

The Osteopathic Physician

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We Begin Building at Waukegan Immediately!
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The Osteopathic Physician

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CHICAGO, OCTOBER, 1920

Number 4

That Problem of Raising Fees

A Symposium by the Profession

We sent out this text for "Shop Talk" to several hundred osteopaths last month:

"Will you kindly send a few words to The OP in answer to these questions? Have you raised your fees since 1915—(since which time, as government data show, the cost of living and operating business has been doubled)? When did you raise? How much? Was it difficult? Did it lose you much, or any, practice? How did you announce the raise to your field? What do other local osteopaths charge? Do you co-operate with local M.D.'s as to raise of fees?"

These interesting and suggestive replies tell their own story.

Dr. L. K. Shepherd, Cincinnati, Ohio

I have raised my fees three times since 1915. The last raise was made the first of this year at which time I raised fifty cents. To the best of my knowledge I lost no business, but business seemed to increase each time. The charges of the other local osteopaths vary from \$2.00 to about \$3.00.

Dr. Vernon W. Peck, Pittsburgh, Pa.

Have about doubled fees since 1915. Of course some are part charity always.

Dr. Fred W. Morris, Ridgewood, N. J.

Don't know what others charge. My rate has always been \$2.50 and \$3.00 in office and \$1.00 more for near out calls; increase for distance.

Dr. G. Hart, Philadelphia, Pa.

Of course I raised fees, why not? People expected it, just as they expect better work from me the longer I'm in the profession. There is no middle ground on which to stand, one progresses or retrogrades. My big thought has been *service*. The payment for that, within reason, is easy for any one, whether it be for treatment or something else.

Dr. Mary S. Crowell, Farmington, Me.

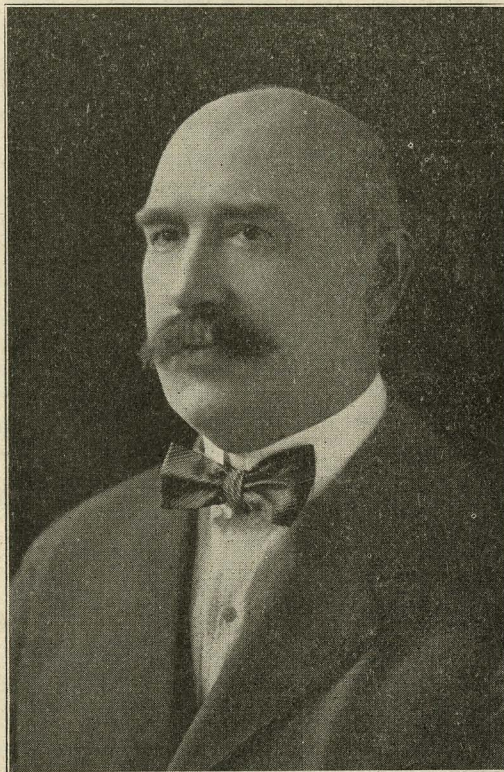
My income has increased \$1,500 the last twelve months on the old basis. I have increased examination fee \$1.00 and charge \$3.00 instead of \$2.50 for out of office calls in city limits this year. My office and other expenses have not been increased sufficiently to actuate me in raising prices more.

Dr. F. A. Webster, New York, N. Y.

Yes, I raised; not difficult, but lost some practice for me. I announced raise to patients as they came in. Other osteopaths charge same and more—majority, more, I think. No attempt to co-operate with M.D.'s. Making less money, nit, than in 1914.

Dr. R. E. Andrews, Rome, Ga.

Didn't notify any one and had no complaints. Don't ever expect to charge less as people think more of the man who charges for his services.



Mr. Phillip H. Gray, whose munificence gave the Detroit Osteopathic Hospital to the profession.

Drs. H. C. Jaquith and L. E. Jaquith Toronto, Ont., Canada

Yes, in 1917 we raised our fees. They are now—office, \$2.50—\$3.00; calls, \$5.00. No trouble experienced. We lost no patients by it. Simply told each one we must ask them more. No, we did not co-operate with the medics in raising our rates.

Dr. Walter S. Grow, Indianapolis, Ind.

Yes, I raised fees in July, 1917, 50 cents. No trouble at all. Not very much shrinkage in practice. What I did lose I was glad of it. It was announced by letter. Now get \$2.00 and \$2.50. As to M.D.'s, no co-operation from their side.

Dr. J. O. Strother, Winfield, Kans.

I raised last fall on some services and the first of year made general increase on all work, from 25% to 50%. No trouble at all. Lost no patients. Simply told them the war was over and everything up. I saw no patriotic reason for giving my services for less than could buy other things I require for living. The local D.O.'s worked out the list of fees together. We don't put in with the M.D.'s.

Dr. N. Gaylord Husk, Bradford, Pa.

On July 1st, 1919, raised office treatments from \$2.00 to \$2.50. Had no trouble in so doing. There are, of course, exceptions to this rate wherein it would be a hardship for one to pay the regular rate. Think I lost but little, whereas I gained hundreds in the year ending June 30th last. Had card printed and placed in treatment room stating that after July 1st, 1919, office treatments would be \$2.50. About the only comment given was they wondered why it had not come before. I am unable to see how we could possibly continue to do business on the same income we had four or five years ago.

Dr. Charles H. Whitcomb, Brooklyn, N. Y.

In 1918 we raised our fee to new patients from \$4.00 to \$5.00 in most cases. In 1919 we raised (the same raise) to a larger number and to some old patients and in 1920 we have raised it to even a larger percent of our old patients, merely telling the selected cases that the fee would be raised from a certain date. In some cases we have raised to \$6.00 (only a few cases). It was not difficult and it has not lost us any practice that we know of. Possibly a few may have gone elsewhere, but our practice has increased tremendously. One other D.O. charges \$5.00 but I believe most of the others charge \$4.00, \$3.50 and \$3.00. I almost know that every one could easily get \$4.00 and a few could easily get \$5.00 if they would get their nerve up and make the raise. We have no co-operation with M.D.'s in any way and do not know what their fees are. We raised fees for house calls from \$5.00 to \$6.00 and up, according to cases.

Dr. P. W. Gibson, Winfield, Kans.

We, as an association of three, have raised our prices as follows: We used to charge \$25.00 for 13 treatments at the office, with reduction to \$20.00 after 26 treatments. About two years ago we made it \$2.00 straight at office. House calls used to be \$2.50 for single calls. January 1st, 1920, we raised house calls to \$3.00 or \$2.50 a call for more than one call a day. Office treatments, still \$2.00 straight. June 1st, 1920, we raised to \$2.50 straight at office; \$3.00 straight at house. Night calls 9 p. m. to 7 a. m., \$3.50 to \$5.00. We told our old patients that this change was coming and posted our price list in office. A few dropped out, not many.

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THE OSTEOPATHIC PHYSICIAN

Dr. W. E. Waldo, Seattle, Wash.

Raised from \$2.00 to \$2.50 in November 1915. Raised to \$3.00 1918 and to \$5.00 in July, 1920. Did it for self defense, so I would not have to see so many people as I couldn't stand the strain. You ask was it difficult: I was paralyzed when I raised to \$2.50 and quite excited when I asked \$3.00, but was so worn out and exhausted trying to see them "all" that the \$5.00 was forced on me for health's sake. The \$5.00 cut practice one half. They are coming back now. Never did announce the raise except as the patients came in. Local D. O.'s charge \$3.00. Don't know what M. D.'s charge.

Dr. A. B. Caise, Marion, Ind.

Yes, I raised fees April 1st, 1920, to \$2.50, office; \$3.00, residence, and \$1.00 per mile out of city, whereas, before I had received \$2.00, office; \$2.50, residence and 75 cents per mile. Now I get extra for night calls, depending upon distance. It was *not difficult*. All I did was to have a card printed for the reception room and office, stating the fact. Lost no business. None noticed the difference. Other D.O.'s here get \$1.50 and \$2.00 office, with higher rates for visitation at residence and country. I do cooperate with M.D.'s where possible. No trouble.

Dr. Geo. H. Carpenter, Chicago, Ill.

Yes, We raised our fees in 1918-19—\$3.00, office; \$4.00 to \$5.00 for residence calls. No trouble experienced in making the increase. No loss of practice—in fact, it has increased my practice. We told each patient individually that owing to conditions it had to be done. They all agreed—don't know what others are charging. They never asked me, so I let them do as they please in this, as in other matters.

Dr. F. W. Olds, Milwaukee, Wisc.

