. While anatomists and physiologists have been carefully considering other subjects, they have neglected this most important part of the vital economy. Of late there have been some practitioners who have been devoting their time to this important subject. One of these in particular, is W. Hale White, M. D., F. R. C. P., Senior physician to, and Lecturer on Medicine at Guy's Hospital. The book considers all phases of liver conditions from ordinary jaundice through the various suppurations, degenerations, etc., to emotional jaundice—Common Affections of the Liver, W. Hale White, M. D., F. R. C. P. Cloth, 302 pages, \$2.00 net. Published by William Wood & Co.

A Medical Treatise on the Physiology and Pathology of Love and Passion—This is a subject which has been tabooed by common consent but with most deleterious results. Prudery has reigned instead of wisdom and things that people should know have been shrouded in mystery, even the guardians of health, the physicians, not knowing how to advise their patients because they had only a personal knowledge and knew only a few personal experiences. With the advent of a more rational idea and the common thirst of the laity for accurate knowledge, it is essential for the practitioner to be prepared to speak accurately on these subjects. In 1904 Dr. Talmey published a little work, the result of several years investigation of this subject, and now the Medical Council is selling the third edition. This book begins first with a consideration of importance of love and its history from earliest times. It takes up the evolution of sex, the anatomy of the genitalia, the physiology of the sexual instinct, the pathology of the same including the various kinds of perversion. It then describes the hygiene of the sexual act, discussing as a climax the psychology of the attraction of the sexes for each other, and the influence of this on morality. The authors quoted are poets, physicists, publicists, priests and physicians. And the dates of the texts run from the present back to the myths handed down from the remotest antiquity. The book is well worth every physician's perusal. It is intended only for physicians and medical students—Woman, a treatise on the normal and pathological emotions of feminine love, by Benard S. Talmey, M. D., Gynaecologist to the Yorkville Hospital and Dispensary; former Pathologist to the Mother's and Babies Hospital, etc., New York. With twenty-three drawings in the text, Third enlarged and improved edition. The Medical Council, selling agent, 4105 Walnut St., Philadelphia, Pa. Cloth, 258 pages, \$3.00 net.

Man, Woman, Know Thyself—Dr. Bartholomew has been working for some time on a physiology of the nervous system. At the Tri-state convention he gave a lecture on this subject, illustrated with stereopticon views, and he has since given the same lecture to other associations.

In his text he takes up the anatomy of man briefly in general, considering his pathology and spending considerable time on the nervous system and its relation to the different parts of the body. Several chapters are devoted to the effect of eye strain, and one to especial treatment of nervous diseases. He says, "I have treated

nearly 650 patients since June, 1900 approximately 500 of these were nerve cases. I failed to effect cures of possibly 10%, but rarely ever failed to benefit to some extent the conditions of even these extreme cases. Every case of paralysis was preceded by nervous prostration, which was result of continued abnormal thought or excesses. About 150 cases were due to structural effect, the predominating cause being a deviation of one of the innominates," and draws a number of conclusions from these. The book is intended chiefly for practitioners, but is written in language comprehensible by the laity.—Man, Woman, Know Thyself; an illustrated treatise on practical psychology for both the medical profession and the laity, by Dr. Elmer Jefferson Bartholomew. Cloth 225 pages with 32 illustrations and plates. Post-paid \$2.15. Order of the author, 161 State St., Chicago, Ill.

* * *

Doc Bing cured cancers by the score
He made consumption "git."
And epilepsy—he cured more
Than ever fought a fit.
Paralysis he thought a snap.
Catarrh and rabies? There
He could give pointers to our "Pap."
Just from his office chair.

* * *

Excesses in youth are drafts upon our old age, payable, with interest, about thirty years after date.

