

The Journal of Osteopathy

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The Journal of Osteopathy

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Vol. XVIII.

October, 1911

No. 10

CONTENTS OF THIS NUMBER.

PROFESSIONAL CARDS.....	702
EDITORIAL.....	707
SCIENTIFIC DIAGNOSIS, DR. A. McCauley.....	712
TO THE PROFESSION.....	719
EUROPEAN LETTER, DR. F. E. MOORE.....	721
WHAT CONSTITUTES AN OSTEOPATHIC EXAMINATION, DR. T. C. MORRIS.....	724
PROGRESS OF MEDICINE, WARREN B. MACK, D. O.....	728
LEGAL AND LEGISLATIVE.....	733
ASSOCIATIONS.....	736
FORUM.....	743
PACIFIC COAST NOTES.....	746
PERSONALS.....	748
MARRIED.....	756
BUSINESS OPPORTUNITIES.....	758
DIED, BORN.....	758
LOCATIONS AND REMOVALS.....	760

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edited and the pamphlet will take the place of the regular November issue of the Osteopathic Journal, our publication especially for the laity. Send in your order for a supply at once, as the demand will be heavy, and by the advance orders we will be able to better gauge the edition. These articles on Osteopathy, being almost entirely favorable to it, and coming as they do from universally recognized authorities, constitute the best possible advertising for osteopathy, and it is the kind of literature every osteopath can be proud of and should be eager to distribute. Nothing better on osteopathy from recognized medical authorities has ever appeared and osteopaths should avail themselves of the opportunity to give these articles the widest possible publicity.

"Sacro-Iliac Joints, Relaxation of, as a Cause of Sciatica and Backache"

Under this head in the department of "Current Literature," the September issue of the Monthly Cyclopedia and Medical Bulletin quotes R. L. Pitfield in the "American Journal of the Sciences," of June 1911. The article shows that a little glint of light has once more dawned upon a medical mind, and although the "discovery" is thirty-five years in the wake of Dr. Still, it is now published as news and as an important item of current literature. The writer quoted evidently has grasped the importance of the application of one mechanical principle and for the sake of suffering humanity, the medical profession is welcome to this bit of osteopathic etiology. But osteopaths will smile at some of the forms of treatment advocated. They are right in line with a "Wonderful Operation, Setting an Atlas Under Anesthesia"—by way of the mouth. The article is of sufficient interest to quote it in full.

"The author reports cases to illustrate the futility of treating at least a portion of sciatica cases with drugs or any other measures save orthopedic ones. Having seen within two years 20 cases of sacral backache or sciatica that were entirely relieved by treating the relaxed or dislocated sacro-iliac joints, he is led to believe that sacro-iliac disease is the cause of most nerve pain, both of the back and legs, and that true neuritis or neuralgia (idiopathic) of the sciatic nerve is rare. Sciatic pain may be due to reflex causes, such as constipation, pelvic tumors, etc., but he finds it hard to believe that actual degeneration of the sciatic nerve is common.

"That the sacro-iliac joints, our clinical knowledge of which was first systematized by Goldthwait, are liable to strain is well illustrated by the pain which develops in persons who, for any reason, stoop over for a long time. The pain is vastly relieved by straightening up and over-extending the back. There may be simple strain and relaxation of the

joint ligaments, with some backache, due to auto riding or travel in cars or on horseback, or from lying in hammocks or soft beds with weak springs; or a subluxation may follow violent trauma directly applied to the back, or result from strains during football or wrestling, or from tripping or slipping or lifting. Slouching in chairs is also a common cause, as are incorrect methods of walking. The writer has seen three hard labors followed by the trouble. Sudden slipping while rising from bed, chairs, or out of a bathtub has been followed by an acute luxation of the joint. It may occur in slender, weak women and children as well as in athletes. Lateral spinal curvature is apt to cause relaxation of these joints.

"The symptoms consist of backache, especially when lying on the back or stooping, tender sacro-iliac joints, pain in the sciatics or buttocks, paresthesias in the feet and knees; often lameness and even atrophy of the leg or legs; inability to rise out of low chairs and out of bed quickly; resting in chairs or seats with the back supported with cushions. In women this is worse during menstruation.

"In the diagnosis it is important to begin by excluding actual joint disease with tissue change. The presence of the condition is then established by various maneuvers.

"First, have the patient rise, if he can, from a low chair; if he has the true joint relaxation, he holds his back stiff, pushes himself up with his arms, and, finally, with much effort, staggers to his feet. An examination of the back shows frequently a straight lumbar spine, and not the normal lumbar lordosis. This is found in severe cases among laborers.

"Limitation of motion can be shown by getting the patient to bend sidewise from the hips; one side will be more limited than the other if there is a true relaxation or luxation. Though Goldthwait has shown that there is rarely unilateral relaxation, even in bilateral disease one joint is worse than the other and causes more symptoms.

"If the patient is laid on his back and the thigh flexed on the body, it is impossible then to flex the leg on the thigh, as in Kernig's test, without causing pain in the sacro-iliac joint on the same side.

"Grasping the crests of the ilia and separating or drawing them together, disturbing the relationship of the bones of the joint, cause sharp pain.

"Goldthwait's test consists in having the patient stand on one foot and then flex the thigh with the leg extended. During this last the surgeon must put one hand over the suspected joint and the other over the symphysis pubis. The latter will move with each motion of the leg. Then have the patient lie face downward on the bed, grasp the foot on the affected side, and forcibly hyperextend the leg; this causes acute pain in the joint and limitation of thigh excursion on that side from pain.

"The author modifies Goldthwait's test as follows: The patient lying face downward, the examiner slips one hand under him to press firmly the pubic bones, and at the same time moves the leg on the affected side up and down. Preternatural mobility of the pubic joint, caused by the loose relaxed sacro-iliac joint, is thus easily detected.

"In case of doubt a radiogram of the pelvis should be taken, and the difference, if any, between the two articulations noted. On studying skiagrams in this disease the author found the pubic bone, in case of unilateral relaxation, to be higher up on the affected side than upon the other.

"Having established the fact that joint relationships are disturbed, we must reduce the luxation and keep it reduced. This is accomplished, in the first place, by posture. If the case is a slight one, have the patient lie with a pillow under his lumbar vertebræ, or else between two chairs, face downward. If the joints are really dislocated, anesthesia and forcible reduction, and immobilization with a plaster cast may be required. Generally, however, the application of adhesive straps over the dorsum of the pelvis is sufficient. To do this have the patient stand up and then apply the end of an adhesive strap to the skin just under the anterior superior spine; then very forcibly apply the paster to the back. Put on four straps reaching from the anterior spines down to the top of the trochanter and the top of the intergluteal fold. This generally gives immediate relief. Straps worn for six weeks will often completely cure a very bad case. Sometimes it is necessary to encircle the pelvis. Care should be taken not to have the straps come too high; otherwise there will be some tilting if the ilia forward, more relaxation, and more pain. A belt made of webbing, nine inches wide, extending from the trochanters up to the crests of the ilia, encircling the pelvis, and buckling in front, gives great relief. Perineal straps are needed with such belts, to keep them in place. Merrill has devised an efficient brace consisting of a pad over the sacrum to which are fastened by flat springs four side arms encircling the pelvis; this is comfortable and requires no perineal bands.

It must be remembered that these cases are prone to relapse. R. L. Pitfield (American Journal of the Medical Sciences, June, 1911)."

Suppose any ordinary trade Journal or even a common news paper were to publish as "news" or "current literature" a fact important to the trade, which was discovered thirty-five years ago and utilized ever since, what would happen to such a paper, say nothing about the editor? Imagine what would happen if a Chicago Daily were to come out tomorrow with the announcement that "it is now possible to run a street car with electricity," or that a "two wheeled affair has just been invented and there was actually a person living dexterous and intrepid enough to

make it a means of locomotion—it is called a bicycle." Why the offices in the Tribune building would not be large enough to accommodate the sudden influx of spoiled cabbage, over-ripe tomatoes and ancient hen fruit.

On the other hand, how long does it usually take tradesmen, manufacturers or artisans to incorporate new discoveries and inventions and appropriate them no matter whence they come? They would sure to be back numbers in a year if they didn't. But with doctors it is different. All rules of reason and logic applicable to everything else under the sun must here be suspended. They can shut their eyes tight for thirty-five years and wait until the truth is finally proclaimed by "one of the elect," and people, sane thinking people, are asked to regard the publication of such scientific fossils as "news," as an evidence of "superior education," and higher "scientific attainment and progress." The medical mind of today which is dominated by American Medical Association ethics and regulations, is of a peculiar makeup. Following the usual order of things it is to be expected that should a "regular" "discover" that a hot water bottle placed in the nape of the neck has a tendency to relax muscles, volume upon volume would not only be likely to appear dealing with this simple principle, but the discovery would at once be hailed and accepted and advocated by the entire profession even though it is a fact that some one outside, not a so called regular, has been obtaining the same good results and just as effectively for thirty-five years, but in another way, and therefore to be rejected and poo-hoed. A ludicrous and nauseating state of affairs.

We have no desire whatever to ridicule the publication in which the article happened to appear, as many worthy things are contained in the magazine every month and it is one of the best of our exchanges, but we couldn't refrain from analyzing somewhat the conditions which the article suggested and which are wholly unworthy of a great profession.

But more than this, this same medical profession, blind as a bat to light outside, is fretting because all people do not see fit to hail it as the only thing worth while. They try to bully-rag people, legislatures and even the national congress into committing themselves, against better judgment, that this same "regular" medical profession is the only legitimate conservator of the health of the nations people, and it is at present on its knees praying to be "enthroned." Until the medical profession is willing to make progress as other arts and trades progress, and until it is willing to accept and acknowledge scientific facts, no matter what their source, the much boasted "better education" and posing as a "scientific and progressive body" is one stupendous farce, and the establishment of regular medicine via a National Bureau of Health, would be placing in it a confidence totally unwarranted.

Scientific Diagnosis

BY DR. A. McCAULEY, FAIRMONT, MINN.

The subject of my paper would indicate that there are different kinds of diagnoses, scientific and otherwise. It seems like an enormous undertaking to present a paper on such a broad subject, but there are many things which should be brought to our attention.

We are prone to get into a rut and go over the same general form in all cases; find the spinal irregularity or bony lesion and let it go at that. And some of us have never been quite able to get away from the powerful influence of the recognition of a constitutional condition, dyscrasia, in almost every disease, whether acute or chronic. We cannot see a local affection of any sort, with relatively few exceptions, apart from it.

And thus it is that we are inclined more toward the same general diagnosis, and if the diagnosis is general and somewhat the same, the treatment likewise will be general and the same. To a certain extent, no doubt, this view depends upon our previous and early Osteopathic education, and is influenced by the spirit of the age, our surroundings, the atmosphere in which we move and live, and despite everything, our personal idiosyncrasies.

Some men are hardworking, earnest, talented, with a wide experience, and yet they never seem to take quite the same view as others do, even among their peers. Are they right and the majority wrong? It would be unsafe to admit the rule. However, what we can say with truth and justice is that there are men whose experience, training, and study, add a similar fund of common sense, mental balance, so to speak, and rectitude of thought and purpose, makes them think straight and almost invariably reach sane conclusions; practically the best there are in regard to diagnosis, prognosis and treatment. So clear and cool are their perceptions, so well balanced and considered are their argument, so free of all "fads" or "fancies" that, having heard them express a judgment about a case, a very strong impression is usually made on our minds, a tendency almost to share their views; despite, perhaps, our own which are sometimes opposed to them.

It would be absurd, with a subject so broad, to go into detail of general diagnosis; such as, objective and subjective symptoms, mensuration, palpation, auscultation, urinary and microscopic analyses etc.

These all have their place in scientific diagnosis and their use should be our common knowledge.

The object of this paper is to emphasize and encourage a more general use of all modern methods of diagnosing different classes of diseases other than the mere palpating of the spinal column. A diagnosis, that consists in merely a few touches and twists of the spine, is unscientific and as bad, if not worse than the M. D's taking the pulse, looking at the tongue, and asking, "How are the bowels?" All M. D's are not included in this classification, because many of the later graduates in medicine are making their reputations and fortunes by using laboratory methods in diagnosing cases which the older practitioners have fallen down on.

Osteopathic diagnosis, in the narrowest sense of the term, is the detection of abnormal conditions of the joints and their contiguous tissues, or the finding of anatomical, mechanical defects, which cause abnormal functioning. This method of diagnosing is distinctly in advance of the older schools of therapy and its scope is not yet defined. However, it is not a complete method of diagnosis.