Raised fees March, 1920, \$3.00 at office, \$5.00 at residence. Very little difficulty—patients expected it. Sent out announcements to clientele. Think most of the D.O.'s in Milwaukee have raised. Do not know what local M.D.'s did about their prices.

Dr. J. M. Shellenberger, York, Pa.

It wasn't difficult to raise my fees, most of the patients expected it. I believe in making a legitimate charge for the services we render. I believe we can handle our cases to a greater satisfaction if we receive an ample fee for our work.

Dr. J. W. Riley, Norwich, N. Y.

Charge \$2.00, office; \$2.50, residence. Old charge, \$1.50, office; \$2.00, residence. Date of raise, July, 1919.

Dr. A. Pettefer, Springfield, Mo.

Fees in 1915, \$1.50, office; \$2.00, call. All local osteopaths agreed to raise May 1st, 1920, to \$2.00 in office and \$3.00 a call. Put notice in paper to that effect thirty days in advance. No appreciable loss in practice. This meets the local schedule of the M.D.'s fees. We have a local chiro college here.

Dr. F. C. Leffring, Waterloo, Iowa

Increased fees January 1st, 1920, to \$2.50 office; \$3.50 residence—25% increase. Noticed no loss, in fact increase, although I don't think the increase was due to rate advance, but rather to increased prestige from our "flu" reputation. Announced raise by rubber stamp on bills sent out. Think at least one of the other osteopaths raised likewise. Did not make co-operation with any one else.

Dr. E. M. Herring, New York, N. Y.

Have raised my fees since 1915. Raised my fees in 1918 about 35 per cent to 40 per cent. They are now \$10 and up for examination. \$5.00 and up for office treatment. It was not difficult. Do not think I have lost much, if any, practice. Explained the reason to them verbally and they responded splendidly. The local osteopaths have the same or nearly the same fees. The M. D.'s raised the fees first. New York is so cosmopolitan it is difficult to act as a body.

Dr. W. T. Thomas, Tacoma, Wash.

I raised my fee from \$2.00 to \$2.50 in the office, and from \$2.50 to \$3.50 for calls, September, 1918. It was not difficult and I lost no practice that I know of. I placed a card of rates in the treating rooms. All full-term, honest-to-God osteopaths here charge the same; a few short-termers charge less, but that cuts no ice with me. Guess they get all their treatments are worth. I keep an eye on what the M.D. does in rates.

Dr. G. B. Wolf, Long Branch, Calif.

Up to leaving Ottawa, Kansas, 5 years ago, I got \$1.50 office, \$2.00 house. Here I am getting \$2.50 and \$3.00 office, and \$3.50 to \$4.00 house calls. I started in here January, 1919, with \$2.00 office and \$3.00 house, but raised to above prices soon after. It has been expensive starting in but am gradually gaining ground.

Dr. W. M. Hatfield, Moscow, Idaho

Yes and no. I have raised only 50 cents on the first treatment. The rest get the old price, only for special or local treatments, that is \$2.50. For blood pressure and urinalysis, \$5.00. The people here take it very well and so far as I know did not lose very much, if any practice. I would raise more, but it is time to drop now as everything else will. I would advise you not to raise.

Dr. Clarence B. Utterback, Tacoma, Washington

Sure I raised my fee and in three months my practice jumped 400 per cent. Patients will pay anything you ask if you give them what they are looking for.

Dr. W. L. Laslett, West Roxbury District, Boston, Mass.

Never since beginning practice have I had a set fee regardless of the treatment given. For patients coming for regular treatments I have had the following as a basis for charges: About 1915 I raised the fees from a minimum \$3.00 to a minimum \$5.00 for the first visit. For further regular office treatments I advanced from a minimum \$2.00 to a minimum \$3.00. For the past year I have added \$1.00 to these fees for treatments given from 7 to 9 p. m. As far as possible I make my office appointments between 9 a. m. and 5 p. m. For house visits I charge from \$4.00 to \$10.00. Special work as nose, throat, ear, eye, etc., are all extra. I do not cooperate with the local M. D.'s for my fees are higher than theirs. I experienced no difficulty.

Dr. Frank H. Avery, Oakland, Calif.

Have raised 25 per cent since 1915. Ordinary fee, \$2.50; single treatment \$3.00, office only. Noticed no difference or any objection on the part of patients. Several voluntarily raised my prices for me to that increase, saying the service was worth more money. Am now going into rectal and colon work where fees are very high. Hope to increase the income and reduce hours of work.

Dr. A. C. McDaniel, Oakland, Calif.

Yes, I raised in my fees two years ago. From \$2.00 to \$2.50 and \$3.00. Had no difficulty. Simply told old patients I had to do it and new ones knew no different. I feel I lost nothing but made by charging. Other boys here charge same as I do. Some higher. This is a dandy field for our work and we feel proud of our osteopaths for the good work they do in upholding the good name of the profession. As to the M.D.'s I know but little. They have been kind to me and let me have my way. Tell the field members not to stand back. Charge what the traffic will stand and be not afraid!

Dr. C. M. Bancroft, Canandaigua, N. Y.

I increased my fees 25% in August, 1918. The increase was not sufficient but I believe that in a small community the reaction to high prices will be more than in the larger places, and I can continue my increase for a number of years after inflation is over—if it is ever over! I had no difficulty and did not lose patients so far as I know. The number of patients seen each year since the increase has been greater than the preceding years. No notice was given to patients and the only explanation offered was to the effect that I had to keep pace with commodity prices. I do not know what the M.D.'s charge, and I believe it to be a good plan to never allow any one to charge greater fees than you do in the same community! If you are as good or better than the rest, then get busy and catch up and charge for it. No one will get greater fees than he charges and no man can charge more than he is worth and get away with it. Some of our people seem to insist that they are worth little and charge accordingly.

Dr. Louise M. Jones, Portland, Maine

I raised my fee \$1.00 for an office call, and \$2.00 for an outside call until 9 p. m.; more after that. Had no difficulty at all, and lost no practice in so doing. I simply told my patients of the increase.

Dr. A. P. Kottler, Chicago

I raised my fee to \$3.00 (office treatments) about a year ago. Examination or first visit, \$5.00. Laboratory fees (diagnostic) extra. I go to the home of a patient for \$4.00, \$5.00 or \$6.00, according to the distance and ability to pay. Others I charge nothing, rather than accept a smaller fee, unless I take the case for a given figure regardless of the number of treatments necessary. This latter I do for those who cannot afford to pay the regular fee per treatment. They thus never know how much "per" they are paying. I find people rather expected the raise, in most instances. I do not know of any cases I lost for this reason, excepting some went to a cheaper charging D.O. That doesn't worry me any.

Dr. Edwin W. Tate, Newark, N. J.

I have raised my fee since 1915 and although I did lose a few patients, my income has been larger than it was previously, and the majority of my patients said they were expecting me to raise my fee. The announcement was made by placing a card in each treating room, stating that my professional charge was increased on a certain date. I do not know what other local osteopaths are charging, nor do I care, as that is their business and not mine. Our method of charging so much per treatment is all wrong, as we should charge according to each case, especially when a case of long standing is cured by a single treatment and a few dollars is the fee when it should be commensurate with the skill required to effect the cure.

Help Us Put It Over by Christmas!
You Can Do It by Buying Your Bond Today!

The Profession Stands Behind Us in Our Bond Enterprise!

The profession is with us!
They are buying our bonds.

At the rate subscriptions are pouring in at present the whole flotation promises to be completed by Christmas!

And they are writing us hundreds and hundreds of letters—letters that are letters—real “mash notes” and love letters, friends—letters that warm the cockles of the heart and make us glad we are alive and proud to be in the service of spreading the light of osteopathic healing among men!

Friends of the profession, we appreciate it, we assure you, one and all—we are touched greatly by your generous outpouring of friendship, loyalty, co-operation and support. It shapes up in our minds as a dandy sort of celebration of our twenty years of wedlock to our advertising service. And while they usually give folks only crystal souvenirs on their 20th anniversary, in our case these tokens of your good will and appreciation are gold dollars, mint fine, such as usually embody only fifty-year nuptial blessings!

Well—your good wishes and co-operation are not misplaced, friends of osteopathy, and the extension of our field literature campaign for osteopathic recognition which we plan to issue from our new plant at Waukegan will, we predict, bring back to you investors (and to the whole profession) a much richer income than the 7 per cent per annum interest money which your Bunting Building Corporation Bonds will pay at your bank.