MAN, WOMAN—KNOW THYSELF

A practical, scientific explanation of thought, its origin and effects. An illustrated treatise on Practical Psychology for both the medical profession and the laity—explains origin and development of the mind—its relation to the body—how force of mind (thought) propels the body—how the outer man is only an expression of his thoughts—how man determines his success or failure in life by what he thinks and does—how the mind directs affairs to a successful issue—how the mind can be developed and directed—tells (with illustrations) all about your body—functions of the different organs of the body—how blood circulates and its office—how food is digested, transported and assimilated—how to eat and breathe—the interdependence of mind and body—how thought is produced—how thought, nerve force or energy is transmitted by the mind through the nervous system to the muscles of the body resulting in speech or action—how your present condition in life, whether in health or disease, is largely the result of your thoughts—how your future condition in this life and the future life will be the result of your

thoughts—how health is maintained—how to recover health when lost—how possible for mothers to give birth to a criminal, genius or saint—how all diseases (including nervous) are caused and cured—how to determine at a glance whether or not there are abnormal conditions or malformation of the eye, and if the patient wears glasses, whether or not they are "misfits"—how students and practitioners of all therapies can diagnose correctly and treat successfully.

A ready reference book containing 32 chart pictures and illustrations with which to make clear to patients the two causes of disease, (mental and mechanical) and their removal. The pictures alone are worth many times the price of the book, when explaining to patients the causes and cure of disease the patient will retain the mental images or pictures and associate with them the explanations.

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RECIPROCITY.

Last spring when the A. O. A. Directory was compiled, an attempt was made to make a complete digest of reciprocal conditions, applicable to the osteopathic profession. This proved a monumental task, but after much correspondence, we present herewith the information secured from original sources to date.

Arizona—Medical practice act makes no provision. Ancil Martin, secretary.

Alabama—"No reciprocal relations can be established before meeting of State Medical Association in April, '09. W. H. Sandus, State Health Officer."

California—"There is no reciprocity at all in this state." Chas. L. Tisdale, Sec'y.

Arkansas—No reciprocity allowed. C. L. Fagan, secretary.

Colorado—"There being no law, the question has not been raised." Geo. W. Perrin, Sec. C. O. A.

Connecticut—Practitioners of three years standing in other states may receive license at discretion of the board. Question of reciprocating is now under consideration. W. A. Wilcox, Sec.

Delaware—The law provides for reciprocity at discretion of board to those having licenses from boards of equal standing, but has not been construed with reference to an osteopath. The question is now under consideration.

District of Columbia—There being no law there is no reciprocity.

Florida—"Every one must take examination." J. D. Fernandez, Sec. "We have no law regulating practice." We are governed by court decision. J. S. Blair, Sec. State Association. (The state board will examine osteopathic graduates on all subjects and if they pass examination they will receive a full license, or the applicant can refuse to take examination on the grounds that osteopathy is not specifically mentioned. Dr. W. H. McCoach is the only one we know of who has taken the examination. Ed.)

Georgia—No legislative enactment, the association recognizing all legal qualified osteopaths. The secretary is in favor of a rigid reciprocal clause in acts.

Idaho—Reciprocity on payment of \$25.00 at option of board to regular practitioner in practice five years, or holding license from examination from state having equivalent requirements, E. G. Houseman, Sec.

Illinois—No osteopathic reciprocity. J. A. Egan.

Indiana—Reciprocity on examination to D. of C., Ga., Ill., Ia., Kans., Ky., Me., Md., Mich., Minn., Mo., Nebr., N. H., Ohio, Tenn., Texas, Utah, Vt., W. Va., Wis., Wyo. Must have been in practice one year preceding application. Must be graduate of medical college in good standing with Ind. state board. If graduate since Febr. 1st, 1903, must have entrance credentials sufficient to admit to State University of Indiana without conditions. Temporary license is issued and after six months residence, full certificate. "There is no distinction or discrimination against or in favor of any sect of healing art." W. T. Gott, Sec.

N. B.—Several of these states, it will be noted refuse to consider osteopaths in reciprocity.—Ed.

Iowa—"There is no provision for osteopaths for reciprocity." Louis A. Thomas, Sec.

Kansas—"I am willing to reciprocate with any state which has actually the same requirements that we have." R. A. Light, M. D., Sec.

N. B.—Since the law provides that any graduate of a legal school of osteopathy with a course of four terms of five months each, in two or more separate years, may receive license on presentation of diploma, there is no need for reciprocity.—Ed

Still National Osteopathic Museum, Kirksville, MO

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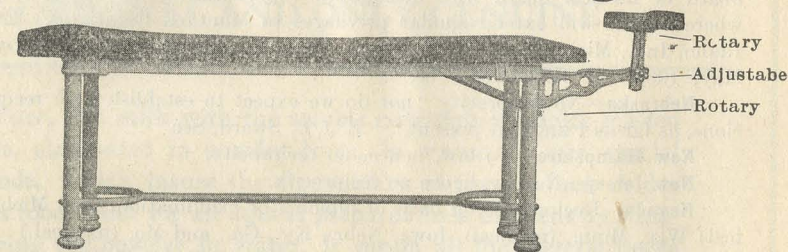
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the end of the table and swing his feet in the air at a cost of your own strength. Write for descriptive circulars and prices.