Our watchword has always been "Find the cause of disease and remove it, and Nature will do the rest." Unfortunately the detection and correction of mechanical causes does not always suffice. We must recognize and take into consideration other causes of disease. Tissue changes of such degree and character that know no resolution or regeneration, may result for severe or prolonged irritation so that spinal treatment is of no avail.

Granting the great importance of causes as an indication of treatment, the fact remains that the most essential consideration, when diagnosing a case, is not what is the cause but rather, what is the nature of the disease; what pathological process is taking place; its location, extent and what is the usual outcome.

Diagnosis from the spine alone is inaccurate as to the nature of the pathology and location. All diseases are not of spinal origin but some diseases are causes of spinal lesions. A continual irritation of any viscera may cause a spinal lesion, making the spinal condition an effect rather than the cause. Then to attempt to correct the spinal lesion without due attention to the cause, is getting back into the old rut of treating symptoms as much as the M. D's administration of a hypodermic of morphine to relieve pain, without ascertaining the cause. As an illustration I will cite a case:

A patient came to me, who had consulted nine Osteopaths and six M. D's in Maine, New Hampshire and Vermont. He complained of pain in and around the knee. The Osteopaths all agreed that the pain

agnosis. Disease, in itself, is unnatural and to determine the exact pathological conditions present, we must resort to unnatural methods.

To be able to do anything at all for carcinoma of the stomach, the condition must be recognized long before a tumor in the epigastrium is palpable. When this stage is reached, there is absolutely no hope of cure, while by analyzing the stomach contents, when malignancy is suspected, there is some chance of surgical procedure benefiting the condition if present.

Pardon the introduction of another case report but I think there is nothing so convincing as case reports, and I believe we should all keep a record of cases and report some of the blunders of wrong diagnosing as well as the successes of correct diagnosis.

A woman of forty-two, complaining of anorexia and pain in the epigastrium, also referred to the mid-dorsal area, frequent emesis, and general run down condition, was assured by several medical men in clinical examinations, that there was nothing seriously wrong; that the condition was due to a general nervous breakdown, and the menopause coming on. They advised a change of climate and rest.

As it was the fall of the year, she went to Florida. While there she consulted an Osteopath, who located the cause of her trouble in her spine and assured her that she could be cured in three months by Osteopathic treatment. The promise was too much for her, so she consulted another Osteopath who happened to belong to the broader class, and who advised her to consult a reputable physician who was prepared with all laboratory equipment for diagnosis.

This she did and the result was the finding of an absence of free HCl, the presence of lactic acid, desquamated epithelium and traces of blood. A gastroscopic examination was also made and with these and the history of the case, a diagnosis was made of diffuse gastric carcinoma of the posterior wall, inoperable, and a prognosis of three to eight months of life.

She then consulted a surgeon who evidently needed the money. He did an exploratory laparotomy, but on section, retreated in dismay, leaving the tissues in situ. The patient died four months later.

These cases are not unusual and can be duplicated many times in the records of most D. O's who have practiced a few years. What should we learn from these cases? If we are to advance, we must profit by the mistakes of the past and not be satisfied with making superficial diagnosis in all cases alike.

Since it would be almost impossible for every D. O. to have a completely equipped laboratory for special diagnosis, I believe we should have

specially trained Osteopathic physicians, with all necessary equipment, in every city of moderate size, to make our laboratory diagnosis for us instead of having to refer our patients to our friends, the M. D's.

While we have a splendid record of cures and pick up many of the medical mistakes, there is no reason why we should not use laboratory diagnosis. It is as necessary to Osteopathy as to any school of medicine. Down in Iowa, I am sorry to say, we have a few practitioners who have not even a urinalysis outfit in their office. I hope this is not the case in this state. A doctor's office, regardless of school, that has not the necessary equipment for at least the simpler tests of a complete urinalysis, is not worthy of the name. The day is fast approaching when the microscope will be almost as much of a necessity as a phonendoscope or speculum.

The diagnosis of acute diseases, especially of children, is sometimes very difficult; especially before the characteristic symptoms develop. It is not wise, and sometimes impossible, to absolutely diagnose an obscure, acute disease during the first visit, even if the parties concerned are anxious for a name of the trouble. If, after a thorough and complete physical examination, nothing characteristic is found, it is well to defer the naming of the disease until something definite develops.

In many of the acute diseases of children, the symptoms are so indefinite that an exact diagnosis is impossible during life, and even the autopsy may throw but little light upon them. So it is well not to be too hasty in pronouncing a certain line of symptoms as being positively indicative of a certain disease, then you will avoid the embarrassment of having a case of chicken pox turn out to be a beautiful case of measles.

We must recognize the different premonitory symptoms and then know when the characteristic symptoms develop; such as, Koplik's spots in measles, strawberry tongue in scarlet fever, rose spots in typhoid, etc.

There are some diseases in which the cry is sufficiently characteristic to be of diagnostic importance. Thus we hear a short catch, suppressed cry of pneumonia; the sharp, nocturnal cry of tubercular meningitis and of chronic bone disease; the moan of chronic indigestion and acute intestinal diseases; the hoarse nasal cry of hereditary syphilis; and the feeble whine of marasmus and atelectasis.

The study of symptomatology has been somewhat neglected in our schools. Why? Because symptoms were not considered of much importance, as they are supposed to be normal to the structural condition of the organism. We say function depends on structure, which is true, and when the body is functioning wrong, we try to determine the cause by finding the deranged structure. We must know what is wrong be-

fore we can give a scientific treatment, and a study of the abnormal functioning can only be carried on by being able to recognize the symptoms. Therefore I say symptomatology is important because a thorough understanding of symptoms is one way, and sometimes the only way of diagnosing disease.

In the diagnosis of chronic diseases of children, we should never fail to examine the pharynx for enlarged tonsils and adenoids, and also the genitalia. It is very common to find pathological conditions in these parts, and they are much neglected by the general practitioner. They are the source of more discomfort and the origin of more minor ailments, than almost any other pathological conditions of children.

There are many signs which show diseases developing in the adult, which we should not overlook in our diagnosis, for instance, the Argyl-Robertson pupil and Romberg's sign in tabes dorsalis, Arcus Seniles in old age and arterio sclerosis; the mask like face and characteristic gait of paralysis agitans; the "whopper jaw" of acromegaly; the stielwag sign of Graves' disease; Heberden's Nodosity in arthritus deformans; the spade hand of myxoedema; Dietel's crisis in floating kidney.

These and many other signs and symptoms of chronic diseases, we should all be familiar with. There is another vast field of diagnosis to cover in gynecology, but since another number on our program is pelvic disturbances, I will only make mention of a few points. It is a field within itself. A very large per cent of our lady patients are suffering from the effects of abnormal reflexes, which are originated in unhealthy pelvic organs and most examinations are not complete without a local bi-manual examination.

There are many remote symptoms of pelvic diseases; stomach, liver and bowel disorders are in a large percentage of cases caused by pathological conditions of pelvic viscera. Not all posterior occipital headaches are caused by atlas lesions. We should not neglect the gynecological examination when there is the least indication of pelvic disturbances, nor take the M. D's diagnosis as absolute. But treat all cases according to our own diagnosis and make that diagnosis as scientific as all the modern methods will afford.

As mentioned at the beginning of this paper, its main object is to promote and encourage a more general use of all modern methods of diagnosis. It is not my intention to be captious or censorious, but the sins of omission are as great as the sins of commission and if we are to advance we should take advantage of all these modern scientific methods which will help to put Osteopathy, the young therapeutic giant, on the highest possible plain of science, so it will eventually completely over shadow all other schools of therapy.

To the Profession

Representatives of the Executive Committee of the A. O. A., composed of Drs. Hildreth, Farmer, and Chiles, met the Osteopaths of Detroit, September, 16th, to consider ways and means pertaining to the next annual meeting in that city. They report everything in fine shape, with plenty of vim and enthusiasm on the part of local members to assure us the greatest reception yet tendered. This is saying a great deal when the San Francisco and Chicago preparations are considered. When it comes to hustle and enterprise, however, it is quite evident that the Detroit bunch doesn't propose to play second fiddle to any aggregation that has hitherto invited the A. O. A. to be its guest. They have studied in detail the methods employed in Chicago to make that meeting such a decided success, and will use these with such improvements as that experience and their own ingenuity may suggest. All committee chairmen have been selected and probably before this is in type the membership of all committees will be completed. The selection of Dr. H. B. Sullivan as Chairman of the Arrangement Committee is a guaranty that no stone will be left unturned to make the coming session one long to be remembered. Then there is Dr. H. E. Bernard. Everybody knows Bernard, and as Chairman of the Press Committee he'll see to it that the press gang know him and know what we are doing in Detroit from the opening till the closing gun is fired. Whatever may have contributed most to the success of the Chicago meeting certain it is that Dr. Farmer's work at the head of the Clinic Committee took front rank. We have his duplicate in Dr. T. L. Herroder who will make this important feature come squarely up to every demand of the occasion. When clinics are on, we are assured subjects will be ready on the dot, so that no breaks nor waits will be experienced with this chairman at the helm.

But why individualize? With Dr. Myers as Secretary-Treasurer, Dr. Ford as Chairman of Entertainment Committee, Dr. Clark Information, Dr. Dorthy Sellards, Reception, Dr. Stewart, Banquet, Dr. King, Reception and Dr. Bennett for Halls and Exhibits, we have a representative set of chairmen who can and will make this meeting, so far as local matters are concerned, a record breaker.

I am informed by Dr. Farmer that the program is well under way, and from intimations as to its character I am free to say that in subject matter and personnel it will be such as we have seldom or never before

had spread before us. Not a note of discord has been struck. With such unity of purpose in a cause so worthy the thought, enterprise and devotion of every member of the profession, our next meeting promises to be our greatest. Let every Osteopath begin now to shape his or her affairs to attend. It means growth, confidence, skill, inspiration.

Sincerely,

DR. J. S. HOLLOWAY, Pres., A. O. A.

THE SNEAK-THIEF IN PRACTICE.

Speaking of ethics among the ethical, the in-good-standing-gum-shoe, indirect pirate is the most damnable and the hardest to punish. He steals your patients by looking shocked when told of some part of your treatment; by remaining silent when he should defend you; by making useless examinations solely to enlarge on your work; by saying "and as your doctor has told you I find"—something he knows you haven't found, neither has he; by delegating his wife or his old maid sister to capture one of your best families by the art of indirect suggestion; who smells of your medicine and, still speechless, changes the Rx; who fails to telephone you when in your absence he has seen your client, etc., ad nauseam. All the time he has said nothing. You can prove nothing, you can do nothing. This predatory party is not unethical—the term is too dignified. He is not a real thief. He is just a puny, petty larceny sneak. Were he a dog the name cur would be a compliment. And yet he's everywhere.—Bulletin Journal.

European Letter

Vienna, Austria, Sept. 16, 1911.

MY DEAR OLD DOCTOR:

Here I am at one of the great medical centers of the world, a place in which the doctors have every possible opportunity to progress, IF, the greatest abundance of material to experiment on when living, and to dissect when dead, will give them knowledge and skill. But we know experimenting results from a lack of scientific foundation and all the post mortems in the world when looking for effects will not reveal causes—so with all the sick, in every phase of disease they can possibly take care of, with the absolute privilege of doing anything and everything they desire in treating those sick, and with the dozen or so autopsies exhaustively carried out daily, in this great general hospital of 2,700 beds, the doctors are still at a loss to provide the world with a scientific foundation for cause and effect. They are doing a great deal in studying diseased tissues. The body is a mere shell when they finish an autopsy, but it is all with the idea of observing the result of the disease process and what it has been, NEVER FROM THE MECHANICAL VIEW POINT. They quickly recognize the condition of the tissues following bacterial invasion. Their knowledge of gross pathology and laboratory pathology is their strongest point. It is almost a mania with them. To an American physician it looks as though they spelled "success" in diagnosing the disease by NAMING it and after death to settle all disagreements concerning diagnosis by a careful post mortem. No matter what the disease, every organ is carefully examined and often bones are removed and examined likewise. Granting that they are providing the world with valuable data, and that students are trained with a keen mental picture of all disease processes, the unfortunate sick are apparently not reaping any of the benefits. In addition to gross pathology, Vienna is probably in the lead in skin diseases, at least in so far as an array of skin clinics is concerned. One need only take this same general hospital to see why this is so. Venereal diseases are rampant. One of the obstetricians informs me that they have twelve thousand confinement cases a year and of this number about sixty-five per cent. are illegitimate. Of course, one must take into consideration that the general hospital serves largely the poor and the ignorant.

In surgery, Vienna and other parts of Europe must hurry up or the United States will take the lead. The verdict of many American surgeons I find is that we have much more skillful and aseptic surgery at home.