We are glad to report that you collectively have now bought 50 per cent of our bond issue. That is to say, \$25,000 of our flotation is now placed. About a month ago we had reached the 33 per cent mark—we were one-third along our way to the goal—and we knew then that success had crowned our efforts, that the complete issue would be absorbed by the profession about the end of the year or soon after it.

“Arnold, the first third is the hardest part of the job to sell”, we said to our good man Friday; “the advertising of our bonds to the profession is now done; they now know a good deal about the nature and value of our security; vacation time is well behind us; the

season of bully practice and brisk collections is on; and the remaining two-thirds of our bonds will now be sold far easier and in quicker time than the first third. We are just over the hill. Our ambition to have the profession subscribe the issue is now a sure success.”

Arnold concurred in the diagnosis.

The receipt of subscriptions in the ensuing time which jumped our bond sales from \$17,000 to \$25,500 is making good that prophecy. So, we are now well on the way—more than half the journey has been covered—and we ought to be able to write success on our bond selling campaign by Christmas.

However, good friends—they are not all sold yet! Don't hold back your looked-for subscription because you suppose there are no bonds left! There are bonds to sell yet—\$25,000 of them. They are ready to deliver **now**. Don't get the idea you are too late—**you really aren't!** And unless **you** come in now and by doing **your** share in this enterprise help us advance our “goal day” from March 1st to Christmas, the job will not be finished by that date.

We want **you** with us!

We want **you** to feel that you have a part in this fine enterprise for osteopathic propaganda. We want you to have the fine reward represented by “7 per cent with safety” on your savings. And even if it is hard to squeeze out savings, or perchance if you have no savings you can use and may have to borrow money to buy your bond—as a lot of our loyal friends are doing!—we still confidently expect you to do your part and are sure you will get more pleasure from doing it just because it is hard to do and may require some immediate sacrifice. A cause that is **worth** sacrificing for is worth supporting.

Send in your reservation today—you do not need to pay cash—buy on the monthly installment plan, if it is more convenient—many are doing this, including both the buyers of one \$100 bond and the buyers of \$1,000 bonds. **Help us achieve our goal by Christmas!** That goal will be a victory for osteopathic propaganda as well as Bunting.

[See a representative bunch of our Bond Buyers on page 28]

Help Put a Roof Over the Presses
That Grind Out Osteopathic Success.

THE OSTEOPATHIC PHYSICIAN

Dr. Nettie M. Hurd, Chicago

The high cost of living and the paying of \$4.00 a square foot for office space made a change in prices for work done necessary. About two years ago, the profession in Chicago stepped up a notch. However I believe that in order to increase prices it is absolutely necessary to increase mental equipment. That is the only fair exchange to the patient for their money expended. There is no reason in my mind why an osteopathic physician should not receive good fees if he does thorough work. If he is equipped to give a thorough physical examination, make a careful, accurate diagnosis in whatever field the condition lies, he should be paid for his knowledge; and I find that the public is willing and glad to co-operate. I began two years ago to charge \$10 for examination, not including laboratory fees. I grant you a few patients refused, but where one was lost several were referred by those who appreciate thorough, thoughtful study. This fee has now been raised to \$25 up, and my practice has been doubled. Announcement was made verbally to patients or on the monthly statements that hereafter treatments at so much per. Yes, sir! I co-operate with M.D's in any and all ways. Both M.D's and D.O's are physicians—why *not* co-operate?

Dr. C. A. Dodson, Little Rock, Ark.

Before an osteopath increases his charges for treatment he should make his services worth more. People are willing to pay him all that he is worth. Time required, knowledge and skill of the D.O., and the financial ability of the patient to pay should determine the fee to be charged. Charge all that you are worth, but be sure that you are worth all that you charge. I have frequently been told by patients that they preferred to pay \$5.00 for a good treatment, to giving \$2.00 for a poor treatment. I hear some complaint of osteopaths in the large cities charging large fees and giving poor treatments. Complaint is often made that osteopaths are in such a hurry to get the fee that they neither take time to find or correct the lesions.

Dr. L. R. Purkey, Portland, Ore.

I raised my fees to \$2.50 and \$3.00 the first of this year. Very little objections—no noticeable loss of practice—some other osteopaths still maintain the former rate of \$2.00 and are doing less than we who have raised. I use *OH* magazines instead of business cards—they don't cost much more and are more effective. You have done remarkably well with us in keeping the price where it was so long—we can't have much of a kick coming. We should use more magazines to increase our practice and forget the increase in cost of our advertising. That's all.

Dr. G. E. Thompson, Peoria, Ill.

I raised my prices August 1st, 1920, from \$2.00 to \$3.00 straight. Calls from \$3.00 to \$4.00 minimum. I had cards printed announcing the changes in prices to take place August 1st and placed one in each room of my office; then August 1st I placed cards in each room with the established prices. I use these prices as a minimum and charge according to the case, charging \$5.00 and up for the examination and first services rendered. I have lost some patients, but it has weeded out the undesirable ones who did not appreciate the value of osteopathy; some have gone to chiropractors. Expect my income to be larger and may have spare time for study. Above prices should be higher.

Dr. C. B. Hunt, Omaha, Nebr.

Last spring the Omaha Osteopathic Association decided to raise the local rates from \$2.00 to \$2.50 and up for office treatment. A number charging at least \$3.00; examination from \$3.00 to \$3.50 and up. Visits from \$3.00, \$4.00 and \$5.00. Night calls, extra. We, personally, announced the raise to our patients through the mails. Many of the local osteopaths have the above rates printed on a card to be hung on the wall. There were some objections while a number were surprised that we had not raised them before.

Dr. H. H. Trimble, Moultrie, Ga.

Been in practice since June, 1911. Office treatment has never been less than \$2.00 per. House calls (day) never less than \$2.50 per, even if so many as three are made in one day to the same patient. Night calls, extra, according to time required. Prices raised July 1st, 1919. Office treatment, \$2.50 per; house calls (day) \$3.00 per; night calls, \$5.00 per; country calls, \$3.00, 50 cents extra per mile, up to five miles; over five miles, straight charge of \$1.00 per mile. No kick on raise. Lost no practice that I know of. Pasted raise of prices on office door, July 1st, 1919. No other osteopath here. M.D's friendly to me.

Dr. Manly A. Brandon, Lorain, Ohio

I raised the price of my outside calls from \$2.50 to \$3.00, and the night calls from \$3.00 to \$5.00. This raise took place early last spring. Of course there was a little kicking at first, but that was soon over. I noticed no falling off of the day work, but there certainly was a lessening of the night work—much to my joy! I inserted an ad in our daily paper, saying that after a certain date the fees would be raised as mentioned. The fees of all osteopaths in the county are the same. We did not co-operate with the M.D's as to raising of fees, but I understand they raised about the same time. I feel that I made a mistake in not raising the price of my office treatments, and am considering that at present.

Dr. W. S. Mills, Ann Arbor, Mich.

I charged \$2.00 at office and \$2.50 for house calls from 1900 to January 1st, 1920. I then changed to \$2.50 at office and \$3.00 for house calls (minimum). I had no trouble at all in making the change. I talked frankly with my old patients and placed some cards on walls of treatment rooms announcing the change. I have not co-operated with M.D's about fees, but am sure they have all made sharp advances in fees, too. I am now thinking seriously of going to \$3.00 and \$4.00 November 1st.

Dr. H. S. Beckler, Staunton, Va.

Yes, I have raised my fees twice. Two years ago last August I simply wrote on letter size sheets which I pinned up in my office room, the legend, "Prices Advanced 25% August 1st" and last June 1st, I announced that the cost of treatment would be 20% more than heretofore. My secretary told all old patients that this had been found necessary, as they came in, and explained that the treatment for that day would be at the old price, so they would not be embarrassed in any way. My patients know I take post-graduate courses, attend conventions, etc., for their benefit and that my fee does not represent my worth to them. I charge a living wage and not a price representing my actual worth to them. Last year was my best, above \$10,000, and this year may equal it.

Dr. Leon E. Page, Newport, Vt.

When I located in this town, 1917, (population 5,000) osteopathy was new and the M.D. prices were low (50 cents for office calls, in one instance). My first prices were \$2.00 at office and \$2.50 for house calls. In February, 1920, I raised each 50 cents, as did the other osteopaths in the state. It was some time before my total income equalled what it did before, but in four or six weeks the adjustment was made. There is no hospital here and M.D. rates are much lower than in most places, which would make a further raise difficult. I announced the raise as a state measure to standardize the price of treatments. In surrounding towns which I go to, the price is \$3.00.