DuBois book on psychic treatment of nervous diseases is the best and the latest, no Osteopath can afford not to read it. It is a book recommended by Dr. Gerdine, the Professor of Nervous and Mental Diseases at the A. S. O., and the authority of the profession on that subject. Price \$3.00.

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Kentucky—"You may secure the information from the Journal of the A. M. A." J. M. McCormick, Sec.

N. B.—Kentucky belongs to the American federation of reciprocating boards, and by provision of the act practice of medicine includes osteopathy.—Ed.

Louisiana—Reciprocity at discretion of the Board. Paul W. Geddes, Sec.

Maine—No law, consequently no reciprocity.

Maryland—No law, and no reciprocity.

Massachusetts—"I have the honor to say that Massachusetts holds no reciprocal relations as to practitioners of medicine with any state." E. B. Harvey, Sec.

N. B.—There are two constructions in Massachusetts, one which permits osteopaths to practice without registration, the other regards them as a school of medicine.—Ed.

Michigan—Will be glad to reciprocate with any state having the same standard, providing the said state is willing to grant the same privilege. The State Board has passed resolutions urging reciprocity be allowed any three year graduate with full credentials to take examination in his own state and move to another state without examination. At the discretion of the board. F. H. Williams, Sec.

N. B.—Dr. Williams calls attention to the difficulty of reciprocity arising from the difference in laws as in the case of Indiana, which refuses because it requires a four year course as against a three years in Michigan.—Ed.

Minnesota—License at discretion of board to qualified practitioner who has practiced for two years under similar board. G. L. Huntington, Sec.

Mississippi—At last meeting, all orders to reciprocate were rescinded. S. H. Lane, Sec.

Missouri—Reciprocity to those having certificates by examination from boards with equal requirements. J. H. Crenshaw, Sec.

Montana—Reciprocity to licentiates by examination of similar osteopathic board or medical board with osteopathic representative and equal requirements, where boards will extend similar privileges to Montana licentiates. Extended to Idaho, Ind., Mich., Minn., N. C., Tenn., Vt., Wis., and those examined by Mo. since May, 1908. L. K. Cramb, Sec.

Nebraska—No reciprocity "nor do we expect to establish such reciprocal relations, as far as I know at present." E. J. C. Sward, Sec.

New Hampshire—No law, hence, no reciprocity.

New Jersey—No law, hence no reciprocity.

Nevada—Reciprocate on basis of diploma or examination, with Michigan (medical) Wis., Minn., (medical), Iowa, Nebr., Ky., Ga., and Mo. (medical.) On examination only Ind., S. C., Md., Maine, Ill., Tex. and N. H. S. T. Lee, Sec.

N. B.—Nevada regards the osteopath as a medical practitioner.

New Mexico—No reciprocity. C. A. Wheelon, Sec.

New York—"A commissioner of education may in his discretion, on approval of regents, endorse a license or diploma of a physician from another state, provided the applicant has met all the preliminary and professional qualifications required for earning a license on examination in this state." Ralph H. Williams, Osteo. Member.

North Carolina—Reciprocity allowed, but ruled against. A. R. Tucker, Sec.

North Dakota—Osteopaths merely register a two year diploma, hence no reciprocity is needed.

Ohio—"No arrangements have been made by our board concerning reciprocity in osteopathic licensure." Geo. G. Matson, Sec.

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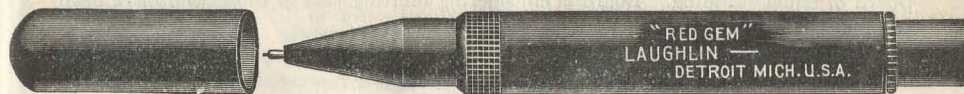
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N. B.—Upon recommendation of osteopathic committee, and payment of \$50.00 a graduate of a reputable school who has been in practice for at least five years in another state, may be granted a certificate without examination, according to law.—Ec.