Hay and I spent a week at Dresden attending the International Hygiene Exposition and we found it very profitable. There is presented in graphic form everything relating to anatomy, physiology, diet, pathology, infectious diseases, sanitation, etc. It aims to put in tangible shape these subjects so that the laymen can gain practical ideas. Being educational it will serve to clear away some of the mysticism of medicine. One of the exhibits was Primitive Obstetrics, giving Indian ideas among others. I will tell you about it when I see you. Doctor and Mrs. Moellering, who practice Osteopathy in Dresden were very kind to us and showed us the main points of interest in the Exposition. The Doctors Moellering are practicing straight Osteopathy and are the only Osteopaths in Germany. In spite of the fact that medical men in Germany rank high in the world of medicine forty per cent of the people in Germany are treated by Nature Healers, some few of whom are M. D's who have abandoned drugs. Ninety per cent of obstetrics is in the hands of midwives. M. D's. only care for ten per cent of Obstetrical cases. In England the bone setters have so much success that the medical associations are trying to frame up legislation against them, but it appears that they will not be successful for so many laymen have been benefited, the bone setters are able to demand a chance to exist. I cite these things merely to show you the trend of things medical in Europe. Two of the most successful doctors I have seen in Europe were Orthopedic surgeons who operated manually and resorted to laws of mechanics for their results.

I am spending several weeks in practical work in the Lorenz Clinic here under Dr. Werndorff, the first assistant but the work I see there is not up to two other Orthopedic surgeons I have seen in Europe and none of them surpass your son George in congenital hip operations. The sum of it all is dear Doctor Still that your discovery will eventually revolutionize the healing world. They are working in the dark. The people in their distress will see it first and Osteopathy as fast as it grows will meet a grateful public. Above everything else the world needs REAL Osteopaths, not medical Osteopaths. If all Osteopathic Colleges could only realize that their success lies in graduating Osteopaths to follow strictly in the footsteps you have plainly marked, our progress would be more rapid. He and I are coming home more enthusiastic Osteopaths than ever. We are going to establish a practice in Portland, Oregon,

and its foundation and super-structure is to be A. T. Still Osteopathy in as near as we can practice it. And your book on Research and Practice is to be our "Blackstone of Osteopathy" we hope to do our part in carrying the "Flag of Truth." We have not heard from you for sometime but we hope with all our hearts that you are well. No doubt Willie is with you before now. We tried to see him at Edinburgh but he was out of town. We will sail for home next month and after visiting some of the Eastern Osteopaths will stop in Kirksville a few days to see you before going to Oregon.

That was a great convention that Arthur Hildreth had in Chicago and they sure did hurrah for the Old Doctor.

Love for Blanche and George and you all.

F. E. MOORE, D. O.

MY WOODLAND FRIENDS.

As I go singing all alone
 Down woodland paths, so green and cool,
 That end through flickering sun and shade,
 By rushing brook or silent pool,
 The tall trees seem to bend their tops,
 The pine-cones tumble at my feet,
 The nodding ferns stand quietly,
 As though they wished my song to greet.
 And in some dim and shadowy cove,
 The wild lobelia, flaming red,
 Stands listening on its slender stem,
 Or waves a welcome from its bed.
 The squirrel peeps from out the leaves,
 The sun comes stealing through to see
 Who dares to hush the wild bird's song
 And saunter by so carelessly.
 So, as I wander all alone
 Through dusky paths that bend and wind,
 I move amid a company
 Of wildwood friends, most dear and kind.
 —Gertrude Crownfield, in St. Nicholas.

What Constitutes an Osteopathic Examination

BY DR. T. C. MORRIS, SPOKANE, WASH.

To properly define an Osteopathic Examination would demand the description of all methods used by all schools of medicine with added diagnosis that would appear superior in comparative size to the appendage attached to Halley's comet.

The man who improves upon a piece of machinery does not take away any of the essential parts; he adds essentials instead, and makes a more comprehensive working mechanism. It is so in Osteopathy. We must not be so ruled by prejudices against the old methods that we fail to take advantage of everything good which has been worked out by the thinking men of all the years of medical practice. With all that we can do, we can not yet say that we have mastered all the secrets of the human physiology,—there are some things still left for us to learn. The medical profession has been over two thousand years in studying the symptoms and causes of disease and still they have not located all the bearings of the human machine.

As an Osteopath, I feel, however, that our beloved founder, Dr. Andrew Taylor Still, made the most important discovery in the history of medicine when he found that bony lesions played such an important part in the diagnosis of disease. This part of the diagnosis is most important to us, for the Osteopath must rely rather on the lesions he finds than upon the symptoms as they appear in the ordinary way. In fact, I am here to say that the symptoms as they appear to the medical physician oftentimes mean little to us when we make an honest examination into the causes of disease.

Before proceeding with a form of examination which I have found in my practice to be most valuable, I wish to bring before this convention of my colleagues a point which seems to demand of us that we look into this matter of diagnosis most carefully.

There is always danger of the developement of a class of careless Osteopathic operators, men and women who are—we might say—tentatively in the profession for immediate profit—apt to form the habit of what I want to openly denounce from this time on as a curse to the Osteo-

pathic profession, the "general treatment" of all patients. To such an operator, the matter of an examination or diagnosis makes very little difference. Such operators are causing many of their patients and some of the public to look upon the Osteopath as a "masseur," a mere "rubber," as it were.

I sound a word of warning to the profession against this. We must hold scientific treatment of disease by the principles of osteopathy before the world in its true light. I am not and never will be classed as a masseur.

I have a great many patients who come to me and without removing more than an outer garment, lie down upon the table with the question: "Which side do you wish me to lie on?" This shows immediately that they have never been properly examined by their physicians although many of them say that they have been frequently treated.

I think it is a grave error to treat patients without examination as to the specific conditions as they exist. I examine before every treatment and make at least a partial examination several times during each treatment and I really think that it is the only way in which one can give a scientific treatment.

Our success as osteopaths depends not alone upon FINDING, but CORRECTING the conditions.

I do not think we can ignore the medical theory of the general symptoms. In some cases I examine the tongue, take the respiration and pulse. I use the stethoscope for auscultating for the heart sounds as well as for respiration. I ask the patient, if a male, to remove all clothing down to the waist line and if a female, to remove all clothing to the waist line and put on a dressing saque or kimona.

I know many osteopaths do not do this, but to examine or treat through clothing would seem to me to be about like a dentist examining teeth through the buccal or labial surface.

I make an inspection, noting the general contour of the body, looking for anterior, posterior or lateral curvatures or any swerving of the spine. I examine the contour of the chest very carefully.

In palpation, I begin by standing behind the patient and, place one hand on the head and with pressure curve the spine posterior as much as I wish. With index and second finger, I begin at the upper part of the spine and work down to the sacrum carefully, noting any deviation from normal. If I find any lateral curves, I ask the patient to note the comparative resistance between the concave and convex, letting the patient know that we do not guess at conditions. I then allow the patient to sit normal again while I place my hands on the anterior portion of the

ribs beginning from below, and examining upward, noting the relation of the ribs to each other,—whether too close or if there is any dropping down, lapping or twisting.

With the patient still in the sitting posture, I stand in front and, placing a pillow against my chest, I have the patient lean against me while I reach my hands down the sacrum and examine up as far as I can conveniently, noting any differences in the ilio-synscondroses or any of the vertebrae, also posterior angle of ribs. I afterwards have the patient lie on his back, examining the length of the legs,—being cautious to have him lie square on his hips so as not to deceive one's self. In examining the neck, I use both hands and examine the articular processes of the vertebrae.

I also rotate the head and the neck, noting any resistance or deviations. Sometimes I examine the patient's neck with the patient sitting upon the stool, in which case I stand back and to one side with one hand on the forehead while with the other I palpate deep into the tissues and move the head and neck enough to note conditions; or I stand in front of the patient and have him lean forward a little while I make the examination.

Then with the patient on his side with legs flexed, and with the elbow resting on my abdomen, I examine carefully the transverse processes of the dorsal and lumbar vertebrae, also the angle of the ribs. I repeat this on the opposite side of the body. I percuss by the usual methods.

One of the most important elements in the successful treatment of disease under any system of healing is the correctness of the diagnosis. If possible, we should always find the predisposing as well as the exciting cause or causes. I think that we should also give close study to the history of chronic or special cases and we must also remember one great fact,—the human body is a God-made machine, but there are idiosyncrasies in certain patients and we must deal with these peculiarities intelligently and carefully. We must not neglect to analyze the urine for oft-times that is the part that aids us in making a differential diagnosis. I have a case of diabetes mellitus who was treated for some time for typhoid fever. His real condition was not known until they changed doctors.

I must confess that I have not paid as much attention to the analysis of the blood as I should. I consider it necessary in many cases.

I do not say that the practitioner who fails to get at the root of things will fail in doing good. That would be too broad, and in fact untrue, but he or she is in great danger of failure in serious cases where success might be insured by knowledge of every phase of the disease.

In the diagnosis of acute cases, one must be governed in part by the

general symptoms, still they must be careful not to be misled by these symptoms. For instance, in floating or movable kidney, where there is profuse vomiting, or in the case of a misplaced uterus where there is stubborn constipation or frequent micturition, or in the case of dislocation of the hip, causing pain in the knee, these symptoms are easily misleading as they are always reflex.

It is not the province of this paper to go into a detailed account of special or acute cases. I have confined myself to the methods used by me in general practice.

I wonder how many have seen the March number of the O. P. I think that Doctor Still's quotation given in the characteristic cartoon on the front page is a good one for us all to remember,—“Find it, fix it, and leave it alone,” but one of the most important of all is the science of finding. It is the careful diagnosis, the honest examination alone, that will find it.

In conclusion will say:

To diagnose, one must look close;
 Not only look, but feel as well.
 The two combined will surely tell,
 And then correct, though they may yell.
 By doing so we earn our money,
 Though some folks think it very funny
 To be cured without a pill or potion;
 To me its just the proper notion.

Progress of Medicine

WARREN B. MACK, D. O.

Since the beginning of time, one of the principal problems of the human race has been, how to maintain their bodies in a state of health. A list of the various remedies and methods that have been used to bring about this ideal condition, would furnish material for a very amusing book.

Before the time of Hippocrates, the "Father of Medicine," little was known about human anatomy, it being contrary to the religious law to dissect or mutilate the human corpse. It is said that in the year 331 B. C., Herophilus dissected 600 living criminals in his search for anatomical facts.

Primitive medicine consisted largely of magic, witch-craft, and sorcery. Among savages their physicians are conjurers or wizards, who boast that they know what is past, and can foretell what is to come. The "Medicine Man" of the Indians used charms to drive out disease, as do the poor whites and negroes in the South. Mystery is used by "Medicine Men" today, who are not Indians; its principal use is to cover ignorance concerning the structure and function of the human body.

After the age of magic came years of experimenting with herbs, drugs, poisons and other outlandish procedures that possessed no virtue except to relieve symptoms, and in many cases did much harm instead of good. Indeed it was not so many years ago that a sick man falling into the hands of a doctor would be rushed off to a hospital where his veins would be opened with a lancet and a pint or so of badly needed blood would be extracted; the result was that a man who had tuberculosis or pneumonia, or any other ailment requiring his strength to combat, was strained so completely of his vital fluid that he had absolutely no chance for recovery. Once he got into the hands of the doctors, his chances for living were very slim indeed. But there gradually came into prominence medical men who did not approve of this unscientific method of treating disease, and they demonstrated that bleeding was wrong in principle, and that better results could be obtained by more natural means. Thus the old murderous, bleeding treatment came to be abandoned as a routine procedure. One by one the ruffian surgical practices of an early day were given up, until today nature, which is the real physician, is allowed

to effect a cure with no more artificial aid than is absolutely necessary.

The history of medicine has been a history of delusion rather than one of science, and the long suffering public should not be blamed when they exhibit some degree of self-pity or appear a little skeptical of all things pertaining to medicine, since for years they have been experimented upon, cut, bled, blistered, cauterized, poulticed, punctured, plastered, steamed, baked and in fact have been "Done Good" until their confidence in all things medical, is at a pretty low ebb. Many of these things were done because the older schools treated symptoms instead of causes. Hence the creation of new methods of healing, until at the present time we are blessed with nearly as many kinds of doctors as we are with brands of breakfast foods.

If the old theories had been correct, Christian Science, the Emanuel Movement, and many other cults and "pathies" would never have been heard of. The people were not satisfied with the old ways of healing and demanded something else.

In the year 1800 A. D., Homeopathy came as a protest against excessive drugging and it did much to modify the extreme methods of the Allopathic school.