Dr. G. Washington Moore, Philadelphia, Pa.

One year ago I raised to \$5.00 for examination and first treatment, and \$3.00 per treatment, except to a few. I have received \$3.00 since 1915 for many. It is not difficult to get it. I say nothing to other osteopaths or M.D's, even in my own office. I make my services valuable and my people pay what I ask. Many cases I treat daily and twice daily, charging for each treatment. Practice increases each year. September, 1920, was 55 per cent over September, 1919. I have a seven-passenger Buick Sedan in Cynwyd and a big house. It is my best advice to osteopaths to live well, and my practice while large has greater possibilities.

Dr. C. O. Fogg, Lakewood, N. J.

On account of Lakewood being more or less a resort town, I have had two prices, i.e.—local and transient, i.e.—Old price, local, \$2.00 at office; \$3.00 out calls; transient, \$3.00 at office; \$5.00 out calls. Price September 1st, 1920, local \$3.00 at office; \$5.00 out calls; transient, \$4.00 at office; \$6.00 out calls. Applying prices to all newcomers and old patients returning. Carrying a few at old fee, but they have got to come to it.

Dr. A. L. McGowan, Dayton, Ohio

I am attaching a card which I mailed the middle of March to all my patients. Self explanatory. I didn't want to insult their intelligence by explaining why. I find most of them expected it even sooner. My practice increased over one-third after the raise. The M.D's in this building have a fee of \$3.00 for office consultation, the patient receiving just a prescription. One other osteopath here has a minimum of \$3.00 for office fee. I know it pays. A patient reasons "If the doctor does not keep up to date in fee, is it not also true of his scientific learning?" "On and after April 1st, 1920, the fee for osteopathic treatments will be—office \$3.00; house calls, \$4.00, if call is received before 6 p. m.; \$5.00, if call is received after 6 p. m.; \$10, if call is received after midnight; obstetrical cases, \$50; terms, cash." Dr. A. L. McGowan, 1207-1212 Lindsey Building, Dayton, Ohio.

Dr. George W. Perrin, Denver, Colorado

Your letter is timely and of such vital nature. It should appeal and have the unequalled support of every practitioner of osteopathy. Yes, I raised my fees to \$3.00 office, and \$4.00 house calls in 1915, and \$5.00 for examination. July of this year 1920, I am charging *all new* patients \$10 for examination and \$5.00 for office treatments. No difficulty in getting it. I did more business and gave more treatments in July, August and September than in previous months. I take care of my share of those worthy poor. I co-operate with all those who will co-operate. Others are raising in the city.

We Shall Begin Building Our Waukegan Plant At Once!

For several good reasons we have advanced the date of beginning the erection of our new model office and printing plant at Waukegan five months. Instead of waiting until the end of next March—work will start at once! The building will be **finished** by next spring instead of **begun** then.

First, the brisk sale of our bond issue the past month and the progress made up to this time enables us to begin earlier than we had planned.

Second, we find that the Johns-Manville Company commence the erection of 25 acres of factory buildings in the flats below Waukegan at the same time next spring that we had purposed building. This enormous operation will make demand for all the masons, bricklayers and carpenters in the county and bring trainloads of others daily from Chicago, 36 miles away, and it would hinder greatly any ordinary building enterprise that had to compete for labor at the same time. It might stop our work altogether.

Third, labor in Waukegan can be had more abundantly and cheaper in the winter, and the output per man in winter is greater than in summer.

Fourth, we find that while our general office lease at 9 S. Clinton Street runs until December 31, 1921—the time by which we had planned to be fully moved into our new quarters—we can dispose profitably of this unexpired leasehold. Also, the leasehold at our job printing plant across the street will expire May 1, 1921, and by building at once we can remove that department into our new plant and have it operating before the necessity would arise to dicker for a short-term lease extension — which might be hard to negotiate.

Fifth, on general principles when something important is to be done we like to get at it at once and do it with dispatch. As Shakespeare put it, "to business that we like we rise betimes and go to it with delight."

Lumber has declined about 35 per cent in this market, and building trades are pretty stagnant; so we can probably build as cheaply now as next summer—if indeed that Johns-Manville operation in Waukegan next summer would not prevent us building altogether should we delay.

So, for all these reasons, being fully ready for the emergency, the die is cast and **we build now!**

This makes all the more pressure upon us for hearing from you with your bond subscription **at once**. Now is the time—this month—for every friend who intends to help at all to get in line. Help us put this roof over the presses that grind out the missionary literature for the science you practice. You will always be proud that your savings assisted this meritorious enterprise, and glad that your capital found such safe and profitable investment.

Help us complete the sale of our bond issue by Christmas and all the rest will be easy for us!

Remember the new "goal day" is Christmas—**not** March 31, 1921.

Will you let your money work two ways for you—make a high return with safety and at the same time help Bunting tell osteopathy to the world? Borrow the money if you have to, but at any cost get in on this enterprise with us. It deserves your support.

Help Us Put It Over by Christmas!

[See a representative bunch of our Bond Buyers on page 28]

**Buy a Bond Today and Help Us Complete
Our Flotation by Christmas!**

THE OSTEOPATHIC PHYSICIAN

Dr. Emma Cobb, Kalamazoo, Mich.

Yes, I have raised my fees. Last May I raised from \$2.00 to \$3.00 for office treatments and more for home calls, depending on distance and time of call, night or day. The profession, as far as I have interviewed them, seem to object to raises; so I waited awhile and then last May raised my fees regardless and cannot say just how much I did lose. Most of my former patients are with me, I think. At least, my income is steadily increasing and at a faster rate. I think I bank more cash and book more fees each week, but a few have gone to the cheaper osteopath. Can't blame them, these hard times. Explained why I raised to each patient when they inquired for the appointment. Local D.O.'s charge \$1.50 to \$2.00, which is a raise from \$1.00 to \$1.25.

Dr. W. M. Smiley, Albany, N. Y.

October 1st, 1917, I raised my fee from \$2.00 to \$2.50 and the first of October, 1920, I have raised my fee to \$3.00. No trouble at all. Should have raised sooner. No, it did not lose me any practice. I just announced to my patients that after a certain date the fee would be raised from \$2.00 to \$2.50 and from \$2.50 to \$3.00.

Dr. R. D. Head, Pittsfield, Mass.

In July, 1919, I raised my minimum office fee from \$2.00 to \$2.50 and outside calls correspondingly. For one month previous I posted a notice in each dressing room announcing the raise. Can charge the loss of two patients only to my raise in fees. They are not missed. There are five osteopaths in this town. One of the others raised fees soon after I did. No trouble in raising fees. Most people believe a doctor charges what he is worth.

Dr. E. B. Carney, Fort Scott, Kans.

1—We raised September 1st, 1918, 50 cents per treatment for both inside work and calls. September 1st, 1920, we increased outside calls another 50 cents. Former price, \$1.50 and \$2.00 now is \$2.00 and \$3.00. 2—Never one complaint; business better than ever. 3—I did \$2,000 more business last year than formerly. 4—Made no excuses whatever, just stated the amount at time or on bill. 5—All osteopaths charge same. 6—No, we pay no attention to what M.D.'s do.

Dr. P. D. Pauls, Albert Lea, Mich.

I have not raised fees to above \$2.00 but have cut out all discounts. I do charge more for "extras" such as gynecological and rectal examinations and treatments. I have always charged extra for these but have raised price some. This price raise should have been started earlier. Now that the cost of some articles of living has been reduced from 10 to 20 per cent and presumably cannot do other than go still lower, I have decided not to raise prices further except probably 50 cents on house calls.

Dr. J. G. Smith, Blair, Nebr.

We osteopaths of three counties got together by correspondence and fixed prices about March 1st. \$2.50 for single treatment; \$3.00 for city calls, etc. I found very little opposition from my patients. We announced it by having terms printed on cards and put up in our treatment rooms. Some have raised to \$3.00 since that time, so they claim, and I expect to make \$3.00 my cash price per treatment at least by November 1st. I have had the best year—that is, have given more treatments than any year since I have been practicing (1905), and have less savings to show for it this year. Am sure with you on this price boost.

Dr. Fred H. Butin, Memphis, Tenn.