Oklahoma—Board decided against reciprocity, although the osteopathic member was in favor. H. C. Montague, Osteo. member.

Oregon—Has never had reciprocal relations. R. C. Coffee, Sec.

Pennsylvania—No law, hence no reciprocity.

Rhode Island—No law, hence no reciprocity.

South Dakota—Reciprocity clause was omitted by mistake. State association expect to have it inserted this winter.

South Carolina—No osteopathic reciprocity. Mary R. Baker, Asst. Sec.

Tennessee—Reciprocity allowed to those holding licenses from purely osteopathic board of equal standing. Board is considering limiting this to those who have been in practice for five years.

Texas—Board does not reciprocate with any board composed exclusively of osteopaths, but does with a few states with osteopathic representation, as Wis., Ky., etc., and accepts examination in the branches as examined in a few other states, as Illinois in five or six branches, Ohio in four, requiring the applicant to take the remaining branches. M. E. Daniel, Sec.

Utah—"Reciprocates with Missouri, Me., Minn., Mich., Ind., Ga., Kans., Wis., S. C., Iowa, Ill., Colo., Ky., Tenn., and Wyo. The law recognizes no sect of medicine, A student from the Kirksville School, if he has compiled with the curriculum as demanded by our law, and presenting a high school course of first grade would be examined in exactly same manner as other candidates. In therapeutics and practice the examination will be conducted by the osteopathic representative. License would be without restriction. Reciprocity for osteopaths can be only with boards who grant a similar license to practice medicine and surgery without restriction. Our law is based on a proposition that everyone who wishes to practice or treat the sick should have a thorough knowledge in fundamentals. If he has this, his system of therapeutics may be whatever he elects." R. W. Fisher, Sec.

Virginia—"No reciprocity with osteopathic board." R. H. Martin, Sec.

Vermont—Reciprocity to persons presenting license in opinion of board of equivalent requirements, and who have been in practice five years. W. W. Brock, Sec.

Washington—No law, hence no reciprocity.

West Virginia—At present no reciprocity. "Our law provides for reciprocity and the board will comply with it." H. A. Barbee, Sec.

Wisconsin—Reciprocity on the basis of similar law and a willingness to treat Wisconsin applicants as we do those from their state. Reciprocity granted, so far, from Mo., Mich., Minn.

Wyoming—"Basis of reciprocity cannot apply to osteopaths for the reason that the other states will not accept a reciprocity certificate extended to osteopaths by the Wyoming board." S. B. Miller, Sec.

N. B.—There are no prohibitions, osteopaths being regarded as practitioners of medicine.—Ed.

DEATHS.

Died—Oct. 29th, Mr. Franklin F. Parsons, aged 76 years, father of Dr. Carrie Parsons Parenteau. His home had been at Burlington, Ia., since 1852, where he had lived a useful life, holding office in both the town and church for over 50 years.