In fifty years many things have been done to advance the healing art; surgery is nearly perfect; bacteria and the causes of some diseases have been discovered; the public are better informed today about the value of fresh air, hygiene and sanitation than they used to be. Systems for treating diseased conditions have come and gone; everything from superstition to rank poison has been inflicted upon us. Of all the remedies used, drugs held first place until a few years ago, when a decided reaction took place and since that time the tendency has been towards drugless methods of healing.

In spite of the fact that drugs are notoriously ineffective, there still remain a large number of people who feel that when they employ a physician and he does not prescribe some drug, there is something radically wrong. Doctors tend to become a habit and some families would see their members perish one by one, without ever daring a change in physicians.

Medicine has always been surrounded by mystery and the mere arrival of the grave looking gentleman with his black bag has, at times, a wonderful effect upon the patient. We have been brought up in the belief that for every ailment there is some rare drug or herb that has the power to cure us, if it can be found. No idea could be farther from the truth, for the treatment of disease by means of drugs has been one grand experiment. Year after year we hear of new drugs and serums being

discovered and widely talked about, then suddenly discarded as useless or harmful. This continual and apparently useless search for new remedies would seem to show the drug treatment is more or less empirical. Consider the countless number of drugs and serums tried and found wanting in the treatment of disease, particularly tuberculosis. After years of study and investigation, it is found that the only cure or help is good nourishing food, exercise and plenty of fresh air. All this goes to show that the body has wonderful recuperative powers and will recover from many diseases if given a chance.

In a recent issue of one of the popular magazines appeared an article entitled "The Passing of the Pill and Powder." In this, the statement was made that 85 per cent of the cases would recover without any treatment at all. It was also stated that every M. D. of repute is today, discounting the efficiency of drugs.

Dr. William Osler, one of the world's greatest physicians is quoted as saying "that so far as he knew, there were only four specific drugs." When asked to name them, he said with a smile, "I would rather not." It is well known among the medical men that drugs are unreliable and palliative, rather than curative, most cures being brought about by general measures, such as change of habit or occupation, diet, exercise, baths and fresh air. In fact the most any physician can do is to aid nature, so that it is only a question of how we can best accomplish this.

Let it not be thought that the object of this article is to belittle the excellent work done in the past and in the present day by members of this old school. Much might be said, if space would permit, in praise of those unselfish and scientific men who died that the world might know the cause of certain diseases. There is also much to be said about the development of the many branches of medicine, the books written, and the accumulation of general medical knowledge; but with all their advancement it must be admitted that aside from surgery, they were very weak in that all important part of medicine, "treatment." The public is not particularly interested in medical theories, they want to be cured.

This lack of scientific treatment for disease was largely responsible for the birth of Osteopathy. Doctor A. T. Still the founder of this new school of medicine, was a practicing physician and a great thinker. He was not given to accepting old theories without question, so after using drugs for some years, he began to realize the weakness of them and to have a lack of faith in the old theories. He felt that there must be some other causes for disease besides the ones he had been taught; that there were ways to heal the sick other than by introducing poisons into the stomach; so for years he studied anatomy, physiology and the human

body until he had an accurate knowledge of how bones, ligaments and muscles, blood vessels, glands and nerves are placed and how these tissues act in health. He trained his fingers until he could detect the slight deviation from the normal. In his studies he found that the spinal joints may become slightly misplaced making pressure on nerves and blood vessels, and in that way cause or predispose to disease. He reasoned that if abnormal tissues were the cause of ill health the sanest method of treatment would be one which aimed to replace them in their normal relations, in other words, fix the human machine.

When Doctor Still announced that he was through with drugs, except for antidotes and antiseptics for external application, saying that he intended to cure disease by manipulation which would adjust the body to its normal relations, he was thought to be mildly insane and was shunned by his townspeople. He lost his practice and most of his money and was compelled to move to another city. The story of his early struggles is a long and sad one, but after he had performed some cures that were regarded as miracles, the people began to understand that his system had merit. Men and women came from all parts of the country to be treated by this miracle worker. After a time he became so busy that he had to have help, so in the year 1892 he obtained a charter from the State of Missouri to teach Osteopathy and started a small school. From this beginning, Osteopathy has rapidly grown to its present proportions; there are eight large colleges, about five thousand practicing Osteopaths and most of the States have legally recognized the science in one way or another.

All of these things were accomplished in eighteen years during which time Osteopathy was ridiculed and bitterly opposed, by the combined forces of nearly all the other schools; but it has steadily forced its way into public favor, until today it is believed by many intelligent people to be the most rational system of therapeutics in existence. The Osteopathic physicians have a very large percentage of cures to their credit and the limits of Osteopathy are still unknown.

If drugless healing was the only claim Osteopathy had to being a new school, it would never have lived, but there is more than this, it has fundamental principles which are absolutely new and more scientific than any other medical theories that have been brought to public notice.

Osteopaths believe that the body contains all substances needed for its own repair and believe the only thing capable of making pure blood is good food, water and fresh air. They believe the body will cure itself of all curable disorders, providing there are no obstructions to a normal nerve and blood supply. To quote Dr. Still "The rule of the artery

must be absolute, universal and unobstructed or disease will be the result." A disturbed artery marks the period to an hour and minute, when disease begins to sow its seed of destruction in the human body. That in no case could be done without a broken or suspended current of arterial blood, which by nature is intended to nourish all nerves, ligaments, muscles, skin, bones and the artery itself.

Osteopaths are possessed by a very firm and unassailable belief in the natural recuperative powers of the body and think their system of therapeutics is a very effective means of putting the body in a condition to successfully combat disease. They believe that if the body is in normal adjustment, disease cannot gain entrance. If this is true, then where can be found a more reasonable and sane method of preventing disease.

It is beginning to occur to many of us that it is a more physicianly duty to keep people out of disease than it is to bring them through it after they are sick. What the future of medicine will be no one knows, but the chances are that the therapy of the future will be mechanical from its viewpoint and in its procedure. Osteopathy is new and it will take years of scientific study and research to develop it to its fullest extent, but it is already shaking the very foundations of the old and established schools of medicine. Young as it is, its principles are as old as the world itself, although in common with every other great discovery, it remained for one earnest mind to first recognize its virtues. If Osteopathy continues to grow as rapidly as it has during the last eighteen years, it will surely be the dominant school of medicine.

Lynn, Mass.

Legal and Legislative

"These are all important, the last especially in these days of osteopaths, Christian Scientists and optometrists, all of whom are practicing medicine without proper qualifications and for pecuniary gain solely. The profession should fight all these back-door entrances into our field of work, not only for our own good, but for the protection of the people against the evils of fraud and incompetence. One standard only, and that a high one, should be insisted on for those who have to do with the important matters of sight, hearing, health and life.

"I wish to indorse the appeal of my predecessor for our state school, agreeing with him that 'it is the one object worthy of our best effort.' And I can not make strong enough my conception of the importance of harmony and efficient organization. This becomes doubly apparent when we observe the activity of that combination of quacks and fakes masquerading under the name, 'League of Medical Freedom.' "

The "one board" idea you will note is emphasized by the A. M. A. as one of the three "essentials." The slap at osteopathy exposes the doctor's ignorance or prejudice—nothing more. His reference to the League of Medical Freedom does not raise out estimation of him in this respect, another "canute" trying to sweep back the ocean's tide with a broom.

Kansas Medical Practice Law Upheld.—The case of John N. Peters for practicing medicine without a license was settled Sept. 15, in district court of the fifteenth judicial district. Peters was found guilty of the charge. The case has been watched with much interest in this part of the state and will be an example in the future. The history of the case follows: Peters had been arrested four different times for maintaining an office and treating the sick without a license. He claimed to be a graduate of an institute of suggestive therapeutics. At the instance of Dr. H. A. Dykes, secretary of the state Board of Medical Registration and Examination, Peters was brought to trial for a plain violation of the laws governing the practice of medicine in this state. This was generally understood to be a test case. Unless the supreme Court gives them a new lease of life the decision in this case will put a quietus upon a horde of unlicensed healers.

Important Bill Will be Introduced.—At the regular meeting of the Mass. Osteopathic Society Oct. 7th it was unanimously voted to introduce into the legislature this year a bill providing for the shutting off of all appropriations of state moneys to hospitals or other institutions which exclude registered physicians of particular schools. The state homeopathic and eclectic societies have been invited to participate in this legislation.

R. KENDRICK SMITH, D. O.

Chairman of the Legis. Com.

Are They Eligible to Serve as Medical Inspectors?—The Franklin school board has been confronted with a perplexing problem which it has put up to the state commissioner of health, Dr. S. G. Dixon. Recently the board advertised for propositions from physicians for performing the duties of medical inspector in the schools and on the first date advertised none were received. The board readvertised that it would receive propositions and only two were submitted. One came from Dr. J. Henry Hoefner, who agreed to perform the duties for 75 cents per pupil, and that the other came from his wife, Dr. Kate Wynne Hoefner, who agreed to do the work for 50 cents per pupil. Both are osteopaths, and Dr. F. W. Brown, a member of the board, stated that for that reason neither applicant was eligible for the position. The other members of the board confessed that they did not know the law and a motion prevailed that the matter should be submitted to Commissioner Dixon for an opinion. He will also be asked to give his idea of what would be fair compensation in a city the size of Franklin. There are practically 1,500 pupils in the Franklin schools.

May Use Title of "Doctor"—An osteopath who administers to the sick and does not prescribe drugs or other medicine to patients in Colorado, need not have a license from the state board of medical examiners to practice, and he is not violating the law when he prefixes "Dr." to his name. This is the substance of the opinion rendered by the state supreme court in the test case brought by the Colorado Osteopathic Association.

Ralph M. Jones was the osteopath in whose name the suit was brought, and it was admitted that the defendant had administered his treatment to patients and likewise used "Dr." in describing himself. In the lower court Jones had been fined \$50.

In revising the case the supreme court said that when the osteopath did not prescribe medicine he was not violating the law. The court called attention to this clause in the statute in making its decision: "Nothing in this act shall be construed to prohibit, nor shall it apply to the practice of osteopathy when not prescribing medicine or administering drugs."

Now, the osteopaths may use "Dr." in front of their name and D. O. (Doctor of Osteopathy) after it, and be entirely within the law.

Osteopaths Can Practice Optometry in California—Holding that there was no law in this state to prevent osteopaths from practicing optometry as a branch of their profession, Superior Judge William S. Wells dismissed the judgment entered in August, 1910, by Police Judge George Samuels, which imposed a fine of \$50 upon Dr. Charles W. Lineker, a prominent osteopath of Oakland, for fitting a pair of lenses to the eyes of one Sadie Schultheis. This case had been in the Superior Court on appeal for many months and Judge Wells' decision is regarded by osteopaths generally as a great victory for their profession. The prosecution of Lineker was conducted by the state board of examiners in Optometry. Contending that there was nothing in the statutes of California that prohibited osteopaths from practicing under authoritative certification their profession within the limits of osteopathy and that the care of the eyes properly came under this head counsel

for Dr. Lineker contended before Judge Wells that the legislature had taken great pains to make a law covering all branches of medicine and surgery and to abolish all possible distinctions that had existed between different methods of treating the sick and afflicted.

Not State System.

It was claimed by the prosecution that osteopathy was not entitled to come under the act that authorized the practice of a medical profession and surgery, but in this connection Lineker's attorneys replied in a subsequent act elaborating the original law it was never the intention of the legislature to establish allopathy as the "state system of healing," as had been intimated by the prosecution, but that it no doubt was with the purpose of emphasizing this intention and leaving no room for doubt that the legislators passed the subsequent act regulating all branches of the medical profession. The legislature had made it clear that there should be no distinction under the law between those who practice medicine and those who practice osteopathy.

It was further contended by the defense that a qualified and certified osteopath had the right to treat any disease or any human ailment, and that the extent to which the law could possibly be said to go was to the extent of preventing an osteopath from using drugs. Troubles and affections of the eyes were clearly among these diseases and ailments.

The defense argued that a majority of the states of the Union, by appropriate legislation, had recognized the science of osteopathy as a "legitimate treatment of the sick," including the legislature of California. This being the case, a person treating the sick or afflicted by that means and science had as legitimate right to be called "doctor" as an allopath. Cases were cited wherein it had been held by the courts that a homeopath was a physician and in this regard the defense continued that at the time the cases cited were pending homeopaths occupied much the same position that osteopaths do at present.

Counsel for Lineker argued that believers in osteopathy had a perfect right to receive osteopathic treatment and that the contention of the prosecution that osteopathic physicians did not receive so liberal an education as allopathic doctors was "merely an evidence of their prejudice."

Reverting to the case at issue, counsel declared no knowledge of drugs was required for the treatment of the eyes, but that study of the nerves was absolutely essential. It was therefore absurd to presume that the legislature ever intended to exclude a person from the practice of optometry merely because he has better qualified to practice optometry than the ordinary physician.