In reply to your question, will say all of us D.O.'s here in Memphis have raised to \$3.00 office, and \$4.00 house. The M.D.'s are about the same, as far as I know. In 1917 I raised from \$2.00 to \$2.50. Lose some but gain some; so expect at least to break even. Am working on a sliding scale charge of what I think can pay, never under \$2.00; find it works very well and gives me a chance to charge more for special work. At present we are all suffering from hard times. Cotton off as well as other things but expect plenty of work after the election.

Dr. Irving Whalley, Philadelphia, Pa.

Yes, from time to time and on all new patients a raise of 50 to 100 per cent. No trouble. No lost patients. Simply stated facts, high cost of everything. I have no set charge, make the fee to suit the case—\$2.00, \$3.00, \$4.00 or \$5.00, as the case may be. I find this works better. Hope this gives you what you want.

Dr. W. L. Grubb, Pittsburgh, Pa.

Yes, I raised my fees April 1st, 1920, making uniform rates. No, it was not difficult. It actually gained practice for me. I announced it verbally. I do not know what other osteopaths charge. No, I did not consider the attitude of M.D.'s at all. I am going to make another raise in my rates between now and the first of the year. Osteopaths who know their business and believe thoroughly in it have no trouble to raise their fees, or anything else that is right. It is the *osteopathic compromiser* as a rule, who has weak and shaky knees. Faith in your ability to deliver the goods and a willingness to work like the devil to this end—these two things make success.

Dr. A. M. McNicol, Dixon, Ill.

Since 1915 fees have been raised in Dixon twice. Previous fees at the time I came to Dixon in September, 1916, were: House calls, \$2.00; office treatments, \$1.50 or fifteen office treatments for \$20. Nearly two years ago we raised rates to \$2.00 for single treatments at office, house calls we left at \$2.00, and we gave twelve office treatments for \$20 when paid in advance. Six months ago we raised the house call fee to \$2.50 and gave six office treatments for \$11 or eleven office treatments for \$20 when paid in advance; single office treatments were left at \$2.00. People paid the difference without question, and practice has increased very materially both with Dr. Trowbridge, the other osteopath, and myself. Of course our rates now are only what they should have been before the war. We announced the raise by placing a notice in our waiting and dressing rooms. We did not consult with the local M.D. as to making the raise.

Dr. John L. Ralston, Glencoe, Ill.

I am glad you are opening this subject. Have raised my fees 50% during the last two years. No complaints, and practice has increased all the time. The only difficulty is in the doctor's own mind. The people expect a raise and respect the doctor who charges more.

Dr. A. F. McWilliams, Boston, Mass.

Raised fees? Yes. When? Sixteen months ago. Raised to? \$4.00. Difficult? No. Announced two or three weeks in advance to those coming in. Loss of practice? Some, but had too much practice, anyway. Local D.O.? Vary from \$1.50 to \$4.00. Co-operation with M.D. as to raise? No.

Dr. Van B. Smith, Lincoln, Neb.

Previous to this date I made no extra charge for house calls but limited my outside work to sick bed or confining illness. I used this card: "Announcement—After January 1, 1919, a charge of \$3.00 will be made for all residence calls.—Van B. Smith, D.O." Very little "disturbance" was caused by this announcement. From January 1, 1919 to this date, April 1, 1920, my rate was \$2.00 at office and \$3.00 at residences. I got out a card as follows: "Announcement—Beginning with April 1, 1920, I will charge \$3.00 for office treatments and \$4.00 for residence calls; for night calls (after 11:30 p. m.) an amount proportionate to the time required.—Van B. Smith, D.O." This announcement caused even less comment than the previous one of January 1, 1919. I do not co-operate with any one regarding rates, either M.D. or D.O.

Drs. George A. and Helen C. Bridges, Providence, R. I.

Although Dr. Helen and myself graduated in 1919, January, we at once charged \$3.00 per treatment and have had no trouble in getting it and all the patients we desired to treat, and we both feel that we owe a lot of our success to "OH".

Dr. F. W. Sheldon, San Francisco, Cal.

In 1915 I was charging \$2.50 per treatment and in 1918 raised the price to \$3.00, which I have since charged, and am at the present time. I just raised the price and so far as I know never lost a patient from it. Most of our best men are charging the same, although some are on the "old standard of \$2.00."

Dr. J. Knight, McKinney, Texas

1. I have made a good substantial raise. 2. Made my raise in 1917. 3. Made a raise of 30% or 40%. 4. I found no difficulty in making a raise. 5. It did not make any difference in the volume of my practice. 6. I did not announce it at all. One day I just began charging more. 7. It is with pleasure that I co-operate with the local M.D.'s. 8. I pay no attention to chiro's fees.

Dr. Angie M. Allyn, Waverly, Ill.

Yes, raised fees in September, 1917, by adding 50 cents per treatment. No trouble or loss of patients. The new patients paid the new price. The former patients finished their course of treatments at the old price, but when they began again to take treatments, they paid the new raised price also. My explanation was "I cannot keep soul and body together, during these h. c. l. times on the present prices. Will have to ask you for more money or quit." They smiled and paid the raised prices willingly and good naturedly. We do not have any other "local osteopaths" in this town. Waverly claims only about 2,000 inhabitants. I surely do co-operate with the medical charges. Whatever they charge, I charge. The good doctor always gets the patients regardless of cost or competition.

Dr. Edith Trevitt, Monroe, Wisc.

Yes, our rates came up July 1st, 1920. Office work, \$2.50, formerly \$2.00. House calls \$3.00, formerly \$2.50. Night calls, \$5.00. Not difficult. Have had more than I can do since. Lost no practice. Announced through the papers and cards put up in office. No other osteopath here. Local M.D.'s will not co-operate in anything.

Get a Bond Today and Help Us Pay for Some of Those Shingles.

Seven Per Centum Per Annum, Safety, and Sound Sleep

Over \$90,000 worth of property at Waukegan, Illinois, will be held under mortgage as security for the \$50,000 Real Estate Gold Bonds of The Bunting Building Corporation. This security is back of the bonds collectively and individually. At the end of ten years the holder, even of any single \$100 unredeemed bond, will have a first mortgage on the entire \$90,000 worth of security.

Furthermore, all through the ten-year period of the life of the bonds the collective security will be steadily enhanced in two ways. First, by the contemplated retirement of bonds at the average rate of \$5,000 per annum; and second, by the increase in value of the property mortgaged. The first mortgage on the entire property remains unchanged in the hands of the trustee (the Chicago Title & Trust Company) all through the ten years, notwithstanding retirement of any part of the issue prior to expiration. Thus it is plain that the buyer of these bonds not only has ample security at the outset but his security tends constantly to increase.

This does not take into account at all the profits and net worth of our publishing business which constitute additional but unscheduled security.

As to the return on the investment: 7 per cent per annum guaranteed by a first-class First Mortgage Real Estate Gold Bond is a high return, even in these days of temporary excessive demand for capital. 7 per cent interest on these bonds, while a high rate, nevertheless represents an economy to us when compared with our down-town renting costs. An advantageous leasehold, covering even a longer term of years than that covered by the bond issue, insures payment of both capital and interest to our investors.

Time was, not long ago, when bonds offered at 6 per cent were shunned or at least regarded with suspicion because it was believed that they were not properly standardized or could not have sufficient security back of them. Four per cent, or at most five per cent, was considered extremely attractive on a first-class bond investment. That time will come again in the not distant future, say all the leading financial economists. When business has had a chance to readjust itself and recover from war's after-effects the excessive demand for capital of today will subside and then offerings of first class 7 per cent guaranteed bond investments, as all financiers agree, will be a thing of the past. The holders of these 7 per cent securities purchased today will then be reaping a harvest and their 7 per cent bonds will command a premium over face value.

Do you realize the increase in capital that 7 per cent per annum will produce? Seven per cent per annum on \$1,000—that is \$70 saved and compounded at 5 per cent, will yield at the end of the tenth year, \$880, or a total (with the original \$1,000) of \$1,880. So, \$5,000 invested now in Bunting Building 7 per cent Gold Bonds could be made to return to the investor \$9,400 at the expiration of the tenth year. It amounts to an almost doubling of capital. Surely, a very satisfactory way to save and accumulate for competence in later life; and the beauty of it is that it can be done with absolute safety and assurance as to outcome. Speculative stocks may promise great allurements but the risks involved usually cause constant and grave worry, and in many instances, unfortunately, the venture goes wrong, so there not only is no "profit" but the original capital itself is lost.

Put your surplus capital into the First Mortgage Real Estate Gold Bonds of The Bunting Building Corporation and you can bank 7 per cent per annum on it and enjoy sound sleep at nights through the knowledge that your capital is safely secured.