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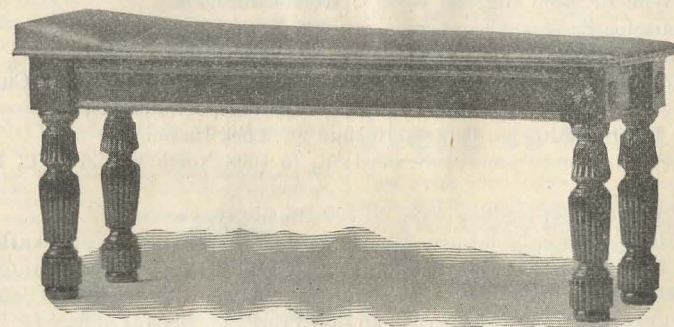
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 Amussen, Joseph S., from 308 Marshfield Ave., to 5239 Jefferson Ave., Chicago, Ill.
 Arand, C. A., 1017 Osborne St., to 22-23 Kingsbury Blk., Sandusky, Ohio.
 Baker, Frank, from Spokane, to Waterville, Wash.
 Bammert, Rena, from Kirksville, Mo., to Clarksdale, Miss.
 Blanchard, James F., from Thermapolis, Wyo., to Suite 3, Hyde Block, Pierre, S. D.
 Burlingham, J. P., has opened branch office at 143-4 and 5 Cutler Bldg., Rochester, N. Y., where he will be Mondays, Wednesdays and Fridays.
 Bliss, Charles W., from 30 Vreeland St., to 51 Heberton Ave., New York, N. Y.
 Bowen, Margaret, from Tazewell, Va., to 103 E. Grace St., Richmond, Va., where she is associated with Dr. E. H. Shackelford.
 Boles, Mrs. Lou, from Alma, to 206 North Vicksburg, St., Marion, Ill.
 Bright, S. H., from Johnson City, Tenn., to Greenwood Bldg., Norfolk, Va.
 Bruce, J. O., from Platsmouth, Nebr., to McCook, Nebr.
 Coleman, Margaret, from Freeport, Ill., to Montrose, Colo.
 Coon, A. S., from Prosser, Wash., to Walla Walla, Wash.
 Cramb, A. B., has located at Wahoo, Nebr.
 Demeson, W. L., from 114 Penn. St., Kansas City, to 703 Central Ave., Kansas City, Kans.
 Dill, Emma B., from Columbus, O., to Freemont Hotel, Los Angeles, Calif.
 Dodson, C. A., from Kane, Ill., to 200-1-3 Rieger Bldg., Little Rock, Ark.
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 Foss, Martha M., Buffalo, N. Y., to 4217 Chambers St., Cincinnati, Ohio.
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 Martin, Geo. W., from 57 West Pennington St., to 104 N. Stone Ave., Tucson, Ariz.
 McCormick, C. E., from Watsonville, to 402 Pearl St., Napa, Calif.
 MacGalliard, A. E. has opened offices in Edwardsville, Ill., at 110a Hillsboro Ave.
 McGuire, Lester A., from St. Charles, Ill., to 315 The Temple, Danville, Ill.
 Medlar, S. Agnes, from 1124 Wallace St., to 719 Real Estate Trust Bldg., Philadelphia, Pa.
 Moershell, R., has located at Marengo, Ia.
 Morgan, Mabel F., from Keosauqua, Ia., to Prophetstown, Ill.
 Nelson, Nellie W., from Sheldon, Ia., to 2268 Knapp St., St. Paul, Minn.
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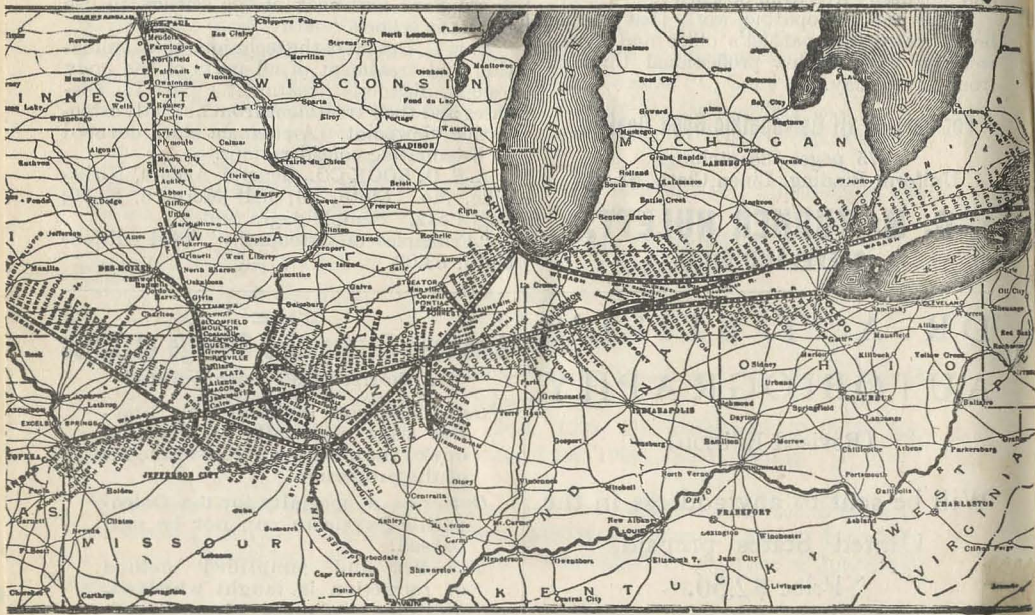
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