Judge Wells' ruling clearly defines the rights of osteopaths under the law. They are entitled to practice in any disease, ailment or affection so long as they do not resort to medicine or surgery. The law so specifies, the court held, provided always that the practitioner was duly qualified for his profession and held a certificate from the state board of medical examiners both of which requirements Dr. Lineker possessed.

Associations

Maine Society Meets.—The September meeting of the Maine Osteopathic Association met at Dr. George M. Whibly's office at 2 P. M. Sept. 30, 1911, Portland, Me. Dr. Genoa H. Sanborn of Skowhegan read an interesting paper on Typhoid Fever, and Mr. G. A. Haswell of Springfield, Mass., gave an address on *Tic Douloureux*, while a very interesting report of the National Convention of Osteopaths was given by Dr. Nora Brown. Dr. Claire Brown also read an article on Septicemia. The delegates present enjoyed a banquet at the Congress Square Hotel at 6:30 P. M. Those present were: Dr. Genoa A. Sanborn, Dr. Mary D. Day, Dr. Viola D. Howe, Dr. George H. Tuttle, Dr. Mayme K. Tuttle, Dr. Claire Brown, Dr. Nora Brown, Dr. N. Maude Kellet, Dr. Julia Chase, Dr. and Mrs. E. S. Chittenden, Dr. and Mrs. C. H. Bernard, Dr. Josephine Bernard, Dr. Florence A. Covey, Dr. G. A. Haswell, and Dr. George M. Whibly. Dr. Howe reported on the second day of the Chicago Convention.—Florence A. Covey, D. O., Sec'y.

Supplementary Report of the Nebraska Annual Convention.—The twelfth annual convention of the Nebraska Osteopathic Association was begun Friday morning Sept. 22d, at the Millard hotel, Omaha, with about thirty practicing osteopaths of the state present.

Dr. W. H. Cobble of Fremont, Dr. J. N. Hoagland of Central City and Dr. H. M. Ireland of Kearney were nominated by the association as candidates for the vacancy on the osteopathic state board. One of these three is to be appointed by Governor Aldrich to the vacancy.

Address by President.

In his address to the convention Dr. A. T. Hunt, president of the association, declared that the popular prejudice and misunderstanding of the function of and mission of osteopathy are being gradually eliminated. He declared that there is further need of presenting the aims of this school to the public with a view to finally removing all error with respect to it. He said that osteopathy is of commercial value to the community and of direct benefit to the individual by raising the standard of health.

Dr. Hunt said in part:

"Much has been done in the twelve years that have passed since the organization of this association to place osteopathy upon a legal footing in this state, and most of you assembled here have been in the forefront of the fight necessary to secure these results.

"The present legal status of osteopathy in Nebraska leaves, perhaps, little to be desired under existing conditions; but we should maintain a strong organized front to retain what has with so great an effort been secured.

"You have noticed that people never enthuse over the practice of medicine. They often do so over their family physician, who is likewise their wise counselor and loyal friend; but the admiration is for the personality of the man, and not for the superiority of his methods. With the practice of osteopathy this enthusiasm is transferred from the individual to the method; from the man to the means employed; and one of

the pleasant surprises to the osteopathic practitioner is the constant and consistent loyalty of the osteopathic patient—to osteopathy.

"And there is a valid and demonstrable reason for this. Osteopathic patients are not required to clothe with secret knowledge any mysterious skill an individual, nor accept the fetich of empiricism. They are simply asked to recall the fact that they are but a part and consequence of nature's laws.

"The profession of alleviating human suffering is peculiarly fortunate in the psychic effect the physician has upon his patient. Each of you have doubtless experienced the thrill of mental relief, when some loved one was sick and suffering, and perhaps in danger, and the physician comes, and all your burdens, responsibilities and fears are placed upon his shoulders. And so you are unconsciously carrying courage and hope into many a life in your daily work.

"The osteopath is thus a distinct and valuable asset in his community, by reason of the fact that he actually increases the physical and mental capacities of his patients, and in many instances does so where other and usual means have failed. If by reason of this method and his work he can add effectiveness to human effort, if he can increase the sum total of human productiveness and worth, and bring comfort, hope and sweetness into human lives, of what greater value could man be to his fellows?"

A paper by Dr. T. J. Young of Fremont on the criticism of diagnosis in the field emphasized the need of more painstaking care on the part of the practitioner in his diagnoses. The advisability of making use of all the known methods, including laboratory means to determine a correct diagnosis, and particularly dwelt upon the elimination of the slipshod methods of the unprogressive practitioner.

Dr. H. E. Ireland of Kearney gave a resume of the value of post graduate work, dwelling particularly upon the educational improvements in late years in our colleges, the enlarged scope of the osteopathic field and also some criticism on present methods of teaching.

A very interesting paper was read by Dr. C. K. Struble of Hastings, giving personal experience in the treatment of pneumonia, dwelling with particular emphasis on the need of knowing how to get vaso-motor control of the lungs in combating this dreadful disease.

Dr. Frank A. Bates gave a very interesting talk on pseudo pregnancy, repeating some amusing experiences.

The Convention was then made an open parliament for the purpose of giving all the practitioners present an opportunity to express their views on the papers and discussions given before the convention. Many very interesting, as well as instructive experiences were related.

Hold an Interesting Session.—The Sacramento Valley Osteopathic Society met in Dr. W. Claude Williams' offices Saturday evening Sept 23d. A business meeting was held. It was decided that this society in the near future perform the "Lorenz Operation" for the reduction of congenital hip. Dr. J. P. Snare of Modesto was appointed as a committee of one to get the clinic and to make hospital arrangements necessary for such a case. Dr. James Sanderson of Turlock gave a demonstrated lecture on Nervous Physiology. He particularly went into the poor arterial circulation of the anterior part of the spinal cord, and showed that this was the reason of the frequency of infantile paralysis. Dr. Sanderson is to continue these lectures before the Society for a period of a year.

Dr. P. V. Aaronson of Fresno reviewed the National convention, from which he

had just returned. Dr. Aaronson then called for a clinic and showed many of the later ways of reducing subluxations.

Elect Officers.—At the meeting of the Philadelphia County Osteopathic Society, held Sept. 28th, in the Hale Building, the following officers were elected for the ensuing year: President, Dr. W. S. Nicholl; vice president, Dr. Robert J. Storey; secretary, Dr. M. C. Couch; treasurer, Dr. M. Leonard; sergeant-at-arms Dr. Simon Peter Ross; executive board, Dr. W. Armstrong Graves, Dr. C. Kenderdine and Dr. Earl Willard.

Eastern Illinois Association Meets.—The meeting of the Eastern Illinois Osteopathic Association was held at Mattoon, Tuesday October 10th, at the Dale House. A very successful and interesting meeting is reported.

Fifth District Iowa Association Convenes.—The meeting was held at Story City October 4th and 5th. The session opened with a banquet at the West Hotel given by the Sioux City osteopaths, Dr. F. G. Cluett officiating as toastmaster. The meetings of the second day were held in the Elk's Club Rooms beginning at 8:00 o'clock. The following program was carried out:

President's address, Dr. Ella Ray Gilmour; report of national convention, Dr. A. W. Peterson, Hawarden; report of state convention, Dr. U. S. Parish, Storm Lake; report on research work in regard to the insane, Dr. A. E. Hook, Cherokee; summary of osteopathic research of the year, Dr. E. A. Fisher, Ida Grove; Gynecology, subject selected, Dr. Charlotte McCluskey, Council Bluffs; round table conducted by Dr. F. G. Cluett, Sioux City (each doctor was expected to tell of his worst failure); "Publicity" Dr. George F. Ingledue, Sioux City; business session, election of officers, etc.

Afternoon—"Pneumonia," Dr. A. V. Leard, Spencer; discussion, led by Dr. M. E. Brown, Sioux City; "Osteopathic Management of Typhoid Fever," Dr. C. D. Ray, LeMars; discussion led by Dr. B. O. Hoard, Cherokee; "Technique of Pelvis (Innominata Sacrum and Coccyx)," Dr. R. T. Quick; "Pathology and Treatment of Pulmonary Tuberculosis," Dr. Charles E. Clark, Onawa; Clinics and open parliament, Dr. A. W. Peterson, Hawarden.

Virginia State Meeting.—The Virginia Osteopathic Society held a meeting at the Lynnhaven Hotel, Norfolk. The program carried out was as follows:

Sacro-Iliac Lesions, by Dr. E. W. Dunn of Norfolk.

Notes taken on work done by the Philadelphia College of Osteopathy and the Osteopathic Hospital of Philadelphia, by Dr. Alice N. Willard of Norfolk, who has just returned from a visit to Philadelphia.

National League of Medical Freedom by Drs. George E. Fout of Richmond, and M. L. Richardson of Norfolk.

Report of the meeting of the American Osteopathic Association, recently held in Chicago, by Dr. H. H. Bright of Norfolk.

Clinical Demonstration of a Case of Infantile Paralysis, by Dr. J. R. McCrary of Norfolk.

Dr. A. J. Snapp of Roanoke, president of the association, conducted the meeting, with Dr. W. D. Bowen of Richmond as secretary.

The Norfolk osteopaths entertained the society at the Lynnhaven Hotel at 1 o'clock luncheon.

There was a good attendance from the profession from all over the State, and several important business matters were discussed at the afternoon session.

Meeting of the S. W. Missouri and S. E. Kansas Association.—On Sept. 30, 1911 the S. W. Mo. and S. E. Kansas O. A. met at Parsons, Kan., with Dr. Doane, being first entertained at a "sumptuous repast" at the Mathewson House by the D. O's. of that town, Drs. Fitzgerald, Doane and Williamson (Alice Lowe and J. A.)

"Echoes from the Chicago A. O. A." was the main subject, and was well given by Drs. Trabue and Gass, and almost as enthusiastically received by all those present, and resulted in the general resolve that not another national meeting should pass without each one attending if possible to do so.

The chair appointed Drs. Frank M. Geeslin and Josephine Trabue committee on program for ensuing six months. They decided to take up the study of the viscera and will begin with the liver, as we find it causes so many diseases.

All had a good social time and the out-of-town guests were entertained over night by the resident physicians.

This was a partial reunion of the '07 class A. S. O. Some who were expected were unavoidably prevented from being there, but the ones who did come had a delightful time.

Next monthly meeting Oct. 28, 1911 to be held at Joplin Y. M. C. A.—Martha S. Cox, D. O., Sec.-Treas.

British Osteopathic Association Formed.—Midland Hotel, Manchester, England, July, 1, 1911. Meeting called to order by Dr. Hudson at 11:40 A. M. Dr. Hudson made a few remarks regarding the purpose of meeting and further suggested the many problems which presented themselves to Osteopathic practitioners in Great Britain. Dr. Pheils moved that Dr. Hudson be made temporary chairman of the meeting. Dr. Walker seconded the motion, which was carried. Dr. Smith moved: That we form a permanent organization to be known as the "British Osteopathic Association" to be affiliated with the A. O. A. Seconded by Dr. Dunham. Motion carried. Dr. Walker proposed Dr. Hudson as President of the B. O. A. and Dr. Pheils as Treasurer and Secretary. There were no other proposals and both Dr. Hudson and Dr. Pheils were unanimously elected. Dr. Barker moved that the President should appoint a committee of two to arrange by-laws. Seconded by Dr. Foote. Motion carried. President appointed Dr. Barker and Dr. Dunham. Dr. Dunham moved that the Massachusetts State Osteopathic Society's by-laws with necessary amendments should be adopted. Seconded by Dr. Watson. Motion carried. Dr. Barker read a considerable portion of accepted by-laws and a very harmonious discussion followed as regards necessary amendments, etc.

Dr. Walker proposed Dr. Dunham as Vice President of the B. O. A. There were no further proposals and Dr. Dunham was unanimously elected Vice President. Dr. Pheils proposed that after the Committee on By-laws had made the necessary amendments and alterations, that a copy should be forwarded to all members of B. O. A.; also that the obligations therein stated be drawn up properly for members signature at the next meeting. Seconded by Dr. Smith. Motion carried. Dr. Smith proposed that this shall be a secret organization. Seconded by Dr. Dunham. Motion carried. Dr. Smith proposed that each practitioner should keep a certain record of all his cases including principally the name of previous M. D's., their diagnosis, prognosis etc., and in comparison the Osteopathic results obtained, this form to be drawn up and posted to all members by the Secretary. Seconded by Dr. Pheils. Motion carried.

Dr. Smith moved that the Secretary write and thank Dr. C. E. Still for his letter and express that the members are looking forward with great pleasure to meet-

ing him in London. Dr. Barker moved that the officers be a committee to watch the development of legislative measures affecting Osteopathy and that all members should help and immediately send information to the Secretary. Dr. Walker seconded. Motion carried.