At the same time you will be showing proper regard and appreciation for the services of the man and corporation whose joint efforts to advance osteopathy through twenty years have been acknowledged as real factors in both its scientific and professional betterment. Support those who support you! It pays richly in the end. Have you bought your bond? It is ready for you.

[See a representative bunch of our Bond Buyers on page 28]

**How Much of This Load Will You Share With Us?
\$1,000? or \$500? or \$100? Be Just to Your Boosters!**

THE OSTEOPATHIC PHYSICIAN

DOCTORS

We know you are ever searching for something better and more up-to-the-minute for the benefit of your patients and yourself. You will find just what you are looking for written by thirteen of the best men in your profession in McConnell & Teal's 1920 Osteopathic Practice.

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Dr. H. V. Halladay's Applied Anatomy of the Spine, full of laboratory proven facts (all Osteopathic). Have you this book? \$3.50.

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Westminster Building, Chicago, Ill.

H. G. ROYER, President
C. O. PAULEY, Secretary and Treasurer

Dr. Clinton D. Berry and Dr. Gertrude Seeley Berry, Rochester, N. Y.

We have raised our prices. We raised from \$2.00 to \$2.50 two years ago and again from \$2.50 to \$3.00 about a year ago. Our practice was better after we raised. It seemed to help us in getting away from the chiro—put us in a different class from them. We are making a complete examination on nearly every case, charging \$5.00 for it, and we postpone treating the case until after we have had opportunity to analyze the urine. We had no trouble to speak of in raising the price. A very few persons said they could *not* pay the advance, but not many. Generally it was a person who would only take about two treatments. We would say to the objector, "Are you buying anything now at the same figure you did one, two or five years ago?" Of course they always said "NO". Then we said, "Why should you expect us to work at a less price than everyone else?" and the goose was cooked. We have in each treating room a little notice—about six or eight inches long and about five inches wide—in a neat little frame, with our prices. The patient is bound to see and read this and so is posted. We all have nearly the same prices here. In fact we have always held pretty closely to a line of prices. A few are treating at a little less as they are afraid of losing patients. But I observe that the "fearful" fellow has more time to sit down than the one who raises his price, works and earns it, and is perfectly independent. We do *not* co-operate with the local M.D.'s as to raise in fees but as a rule we are getting better fees than they do. In fact, I have made calls in the same houses, on the same dates and even treated the same patients, where we got \$1.00 more for the call than the M.D. received.

Dr. Esther M. Bebout, Akron, Ohio

Yes, I raised fees in February, 1920. No difficulty. The raise added 50 cents per treatment. No, not much loss of practice. I told the ones who were coming at the time that we would all raise in February. The ones who had not been coming but came back later expected it. We all raised at once to \$2.50. No co-operation in this fee matter with the medics.

Dr. P. E. Underwood, Middletown, Conn.

Raised fees September 1st, 1920, from \$2.00 to \$2.50. Most people expected it and offered no objections. Lost no practice by it. Posted printed notice in treatment rooms. Other local osteopaths charge \$2.50 in small towns; \$2.50 to \$3.50 in larger cities. I certainly do not co-operate with local M.D.'s as to raise of fees.

Dr. A. C. H. Esser, Chicago, Ill.

I raised my fees several years ago, making \$2.00 treatments \$3.00, \$4.00 and up as the case may be. The people seemed to expect to pay more. Some even said "you charge a dollar more than so and so, but I like your treatments better." We should get away from charging "so much per treatment"—but charge for what we do. Here is the experience of one of my patients who travels from coast to coast. He was in a town in Iowa. He asked for a good osteopath. Somebody said "we have a cracker-jack right here," so he went in and the osteopath "went over him a little." When he got through he asked "what do I owe you, doctor?" and he said "\$1.00". My patient handed him \$3.00 and said "go back to school." (This doctor had been in practice a long time, though). I report it as my patient reported it to me on returning.

Dr. J. Marshall Phillips, Hollywood, Ca

I am right now in the transitional period—just sliding over to the \$3.00 rate. I started my raise the first of September, 1920. My rates are as follows: Office treatments, \$3.00; residence, \$4.00; beyond community limits, \$4.00 plus mileage; night calls, \$5.00. Would have raised sooner but moved out here from Missouri in the Fall of 1918 and maintained the old rate (\$2.00) until practice built up. Would have raised even sooner than I did if other osteopaths in Hollywood had not held to the old rate. I believe now the rate here is almost uniform. In instituting the new prices the change is gradual. A neat little sign noting the three rates above mentioned is hung on the wall. Old patients taking courses continue at the old rate; explanation is made that the old rate expires at end of course which may run three days or three months longer. All new patients pay the new rate. So far as I have heard of no complaint in the community of charges made by osteopathic physicians. In my own practice I have had no noticeable difficulty in changing the prices. One new patient remarked that he didn't see how we made ends meet at the old rate. Another said the price was perfectly satisfactory to him. So there you are! One local M.D. has a sign on his wall giving the rates: Office calls, \$2.00; house calls, \$5.00. I calculate that if the medics can get away with those prices that osteopaths are more than justified to charge the \$3.00 and \$4.00 rate. The very fact that the purchasing power of the dollar is but 42 cents should be sufficient reason for increasing the rates of osteopathic services. The cost of foodstuffs, household necessities, medical supplies, wearing apparel, land and real estate, *in fact everything*, is from two to three times what it used to be. Osteopaths have to pay the extra price for these, why should they not increase their rates in proportion to the extra which they must pay? Let's have the rates raised all over the country commensurate with conditions.

Dr. H. E. Hastings, Winnipeg, Can.

The Manitoba Osteopathic Association voted to raise fees. This went into effect November 1st, 1919. I was on the committee which recommended the increase. The new rate is: Examination, \$5.00; office treatment, \$3.00; house calls, \$4.00; special work, eye, ear, nose, throat, etc., from 50 cents up, depending upon what's done. Special rate for special cases, depending upon their circumstances, income and if deserving of special rate. Clinic (free) is to be commenced to take care of those who cannot pay. We notified our patients as they came in (before November 1st) that the new rate would commence November, 1919. Explaining to them, personally, why. Increase in cost of living, etc., and then asked them if we are not justified? Invariably they say we are. One should be somewhat tactful in mentioning it. Have lost only one patient that I know of through the increase. The other D.O.'s are supposed to charge the new rate. We mention that the M.D.'s have raised their fees also. Now that prices of many things seem to be on the decline it may be a bad time to raise fees. They should have been raised long ago, similar to other prices.

Dr. A. B. King, St. Louis, Mo.

Raised my fees September 1st, 1919, to \$3.00; house calls, \$4.00 and \$5.00. It was not difficult. Lost some house calls, gained in office work, which was a benefit. I made no announcement. Sent bill at end of month. Had one complaint from a slow patient. Some of the local osteopaths charge \$3.00. Some have not raised their price. We do not co-operate with M.D.'s as to fees. Glad you are stirring us up. None of us charge what it is worth.

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Dr. J. W. Parker, Kansas City, Mo.

On March 14th, 1920, in my settlement with Uncle Sam, I found my surplus was very much below what it should be, and realizing that many things I bought had advanced in price, I immediately informed my patients that treatments were \$3.00 instead of \$2.00. I lost one patient. All the others said they were surprised the raise had not come before. It fairly choked me some to say \$3.00, but I find it just as easy now as \$2.00 used to be! It's cheap at that, and I work better.

Dr. M. Mary Jodon, Lincoln, Nebr.

When did you raise? Last spring. How much? Office, \$2.00 to \$2.50; calls, \$2.00 to \$2.00. Was it difficult? Only in my own mind. Did you lose much, or any, practice? Not that I know of. How did you announce the raise to your field? By cards printed and placed conspicuously on office wall. What do other local osteopaths charge? Various prices but don't know just how much. I do not co-operate with M.D's.

Dr. George K. Meyer, Monticello, Iowa

I raised my price from \$1.50 to \$2.00 for office treatment, and from \$2.00 to \$2.50 for residence calls on January 1st, 1920. There were few complaints, though I feel that I lost some patients to the chiro who gives 12 adjustments for \$10.00, and some people cannot see that it costs them more to take a dozen adjustments and not get much benefit than to go to an osteopath a time or two and get fixed up right. The M.D's charge \$3.00 per call in day time; \$5.00 night call, and \$1.00 per mile additional for country calls. I simply told my patients of increase of price after January 1st, 1920.