There being no other business for consideration Dr. Smith moved adjournment and the meeting ended in perfect harmony and with great satisfaction to all.—Dr. E. T. Pheils, Sec.

Meeting of the Osteopathic Society of New York.—The first meeting of the Osteopathic Society of the City of New York was held in Genealogical Hall, 226 West 58th Street, on Saturday evening, September 23rd. The membership was very well represented at this meeting, and the Society welcomed as its guests for the evening Drs. Ivan Durfur, of Philadelphia; George W. Goode, of Boston; L. B. Triplett, of Springfield, Mass., and Otis F. Aiken, of Portland, Oregon.

The program was of marked value and interest, and spoke well for the success of the society's endeavors for 1911-12. President N. D. Mattison in a forceful address pointed out the needs of the Society, as he saw them, and outlined several objects for later accomplishment. The address showed an intimate knowledge of the factors which enter into the life of the Society and an ability to utilize them in the further development of the Society.

The remainder of the program was devoted to a symposium on "The Lumbo-Sacral Articulation." The subjects "Rational Anatomy," "Physiological Exercises as an Aid in Correction," and "Technique of the Region," were ably presented by Drs. E. E. Tucker, Charles Hazzard and Joseph Ferguson, respectively. These excellent papers and the demonstration of technique were closely followed, and the general discussion was lively and helpful.—RICHARD WANLESS, D. O., Secretary.

Annual Meeting of the New York State Association.—The annual meeting of the New York Osteopathic Society will be held at Buffalo on Oct. 28. We expect a good attendance and an enthusiastic meeting. Have asked chairman of program committee to send you copy of program as soon as it is off press. G. E. Phillips, D. O., Sec'y.

Report of the Nebraska State Meeting.—The 12th annual convention of the Nebraska Osteopathic Association was held in Omaha, Nebraska, on the 22nd and 23rd of September with 40 members present. The following three named practitioners were nominated by the convention, one of whom is to be appointed by the Governor to fill the vacancy on the state board, namely: Dr. W. H. Cobble, of Fremont; Dr. N. J. Hoagland, of Central City, and Dr. H. M. Ireland, of Kearney.

The following officers were elected: Pres., Dr. H. M. Ireland, of Kearney; V. Pres., Dr. Wm. F. Wurth, of Fairbury; Treasurer, Dr. Lulu L. Cramb, of Fairbury, and Sec'y, Dr. C. B. Atzen, of Omaha.

The following program was rendered:

Dr. J. T. Young, of Fremont, gave a paper, Criticising the Osteopathic diagnosis in the field.

Dr. H. M. Ireland, a paper on Post Graduate Work.

Dr. Frank A. Bates, of Geneva, a paper on Pseudo Pregnancy.

Dr. W. H. Cobble, of Fremont, a paper on Auto-Intoxication.

Dr. Wm. F. Wurth, of Fairbury, a paper on Chemistry of Foods and its relation to body health.

Dr. C. B. Atzen, Omaha, practical talk on Urinalysis.

The above subjects were then discussed in open parliament and proved of much interest to all.

The chief feature of the convention was an address by Dr. L. Von H. Gerdine, of Kirksville, Mo., who gave a very instructive lecture on Nervous Diseases. The next meeting will be held in Omaha.—C. B. Atzen, D. O., Sec'y.

South Dakota Association Holds Meeting.—About twenty-five of the fifty or more members of the South Dakota Osteopathic Association met at Huron on the 13th of September. A splendid meeting was the result. The following officers were elected: Pres., Dr. John W. Pay, Milbank, South Dakota; Vice Pres., Dr. J. H. Mahaffy, of Huron; Sec., and Treas., Dr. H. F. Ludwig, of Parker; Board of Trustees, Dr. Lena Eneboe, Canon; Dr. E. W. Heyler, Mitchell; Dr. C. S. Betts, Huron. Dr. C. E. Schoolcraft, Watertown, was named as leader of the Science Circle for the ensuing year and recommended to serve on state board of examiners should a vacancy occur. The next meeting will be held at Huron during the fair week of 1912.—H. F. Ludwig, D. O., Secretary.

Report of the Virginia Society.—The Virginia Osteopathic Society held a meeting Saturday, September 30, at the Lynnhaven Hotel, Norfolk. The program carried out was as follows:

Sacro-Iliac Lesions, by E. W. Dunn, of Folk.

Notes taken on work done by the Philadelphia College of Osteopathy and the Osteopathic Hospital of Philadelphia, by Dr. Alice N. Willard, of Norfolk, who has just returned from a visit to Philadelphia.

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The Norfolk osteopaths entertained the society at the Lynnhaven Hotel at 1 o'clock luncheon.

There was a good attendance by the profession from all over the state, and several important business matters were discussed at the afternoon session.

Meeting of the Massachusetts Society.—The Massachusetts Osteopathic society held its first regular meeting of the year, October 7. The president Dr. Aubrey W. Hart made a short address which embodied a strong plea for more enthusiasm in society work, effort toward the establishment of an Osteopathic Hospital and individual research work. Action was taken by the society upon the following important matters: A committee of five was

appointed by the president to report plans for the incorporation of a Hospital Association. Dr. George E. Perkins announced that a party stands ready to furnish \$25,000 for every \$100,000 raised by the Osteopaths for a hospital. A committee was appointed to arrange a course of public lectures on Osteopathy and its principles. All members were requested to report cases of Infantile Paralysis to the Research Committee.

The Legislative Committee was instructed to introduce a bill at the coming session of the Legislature to the effect that hereafter no appropriation of state funds be made to any institution which excludes from practice in such institution any registered physician practicing an exclusive system of therapeutics.

The Society is looking forward to an afternoon and evening session with banquet in January, every hour full of good things for daily practice.—Effie L. Rogers, Sec.

AS REGARDS the doctor of hypocrisy, stupidity or plain cussedness, can you find a better example than that of the M. D. who rejects a new treatment because he considers it unscientific, while all the time he is prescribing such empirically derived (and only one later explained) specifics as mercury, iodides, quinine, salicylates, colchicum? Until our physiologists speak newly, wisely and widely most of our therapy must continue to be largely empirical, and discriminating word be "What will it do?"—Bulletin-Journal.

Forum

OSTEOPATHIC FRATERNALISM.

"There are doctors fraternal and doctors infernal. The former are the David and Jonathan kind; the latter are the David and Goliath kind. Which kind of fraternalism do you follow, brother?"

The David and Jonathan type is the kind that does not undercharge to win business from a colleague; the kind that is devoted and loyal to the cause; the kind that makes the young doctor safe in consultation with his senior; the kind that keeps step with the onward march of progress; the kind that is willing to contribute his best efforts to help gain the great ends to high calling for the betterment of the profession; the kind that is saturated with a great motive in which lies the making of one's self larger and fitter to help afflicted humanity.

The parody on "Comin' Through The Rye" briefly and aptly expresses the David and Goliath type; "When a doctor meets a doctor need the doctor try, when he meets and greets the doctor, to put out his eye?"

If you would inculcate true fraternalism you must co-operate with your brethren in social union. That which fosters and promotes true fraternalism is the Osteopathic Society, hence it is the duty of Osteopaths the world over to affiliate with both local and national osteopathic organizations.

Here is a great arena where the knotty problems of the profession are wrought out; where dark corners are illumined by the lime light of discussion and recorded experience—the very hot-bed of true Osteopathic fraternalism—the culture medium which germinates and grows the highest type of practitioners.

The good derived from membership is what the members make it. The member who gives time and talent to the Society adds to his own efficiency. For every discussion in which the member engages, for every paper he writes, the Society pays him back ten-fold. The member gives his individual effort, while the Society imparts the combined wisdom and experience of all.

The Osteopathic Society stands for unity, harmony, advancement. Here ideas are exchanged, inspiration is gained, new thoughts are imbued, enthusiasm is begotten. It keeps the doctor "up to date;" makes him

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The Osteopathic Society stands for unity, harmony, advancement. Here ideas are exchanged, inspiration is gained, new thoughts are imbued, enthusiasm is begotten. It keeps the doctor "up to date;" makes him

more liberal, less selfish, more fraternal, less jealous; more tolerant, less conceited; more skillful and still more successful."

The above is part of a letter sent to Indiana Osteopaths by the undersigned urging them to get in the traces and do their duty. You may find it a member-getter in general since it sets forth the good to be derived from Fraternalism and Organization. Here is our best wishes for a stronger A. O. A.—JOHN F. SPAUNHURST, D. O., Chairman.

One Way of Creating a Panic

In a recent number of the Outlook, an article by Earl Mayo—on Typhoid and Tuberculosis, the Public's Responsibility—furnishes a most remarkable reason for the recent cases of typhoid fever in various parts of New York city. It seems that the Health Board found, upon inquiry, that the milk supply of the infected households came from one company, to which consignments had been shipped from a certain town in the northern part of the state, where a peculiar disease had been prevalent for a number of years. The learned physicians decided that the disease was typhoid fever, although it passed for something else.

The next link in the extraordinary chain of evidence was the discovery of a dairy farmer, who, after selling milk to the local trade, was in the habit of sending the surplus to New York.

AND THE DAIRY FARMER HAD HAD AN ATTACK OF TYPHOID FEVER FORTY-SEVEN YEARS BEFORE.

"During all of the intervening period," says the writer in the Outlook, "the bacilli PROBABLY had been present in the system and he had been spreading the disease."

The weakest spot in the testimony is the word 'probably.'

But the article insists that the case was fully investigated, and the man is classed as a "typhoid carrier."

Sherlock Holmes fades into insignificance when one considers the brilliant record of the New York Health Department. It may be sacrilegious to cast a doubt upon the conclusions of that august body, but:

Why these hair-splitting deductions? Why this unusual activity at the present time? And why this epidemic, through the entire country, of magazine and newspaper proclamations of the efficiency of state and government doctors?

The reports would undoubtedly be more generally accepted, but for the fact that the American Medical Association and its allies appear to be over-zealous. They are after a "National Bureau of Health."

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subject of

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Complete information as to conditions,
rules, etc., have been distributed or
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THE MARVEL "WHIRLING SPRAY" SYRINGE

Retires from Practice.—Dr. V. H. Edson of the June 1911 class, A. S. O., who has been practicing in Oregon during the summer has returned to his home at Williamtown, Vermont, because of ill health.

A Literary Contest.—The announcement which appears in our advertising forms that the Marvel Co., makers of the popular Marvel Whirling Spray Syringe have decided to offer a series of cash prizes for the best articles upon the "Therapeutic Value of the Vaginal Douche" deserves careful attention. With characteristic energy and progressiveness, the Marvel Co. have taken what is undoubtedly the best and most ethical means to demonstrate the value of their instrument which is already well and most favorably known to the profession.

The contest will be managed with absolute fairness toward all competitors. The articles submitted will be judged strictly upon merit and the names of the writers will not be known by the judges until after the awards have been made.

The result of this competition should benefit every physician, whether he competes or not, since there will be many articles of such scientific and practical value as to well deserve reading and preserving. It is the intention of the Marvel Company to publish the best of the articles submitted for distribution among physicians.

We advise our readers to enter the competition and make every effort to secure a prize.

Pacific Coast Notes

The following clipping will be of interest to you: "Osteopathic physicians may practice optometry and may treat any human ailment by any method which does not call for the use of drugs or the employment of surgery, according to a decision by Superior Judge Wells. In accordance with this opinion, a conviction and fine of \$50 imposed upon Dr. Charles W. Linecker, an osteopath, by Police Judge Samuels was set aside.

The state board of optometry of California filed a charge against Dr. Linecker for prescribing glasses for Sadie Schulteis.

The board alleged that diseases of the eyes were beyond the skill of osteopathic training. Judge Wells decided that the state laws gave rights to osteopathic physicians equal to those enjoyed by physicians of other schools and he held that eye troubles came within the ordinary ills of humanity."

The statement is hardly correct. The optometry law in this state excludes physicians from having to take the examinations and the Optometry Board claiming that osteopaths were not physicians within the meaning of the medical law of the State started proceedings against Dr. Linecker and attempted to frighten other members of our profession in the state into stopping their eye work, notably the school of Optometry conducted by Dr. Ruddy and others in connection with the L. A. C. O. and Dr. S. I. Wieland of Santa Rosa. This decision effectually settles their contentions.

The next regular meeting of the Bay Osteopathic Association has been postponed to Oct. 7 when it will be held in the offices of the Drs. Vanderburgh in San Francisco. The program of the evening will consist of a debate on the relative merits of an Osteopathic Post-Graduate course and a medical course.