Dr. W. L. Burnard, York, Nebr.

Raised, 1918, from \$2.00 to \$3.00. Not difficult. No loss. Notified field openly. Other three D.O's charge \$2.00. No co-operation with M.D's.

Dr. Nannie B. Riley, Rome, Ga.

Yes, raised in May. Would have done so sooner but the man would not then. \$2.50 office; \$3.00 out, and night in proportion, and takes about all of it, with a little more, to meet the cost of living.

Dr. B. L. Blocker, Chattanooga, Tenn.

I will answer your inquiry in regard to fees at once. I don't know how the other osteopaths in our city are faring but I have just been able to make a living since coming here, 17 years ago. Some who have a practice among the rich, who take treatment as a fad, just like they go to the beauty parlor, make money, I suppose. My practice is among people of moderate means to whom \$2.00 seems quite an item. I have tried to raise my price on new patients to \$2.50 and have had them call me up to know why I was overcharging them, saying that Dr. ——— only charges \$2.00." I have lost three desirable patients recently for that reason. Two dollars possible would be enough, if I had a large practice.

Dr. B. P. Shepherd, Portland, Oregon

On September 1st, 1919, I raised my fees from \$2.00 to \$2.50 for office treatments and did not lose but one patient that I know of. I simply told my patients during August that beginning September 1st, I would charge \$2.50. No concerted action with any one except my associate. Other D.O's are now charging from \$2.00 to \$2.50 and one or two charge \$3.00.

Dr. Carl Kettler, Washington, D. C.

I have reason to believe that I command the largest fees of any member of our profession, which indicates that I have not in any way cheapened osteopathy but have put it upon a higher plane, commanding the attention of a large number of intelligent an influential people here in Washington. I am getting these fees in the face of something like 385 "competing" chiropractors all around me. There is a school of chiropractors here that turns out 200 or more graduates a year.

Dr. I. F. Yeater, Altoona, Pa.

There must certainly be something wrong with the stalwarts who are in despair because of need of money. I have been in practice almost fourteen years at the same stand. I made expenses the first month I opened my office, and have treated as high as forty-one patients a day this week, and many of those acute cases, house calls. The past two years I have cut out my obstetrics in order to reduce my work; have turned away as much as \$25 worth of work a day. Now if these fellow practitioners who are on the ragged edge of despair because of the h. c. l. will throw off their coats and go to work and "produce the goods", get results, and charge just what their communities can afford to pay, there is no question about their financial and professional success. I am wearing out my fourth automobile now; and my whole trouble is to keep from working too much, and I am satisfied with my income. However, I will answer your questions in order. Yes, I raised rates August, 1918, from 33½% to 50%. It was not difficult. I believe I lost no patients. Some patients offered me more money than asked. I did not announce it—just charged it. I am not sure what other D.O's charge; there are too few to know.

**Bunting Building Corporation Bonds Are
Delivered Just as Soon as You Pay for Them.**

THE OSTEOPATHIC PHYSICIAN

Dr. John M. Ogle, Moncton, N. Brunswick

I bought this practice in 1914 from Dr. Durham. His highest month before that had been \$398.50. My highest has been \$1,600.00 plus. There was a peculiar situation here before my time. They treated for \$25.00 per month, daily treatments, if the patient wanted them. About 20 per cent at \$1.00 per, urinalysis gratis, etc. About 25 minute treatments. \$2.50 for calls and many at \$2.00 per. Now I give six to eight treatments per hour on an average, and treat three to five times per week, where I formerly gave one or two per week. Charge \$3.00 up to \$10.00 for examinations. Laboratory examinations, \$1.00 to \$5.00. Calls, \$3.00 to \$5.00 for night, plus \$1.00 mileage for country. No \$1.00 treatments now. But still charge \$2.00 per. As I figure it, the people are paying about \$4.00 but do not realize it. I may be wrong in my reasoning but I have increased my income 400 per cent in six years. Last fall I drove to the country on a vacation day and bought my winter's supply of apples for \$9.00; potatoes at \$1.00 per bushel; sold some last spring at a profit and my winter's supply really cost me \$4.00. I get my wood for cost on the farm. I buy cloth wholesale and my clothes cost about 50 per cent below the average market price. (The factory is near and the manager is a patient of mine). Really, my expenses are not over 150 per cent more than five years ago, and I am sure that my income is at least 300 per cent more or 400 per cent over 1914. I have experimented and cut out this and that in my treatments so that now I waste very little time. I am not as tired now after giving forty treatments as I used to be after twenty per day. I believe that most D.O.'s could buy at wholesale if they would do it and save many dollars. I have room for fifty bushels of vegetables and fifty cases of canned goods, fifteen tons of coal and ten cords of wood in my basement. It helps. Am I reasoning correctly or not? I know that many D.O.'s can not do as I have; but it seems to be the best way for me to do; although sometimes I feel like raising my fees anyway. In some cases I charge a fat fee for a case, as setting an innominate. Recently was called to a case of appendicitis; it cleared up in a day and I charged \$10.00 for the two calls. This letter is disconnected but it is written just as the various factors come to mind. I hope I have given enough details to enable you to visualize my field as I know it. I find that my results are better since I treat short, specifically, and almost daily. People complain less of being sore and tired afterwards. My collections run about 95 per cent. I have used 3,000 Williams booklets; give 300 to 400 O.M. of the AOA subscriptions, besides using 300 to 400 Osteopathic Healths regularly per month.

Dr. John A. Cohalan, Philadelphia, Pa.

I did not raise fee during the war for patriotic reasons. After the armistice I tried it out on new patients. When I had enough at the new prices to feel secure I raised all to \$1.50 (people of moderate means) \$3.00, the (well-to-do) 10 and 30 per cent respectively. I do a strictly office practice. Have no office in my home in suburbs. Use straight ten-finger osteopathy. People seem to want it. I send patients who require drugs (or think they do) to the fellow who knows that game better than I do. Certainly, I have no kick coming so far as income is concerned. I sent this card to 800 former patients: "Dr. John A. Cohalan, Suite 705, 21 S. 12th St., Philadelphia, Pa., owing to advancing costs the fee for osteopathic treatment will be advanced to \$3.00." To those who had paid \$1.00 I simply drew a line through the \$3.00 and wrote \$1.50. I did not care to have the low fee to appear in print. *Not one real osteopath has failed in Philadelphia.*

Dr. W. H. Carr, Bluefield, W. Va.

Fees raised twice since 1915, once November 1918 from \$2.00 to \$2.50 and July 1st, 1920 from \$2.50 to \$3.00 and \$5.00 for examination and treatment. We found but little trouble in raising. Ninety per cent agreed that it was necessary. Practice has steadily increased since last raise. Notice to the effect that a raise would take place on a certain date was placed in each room, giving rates. No other osteopath in town except my associate. M. D.'s raised their rates first, but got less than we get.

Dr. W. Orrin Flory, Minneapolis, Minn.

I raised my fees on March 1st, 1918, from \$3.00 to \$5.00 for office treatments, and \$5.00 to \$8.00 for house calls. It was not at all difficult and don't believe I lost any patients. Most of our local osteopaths have since raised to \$3.00 and some of those in the small towns also. See article on page 12 The OP for September which explains my position fully.

Dr. L. B. Overfelt, Boulder, Colo.

I raised my fees five years ago. \$5.00 for examination, sometimes \$10.00, depending upon the extent of the examination, and \$3.00 for treatment. First, I took a post-graduate course, then made my raise, and have been taking post-graduate work every year since. It is easier to get good fees if you are willing to make a real examination of your patient. I have increased my income at least 1,000 per cent over what I formerly did by showing my clientele that I am wide awake and willing to put some money back into my profession. I made no announcements of the raise in fees but to every new patient that came along and to old ones I gave information as they came to the office, so I had no trouble with it. As to other osteopathic physicians here I think their fees are on the same old basis.

Dr. G. E. Morris, Clarksburg, West Va.

I raised my fees to \$2.50 office and \$3.00 residence over a year ago. At present I am thinking of making another advance. Really, \$3.00 for office and \$4.00 for outside work is about correct. Clarksburg has a population of 28,000. No one has ever objected to an advanced fee. Lost no practice. Merely told them my fee had advanced at a certain time, just like the grocers said about sugar. M.D.'s charge \$2.00 in office, and \$3.00 out, in our city.

Dr. E. M. Cameron, Richmond, Mo.