Dr. Edward Goetz of Cincinnati having lost his health in the practice has closed his offices and has taken the managership of the four Northwestern states for the Sanitol preparations. He spent a month in California hunting deer, on his way to the scene of his work. He is suffering from kidney disorder.

Dr. Flora Notestine spent some time with Dr. Minnie Potter in Seattle recuperating from her recent breakdown.

Dr. and Mrs. H. E. Penland, of Berkely, California spent their vacation with his parents in Oregon.

Successful in Over 16,000 Cases

WITH Osteopathic Physicians who know its worth, the Sheldon Spinal Appliance has become an important adjunct in their treatment of the various forms of spinal trouble.

The judgment of these physicians who fit the Sheldon Appliance in cases of spinal weakness, irritation and curvature, has been justified by our record of successfully treating over 16,000 cases in the past ten years.

If you are not acquainted with the

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Isn't this record of successful results, obtained by brother practitioners in all parts of America, worth considering seriously? Isn't it a record which makes desirable your own *personal* acquaintance with the Sheldon Appliance?

The Sheldon Appliance is light, comfortable, cool, humane—yet it gives all the required support to the affected spine and brings gentle pressure just *where needed*. The appliance can be quickly adjusted to meet improved conditions in cases of curvature. Its easy removal facilitates examination and treatment. *Every* Sheldon Appliance is made to order, and to meet the requirements in each individual case.

Write today for our plan of co-operation. We will send detail and illustrated description of the Appliance, and *proof* of its corrective efficiency.

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SAJOUS'S "INTERNAL SECRETIONS"

This work is the first authoritative explanation which has ever been made of the action of the auto-protective forces of the body. The internal secretions are Nature's own protective forces. SAJOUS shows how they can be accurately employed in the control and healing of disease.

The Osteopathic profession should be interested in this great work as it presents a new physiological system upon which all medicine will eventually be based.

"This work should be the future of medicine what Harvey's work on the circulation of the blood was to the study of physiology—it should be the beginning of really scientific medicine. It has put out of date all work that does not include it, which means all preceding work on physiology and medical therapeutics; if indeed it does not cause such profound changes in these studies as to amount to an entire rewriting of them. My personal conviction is that no one should regard himself as educated in the subject of physiology until he has mastered the contents of these volumes. I find myself unable to think in the subjects of physiology or of etiology, or even of therapeutics, without reference to them."—Dr. Tucker's review in the Osteopathic Physician.

Descriptive circulars, etc., sent on request.

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F. A. DAVIS COMPANY,

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Personals

Visits in Kirksville.—Dr. W. H. Wilderson of Circleville, Ohio, visited Dr. Harry Still the latter part of September.

Takes Post Graduate Work at A. S. O.—Dr. E. W. Patterson of Rochester, Ky., is in Kirksville taking a post graduate course.

Purchases a Hupmobile.—Dr. J. M. Diehl, one of Elmira's leading osteopaths, who enjoys a wide practice in Elmira, N. Y., and vicinity, has purchased a hupmobile for use in his practice. He finds it especially useful in climbing the hills in northern Pennsylvania.

Opened offices at Caruthersville, Mo.—Dr. Minnie Miller Bedell, a graduate of the A. S. O. has opened offices in the Bedell Jewelry store. She intends making a specialty of diseases of women and children.

Removal Notice.—Dr. C. H. Atwood, who has been practicing in Riverside, Calif., removed to Brawley, where his offices were opened the first of October. Dr. Atwood has a ranch east of Heber and has had a deep interest in the development of Imperial Valley for several years. He has ten acres of grapes on his ranch.

Takes Vacation.—Dr. Clara Bakehouse of Signourney, Iowa, is spending a three week's vacation with friends in Kirksville.

Another Kirksville Visitor.—Dr. Chas. Arand of Marysville, Kans., who was for three years president of the '07 class, A. S. O., is visiting friends in Kirksville.

Will Practice in Hawaii.—Dr. Jessie Lycan, who has been practicing in Colo., has gone to Hilo, Hawaii, to practice osteopathy. Dr. Cordelia Reed of Springfield, Ohio, is successor to Dr. Lycan in Longmont.

Retires Because of Ill Health.—Dr. O. W. LaPlount has sold his practice in Portage, Wis., to Dr. Russ Coplantz of Joliet, Ill. Dr. LaPlount will take a rest because of ill health.

Writes to Editor of Journal.—Dr. F. E. Moore writes from Vienna, to the editor of the Journal: "In visiting various European hospitals and clinics I am convinced that Medical Europe is devoted to general diagnosis—substantiating same by post mortems, and to surgery. They are without anchor in therapy and not progressing. Osteopathy is blind if it neglects to train students in skill and take the field."

Returns to Oregon, Ill.—Dr. Wolcott, who for five years practiced osteopathy in Oregon, Ill., but has been practicing in De Kalb for the past five months has returned to Oregon.

Will Practice in Woodland.—Dr. C. H. Evans, who visited Woodland, Calif., for some time as the guest of Dr. Charles Griggs, has concluded to remain there and has rented offices. Dr. Evans has been practicing in Springfield, Ohio, since his graduation from the Los Angeles School of Osteopathy.

Red Cross Seal Sale in Missouri.—The Missouri Association for the Relief and Control of Tuberculosis, 625 Locust St., St. Louis, Mo., will conduct the Red Cross Seal Sale in Missouri and is planning to sell 3,500,000 seals. The proceeds will go to buy an exhibit showing "How Tuberculosis is communicated, prevented and cured." The Association hopes to take this exhibit to every town in the State of Missouri and to give free stereopticon lectures in connection with it.

"plain words for facts and facts convince.

In the practice of medicine, results count and as pain is the foremost symptom which induces the doctor's call, its prompt relief is the most convincing argument of his ability.

Pain, one of the cardinal symptoms of inflammation, is the result of nerve pressure from infiltrated tissues. Its relief by the application of hot, moist heat, so superiorly presented in the form of antiphlogistine, is prompt and positive.

In Tonsillitis, Bronchitis and Pleuritic involvements, the results obtained by the use of antiphlogistine have convincingly demonstrated its value over other forms of applying moist heat, and the reliance and confidence accorded it by the medical profession are but a further proof of its superior therapeutic worth."

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DANVILLE, ILLINOIS

Last year through generous contributions of almost \$2000.00 raised in St. Louis, the Association was able to carry on a campaign against consumption by means of an exhibit in a special car. The car was loaned by the Frisco R. R., and carried free over the lines of the Frisco and Katy Railroads in Missouri also over a part of the Missouri Pacific and Cotton Belt Railroads. Over sixty towns were visited and 30,000 people saw the exhibit.

Remember that every Red Cross Seal you buy helps in the War against The Great White Plague.

Osteopathic Hospital to be Erected in Boston.—Boston is to have an osteopathic hospital, according to plans now under way among practitioners and friends of osteopathy, who are trying to raise \$200,000 for the erection of such a structure through subscriptions to stock and contributions.

A meeting of the Massachusetts Osteopathic Society was held when committees were appointed to carry the project forward. It is said that a friend stands ready to contribute \$25,000 for every \$100,000 raised.

Announce Marriage.—Dr. Kenneth Price and Dr. Olive Moore have just announced their marriage which occurred July 27th, in Los Angeles. The young people were classmates during their stay in the osteopathic school. For professional reasons, both having a large practice, they decided not to make the marriage known at once. They will live in Monrovia, Calif.

Still College is Bought.—C. Huttenlocher, representing the college purchased the real estate of the Still College of Osteopathy and the Des Moines general hospital. The property was sold to Mr. Huttenlocher by Deputy Sheriff Hiram L. Fickel for \$10,498.94

Opens Branch Office.—Dr. G. W. Weddell, Olympian osteopath, announces that he will be in Shelton, Calif., each Tuesday and Friday, and can be consulted at the George Shorter residence.

Removal Notice.—Dr. H. E. Reed, who has been practicing in Hollister, Calif., has removed to Porterville, where he will take up the established practice of a physician who is moving to Bakersfield.

Will Practice at Freehold, N. J.—Dr. Robert Conover, who has been practicing in Downs, Kansas, and who lived at Freehold when a boy, will open an office at Freehold.

Called at the Journal Office.—Dr. Orrilla Reeve, member of the June '11 class, A. S. O., who is located at 412 1st Nat'l Bank Bldg., Mason City, Iowa, called at the Journal office Oct. 10th.

Sold Practice.—Dr. A. M. McNicol of Joliet, Ill., has sold his practice to Dr. F. E. Hyatt and has purchased the practice of Dr. D. D. Young of Dallas, Ore. Dr. Young left October 1st to take up post graduate work at the Los Angeles College of Osteopathy.

Form Partnership.—Drs. G. C. Coulson and C. S. Klein of Colorado Springs, Colo., have become associated in practice and are located at 601-605 Exchange Nat'l Bank Bldg.

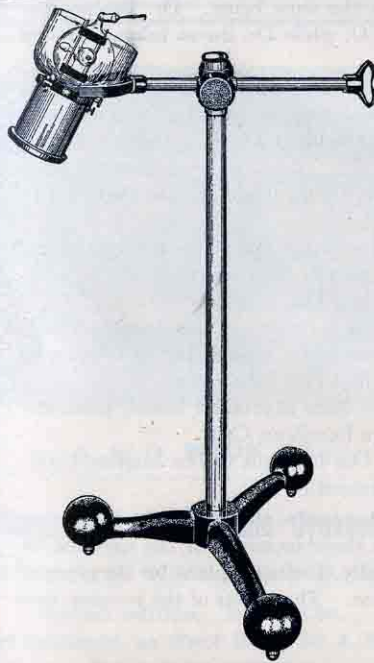
Filed Certificates.—Drs. Clara K. Mathias and John Russell Morris have filed their certificates from the State Board of Medical Examiners with the county clerk and will practice osteopathy in Petaluma, Calif.

Attend Meeting in Omaha.—Dr. W. H. Cobble and Dr. J. T. Young of Fremont, Nebraska, attended the twelfth annual meeting of the Nebraska Osteopathic Association, which was held the last week in September. Both Dr. Cobble and Dr. Young made addresses at the convention.

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In the same issue of the Phlebotomist, Dr. Edward Parrish of Brooklyn, presents his methods of treating Tic Douloureux and Dr. Leverett of Yonkers, relates his experience in the successful handling of ivy poisoning cases, which in many instances are quite as intractable to handle as Tic Douloureux.

In addition to these papers, much other interesting and instructive material is given, and it is worth while to write to the Denver Chemical Mfg. Co., New York, for a copy of the Bloodless Phlebotomist for October, which they will send upon request.

Called at the Journal Office.—Dr. Ida Ellis Bush of Jacksonville, Fla., called at the Journal office Sept. 19th while in Kirksville for a four day's visit. She, accompanied by her mother, was returning home after a two month's vacation spent in the Rockies.

Removal Notice.—Dr. Emma Rector announces that she has removed to new and commodious offices in the Farmers and Merchants Bank Building on West Main Street in Benton Harbor, Mich.

Brought Patient to A. S. O. Hospital.—Dr. Nuckles of Marshall, Mo., brought a patient to the hospital for treatment, Sept. 20th, and while here called at the Journal Office.

Discontinue Practice.—Drs. B. W. Sweet and J. P. Bashaw, who have been in partnership, have discontinued their practice for the time being. Dr. Bashaw expects to take a post-graduate course at the A. S. O. while Dr. Sweet takes a rest on account of poor health.

Assists in Sanitarium.—Dr. Cora B. Weed-Marx, who formerly practiced at Oneida, N. Y., has removed to Lakewood, N. J. where she is assisting Dr. Fechtig in his sanitarium. She has disposed of her practice in Oneida to Dr. J. R. Miller of Rome, who will spend two days there each week.

Visits Salt Lake.—Dr. Alva Elder of Tulare, Calif., made an extended visit to Salt Lake in Sept.

Visits in Kirksville.—Drs. Elizabeth M. Ingraham and Jane Wyckoff of St. Louis, spent several days in Kirksville the latter part of September, after which Dr. Ingraham left for an extended visit in St. Augustine, Fla.

Visits Home After Six Years.—Dr. D. Frances Sellars of Los Angeles, Calif., is visiting her home in Charleston, Ill. Dr. Sellars was a teacher in the Charleston schools before studying osteopathy and this is her first visit for six years.

Location.—Mrs. Franklyn Davis Bland and Miss Myrtabell Bland, graduates of the Pacific College of Osteopathy have located in Pasadena, Calif.

Takes Post Graduate Course.—Dr. A. H. Doe has gone to Los Angeles, Calif., where he will take a post graduate course in Osteopathy.

Detroit Osteopaths Entertain.—Detroit osteopaths, about 25 in number, members of the local society, tendered a banquet to three members of the national association at the Fellowcraft club, and incidentally discussed plans for the national convention which is to be held in Detroit next year. The guests of the evening were

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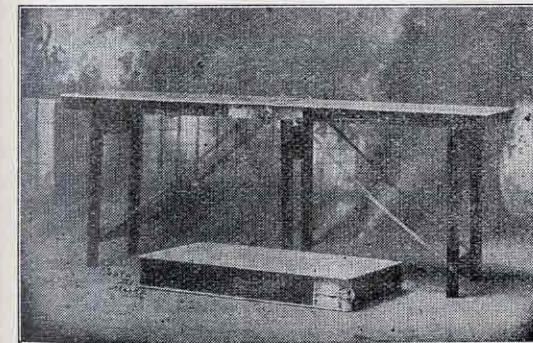
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Dr. H. L. Childs, Orange, N. J., secretary of the national association; Dr. F. C. Farmer, Chicago, chairman of the program committee for the forthcoming convention, and Dr. A. G. Hildreth, St. Louis, Mo., national trustee.

The association plans to have from 1,500 to 2,000 delegates at the gathering here next year, and so far the promoters have met with the most promising results. Already the association has entered upon a campaign of publicity which will continue for a year.

The evening's program in addition to the banquet included a reception to meet the three national officers and the new members who have recently been taken in. Following the banquet a business meeting was held.

Returns from Vacation.—Dr. J. C. Glasgow of Dinuba, Calif., has returned from a vacation spent in Santa Rosa.

Sells Practice.—Dr. Mary Ewing Murray has sold her practice at Helena, Mont., to Dr. C. L. Shafer, member of the June 1911 class of the A. S. O. Dr. Murray reports a good practice at Helena, but is compelled to leave because of the altitude, which is too high for her daughter's health. She leaves there November 1st, going to Ohio for a short time after which she will locate at Glasgow, Mont.

Removal Notice.—Drs. George J. Helmer and Chas. S. Green removed their offices from 136 Madison Ave. to 187 Madison Ave., Cor. 34th St., New York City, N. Y.

Called to Bedside of Father.—Dr. Ed. House of Manhattan, Kans., has been called to the bedside of his father Joel E. House, who was stricken with apoplexy while visiting friends in Clay Center.

Osteopath Dies.—Dr. A. F. McMillan, member of the June class of 1901, A. S. O., died in Detroit, Mich., Sept 6th. Death was due to heart trouble. Dr. L. C. McMillan in writing of his son's death says, "I thank the Osteopaths who helped me keep my boy ten years after all said he could not live."

The Storm Binder and Abdominal Supporter.—The problem of securing a proper and efficient abdominal support during pregnancy and after confinement as well as after laparotomies is an important one, and has in recent years been extended considerably, since the importance of relieving all varieties of enteroptosis by mechanical support has been realized. The treatment of enteroptosis, of floating kidney and even of cholelithiasis (according to Achilles Rose) by a well fitting abdominal support has been successful in a large number of cases. It is, however, indispensable that the support should not only be properly adjusted and should hold the prolapsed viscera in place, but it must also be free from discomfort, it must be washable, durable in quality and moderate in price.

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Give Expert Testimony.—In an examination of witnesses recently conducted in Chicago by Commissioner Charles G. Hutchinson, Dr. J. Deason, Bacteriologist and Professor of Physiology at the American School of Osteopathy, was called upon to give expert testimony with regard to vaccination. Although vaccination has been

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held almost universally by the medical profession for decades to be the preventive treatment for smallpox, Dr. Deason, basing his convictions upon a large number of experiments with vaccine virus upon animals, declared the practice as carried out today to be an absolute menace to human life. Not only was the bacillus of tetanus found to be present in the virus but a large number of other deadly organisms were isolated. The fatalities among the animals used in the experiments left no possible doubt as to the character of the virus used and in many cases human beings are even more susceptible to these deadly organisms than were these animals. Dr. Biehn, formerly director of laboratories for the city of Chicago and City Bacteriologist, fully substantiated Dr. Deason's testimony as to the impurities of vaccine virus, although he is avowedly not an anti-vaccinationist. He also identified a letter from one manufacturer wherein it was candidly admitted that it is impossible to produce virus without these impurities, also contending that "elimination of the bacteria destroys the life of the virus."

This testimony is to be used in litigation in the form of mandamus proceedings to compel the St. Louis board of education to annul its compulsory vaccination order. The suit was brought by James A. Martin, whose children were excluded from the public schools for failure to comply with the order. Eight deaths from tetanus resultant upon vaccination are said to have prejudiced the public, and the suit is backed by the St. Louis Anti-Compulsory Vaccination Society.

The annulment of the St. Louis board's order is asked in allegations that it is unconstitutional. Compulsory vaccination is claimed to be an unreasonable deprivation of the rights of a citizen and vaccination a danger to mankind, if not an utter failure in its purpose. The case was set for hearing on Oct. 10.

Resumed Practice.—Dr. F. O. Edwards, after completing a post-graduate course at the Los Angeles College of Osteopathy, has resumed practice at 709 First Nat'l Bank Bldg., San Jose, Calif.

Will Devote Entire Time to Springfield Practice.—Dr. L. B. Triplett, who has maintained a branch office at Holyoke, Mass., for sometime, will in the future devote his entire time to practice at Springfield, Mass. Dr. Triplett recommends to all former patients Dr. Ernest R. Humphries, of the June 1911 class, A. S. O., who has opened offices at Holyoke.

Returned from Eastern Trip.—Dr. Alice B. Chaffee of Los Angeles, Calif., announces her return from an extended trip in the East. She is now ready to meet patients and friends at her offices in the Ferguson Bldg., Third & Hill Streets.

Married

In Ottawa, Ontario, Can., Sept. 25th, Dr. Almeda J. Goodspeed to Mr. George Sidney Dole. At home after Oct. 24th at Kenilworth, Ill.

In Los Angeles, Calif., July 27th, Dr. Kenneth Price to Dr. Olive Moore.

In Kirksville, Mo., Sept. 13th, Miss Eleanor McLeod to Dr. Lacious A. Harris.

In New York City, Sept. 9th, Dr. Paschall Morris of Philadelphia, Pa. to Miss Helen Augusta Benerman.

In Amity, Mo., Miss Nannie Howell to Dr. Thomas Lincoln Holmes. Dr. and Mrs. Holmes will be at home at Bolckow, Mo.

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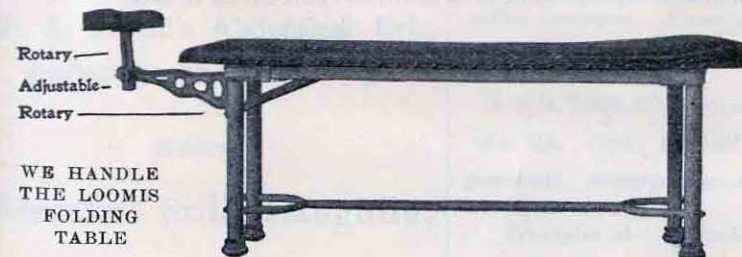
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Died

Dr. F. A. McMillan at Detroit, Mich., Sept. 6th.
Dr. Floyd F. Peters at Monroe, Wis., Oct. 2d.

Born

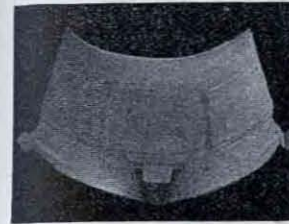
Robert Still Turfler, August 28th, to Dr and Mrs. Francis A. Turfler.
Ellinor Frances Bean, September 14th, to Dr. and Mrs. Arthur S. Bean.

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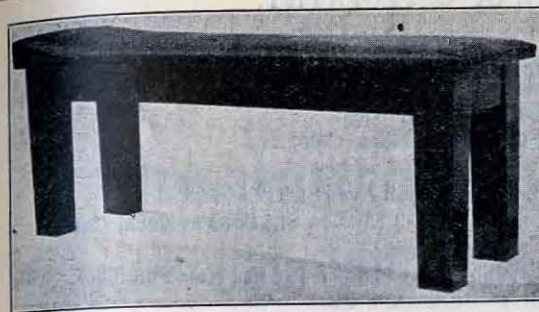
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- Atwood, H. C., Brawley, Calif.
 Bedell, Minnie M., Caruthersville, Mo.
 Bland, Mrs. Franklyn Davis, Pasadena, Calif.
 Bland, Myrtabell, Pasadena, Calif.
 Brown, Niles, 214 Broadway, Providence, R. I.
 Bryan, D. H., 402 Ninth St., New Kensington, Pa.
 Caine, Allen B., from Kenosha, Wis., to 407-9-11 MacMillan Bldg., La Crosse, Wis.
 Carel, E. G., Cape Girardeau, Mo.
 Chaffee, Alice B., 514-516 Ferguson Bldg., Cor. 3d & Hill Sts., Los Angeles, Calif.
 Conover, Robert H., from Downs, Kans., to Freehold, Kans.
 Coulson, G. E., 601-605 Exchange Nat'l Bank Bldg., Colorado Springs, Colo.
 Dejardin, C., Room 23, Francis Block, Port Arthur, Ontario.
 Edwards, F. O., 709 1st Nat'l Bank Bldg., San Jose, Calif.
 Elder, Alva, Tulare, Calif.
 Ely, Kate R. Winona, Miss.
 Farmer, G. C. Farmer, 541 Carlton Way, Hollywood, Calif.
 Gamble, G. A., 626-7 McIntyre Bldg., Salt Lake City, Utah.
 Gibson, Axel Emil, Beaumont, Calif.
 Green, Chas. S., Cameron Bldg., 187 Madison Ave., Cor. 34th St., New York City.
 Grow, Will W., 222-224 Logan Bldg., St Joseph, Mo.
 Hardy, A. C., Lockhart, Tex.
 Hodges, Lena R., from Seaside, Ore., to 34th and Belmont Sts., Portland, Ore.
 Hoefner, Victor C., from 242 W. Court, 225 N. Central Ave., Paris, Ill.
 Howerton, F. J., Southern Bldg., Washington, D. C.
 Hullett, M. Ione, Alamogordo, N. M.
 Humphries, E. R., 276 High St., Holyoke, Mass.
 Hyatt, F. E., Joliet, Ill.
 Krill, J. F., from Indianapolis, Ind., to Waverly, N. J.
 Logue, J. S., Germantown, Pa.
 Loving, A. S., from Denver, Colo., to Palisades, Colo.
 Lucas, M. M., from Sunny Side, Ky., to Williams Bldg., Thomasville, Ga.
 Lyeon, Jessie, from Longmont, Colo., to Hilo, Hawaii.
 Martin, C. C., Central City, Ky., to 2035 Broadway, Paducah, Ky.
 Marx, Cora B. Weed, Cor. Forest Ave., & 6th St., Lakewood, N. J.
 McCoy, L. C., 5 Stewart Bldg., Martinsburg, W. Va.
 McNicol, A. M., Dallas, Ore.
 McLaughlin, A. H., from King City, Mo., to 1422 W. Adams St., Chicago, Ill.
 McPike, Mary S., 205 Bliss Bldg., Tulsa, Okla.,
 McPike, James, 205 Bliss Bldg., Tulsa, Okla.
 Miller, J. R., Rome, N. Y.
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 Pratt, Frank P., 5 Clairmont Gardens, Glasgow, Scotland.
 Rector, Emma, West Main St., Benton Harbor, Mich.
 Reed, Cordelia, from Springfield, O., to Longmont, Colo.
 Reeve, Orilla, Mason City, Ia.
 Schneider, F. C., from La Salle, Ill. to 2141 Rusell Ave., St. Louis, Mo.
 Shaffer, Fannie, from Los Angeles, to 1510 1-2 Mission St., So. Pasadena, Cal.
 Shafer, C. L., Helena, Mont.
 Spence, Alice M., Thomas H., and Philip S., Broadway & 92d St., New York City.
 Staff, L. E., from New Canton, Ill. to Burlington, Ia.
 Stoner, Fannie G., Huntsville, Mo.
 Traver, Ethel K., 203 W. 85th St., New York City, N. Y.
 Triplett, L. B., Springfield, Mass.
 Tupper, Maud, Auburn, Neb., to Cor. 21st & Howard Sts., Omaha, Neb.
 Turner, Nora, from Salem, Ill., to Taylorville, Ill.
 Weddell, G. W., from Still College, Des Moines, Ia., to Olympia, Wash.
 Weddell, W. R., over I. O. O. F. Temple, Olympia, Wash.
 Wood, Elizabeth, Atchison, Kans.
 Wright, S. E., 314-315-316 Iroquois Block, Marion, Ind.