Raised my fees in October, 1918—50 cents additional. It was not difficult. It did not cause any loss of business. Put a notice in local newspapers. Other local osteopaths charge \$2.00, \$2.50. No co-operation with M.D.'s.

Dr. D. M. Kline, Malvern, Iowa

Yes, I have raised my fees since 1915. I am in a small town of 1,300. Office treatments in 1915 were \$1.00 and \$1.50; now, \$2.00 and \$2.50; calls in town, \$2.50 to \$3.50; country calls raised accordingly. Obstetrics 1915 were \$10 to \$15; now \$25 to \$50. I co-operate with local M.D.'s as to raise of fees in every respect, x-ray, surgical, etc. We made no announcement. Agreed and raised. Business has been better for it.

Dr. A. M. Wiles, Jerseyville, Ill.

Raised slightly in 1918. Five per cent. No difficulty. No loss of practice. Made announcements verbally only. I am the only one here. Yes, I co-operated with medics who raised, too.

Dr. C. W. McCurdy, Brandon, Ontario, Canada

I still keep \$2.00 or \$2.50 straight cash office fee, or sometimes \$25 per month, when I want to hold a patient, especially until I can reach results—but, my examination fee separate is never less than \$5.00 cash, more often \$10. Always \$3.00 and up outside office in city, and several times when I have gone 35 to 50 miles, special call, I have collected \$30 or \$35. This is a farming district, scores of patients come 30 to 50 miles in autos for treatment. My office expenses are light compared to Philadelphia, New York or Chicago, or even Winnipeg, but I keep my fees even with the M.D.'s. I often earn in a *single day* in the office my *entire* office rental for the month. If osteopaths are starving in the U. S., let such come to Manitoba. Virden (population 2,000) is 50 miles west on the main line of C. P. R. R. from Brandon. I had a branch office there when I first came here, Saturday afternoons and evenings only, and frequently collected \$20 cash for the trip, \$3.00 per treatment. My own office here gave me all I could do, so I gave up Virden. But the city has a rich farming district surrounding. Another good location is Carberry (3,000), about 30 miles east of this point on the main line of C. P. R. R., a rich farming district—good crops there this year. Another is Neepawa, 30 miles north of Carberry, 2,000 people. They badly want a good osteopath. I was there in September. Rich farmers. Also Dauphin, 30 miles north—6,000 people—splendid location, and fine progressive city. A good man of experience should make \$3,000 the first year at Dauphin. There are two chiros there now and busy. Magazine publicity would bring fine practice promptly. I was all through that country on my vacation, September 1st to 10th. There is, as yet, no law governing the practice of osteopathy in this province nor east of this point; may get a law this winter so no license is required *now!* The medical men here are my friends, some send me patients, so if a four-year graduate would come here, (this province), be a good mixer, interest himself in public affairs, be a good Canadian, tactful, he will make money and save it. Collections are easy—98 per cent of my earnings; life here is easy, climate invigorating, cold from December to March, but there is so much sunshine and the air is so dry one does not feel the cold. 40 degrees F. below zero. I have worn the same grade of clothes here that I wore in Philadelphia and did not suffer as much.

Dr. Ira F. Richardson, Fremont, Nebr.

One year ago the medics raised call fees to \$3.00. We (two osteopaths) raised accordingly; a third osteopath was asked to come in but would not agree to do so. We get \$5.00 for examinations, \$2.00 for treatments, straight. Any extra work that used to go in free we now make a charge for. We considered raising treatments to \$3.00 but have not done so. From many indications, now is not the time to do so. Any osteopath that can't make living expenses should read "Something Wrong", as there sure is!

Dr. C. B. Atzen, Omaha, Nebr.

It is my personal opinion that the osteopathic profession is in better condition, financially speaking, than any other like profession. I have increased my fees 25 per cent over the former fees, a little over a year ago. It has no effect on the amount of my practice. The rest of the profession has done likewise here. I feel certain that any one who has his heart in the game need not suffer financially in our professional labors, even though the cost of living is much higher.

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Drs. Nowlin and Curry, Farmer City, Ill.

We located in Farmer City, Ill., January 30th, 1903, population then 1,607, now 1,700. Osteopathic rates had previously been \$1.00 per and osteopathy was, so to speak, practically dead. We made a rate of \$1.50 per to adults and \$1.00 to children under 12; in 1908 we changed rates to \$2.00 per, first ten treatments, and \$1.50 per thereafter, and regular \$1.50 rates to children under 12; in 1915 we made a straight \$2.00 rate; no children's rate; in April, 1919, began charging \$2.00 extra for examination; in August, 1919, made \$2.00 for examination and \$2.50 per treatment. Obstetrical rates were \$10 in 1903 and are now \$25 plus mileage in the country. Medical doctors have raised their rates some but we have always raised our rates before they did. We told our patients we must have a living fee for our services or quit practice; they never objected and we have lost practically no patients because of our advanced rates. We could have raised to \$3.00 per if the other D.O's near here would raise their rates, but only a few near us have \$2.50 rates; several have the \$2.00 rate and many only a

\$1.50 rate. We cannot figure how they get by the h. c. l. without raising their rates. We find that patients are willing to pay good prices for good services.

Dr. Howard R. Juvenal, Maryville, Mo.

When I came here in 1918, three other osteopaths were getting \$1.00 and \$1.25 for office treatment and \$1.50 for house visits. I started in for \$1.50 and \$2.00 office, and \$2.00 house visits. Along about the middle of July, 1920, I posted four signs supplied by M. O. A. announcing increase in rates. On August 1st these new rates went into effect. Raising from \$1.50 and \$2.00 at office to \$2.00, \$2.50. House visits were raised from \$2.00 to \$2.50 which rate applies from 7 a. m. to 9 p. m. After 9 p. m. the rate is \$3.00. Country rate the same as city plus \$1.00 per mile and up, according to road. It was not difficult to raise for the people were expecting it and were surprised we had not raised long ago. We did not lose any practice; in fact, I did more, and I think other osteopaths could report the same experience. In 1919, August practice was \$192. In 1920, \$454. The \$454 represents an increase of \$87.50 due to increase in rate. In other words, I would have done only \$366.50 on the old rate basis. A nice increase, isn't it? In September, 1919, practice was \$210.50, raised to \$378 in 1920, which represents an increase of \$82.50 for same increased rate reason. There is \$170 increase in practice in two months, due to a 50 cent raise in treatments. Three other osteopaths here in this county charge the same rates. We pay no attention to the M.D.s' prices. We sell our services for what we think is a fair price. They do the same. All of us here have some charity work. Some work is done free while others are charged \$1.50 for our services who cannot afford to pay the increase. We had an understanding here among us that we would need to do some charity work at lower rates.

Dr. Clifton A. Crosby, Chicago, Illinois

This is just the subject I have wanted to get off my chest. After my return from government service, Spring of 1919, I received \$2.00 at office and \$2.50 (locally) for residence calls. One frank prospective informed me that this charge was "highway robbery"—her mother-in-law is a chiro-quack-tor! This made me mad, so I decided to go over the top, and October 1st, 1919, my rates were raised to \$2.50 office, and \$3.00 residence. No difficulty whatever. May 1st, 1920, office rent boosted 50 per cent—hence my present rates were raised promptly to \$3.00 office, \$5.00 residence, first call, and \$4.00 residence for each succeeding call. No course of treatments given. Special rates accordingly for those who deserve them, and they appreciate this special favor. All old patients gladly "adjust" themselves to these rates and not a single complaint has been made to me—in fact, it's easier to get what we are entitled to.

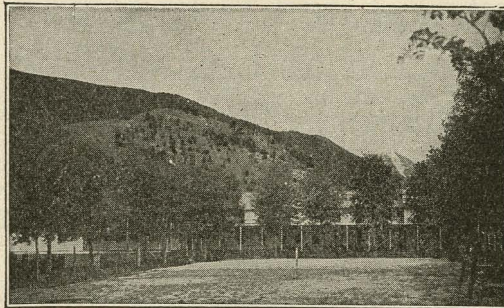
Dr. I. K. Moorhouse, Beaumont, Texas

Raised my fees from \$2.00 office, and \$3.00 visits, to \$3.00 office, and \$4.00 day visits, and \$5.00 night visits. Am doing more than ever at the increase price. Am not having a bit of trouble in getting it and I find a larger percentage of my practice now pay cash, too. I announced the proposed raise one month in advance. Many patients thought I should have done so sooner. Other D.O's here charge the same. We keep ahead of the M.D's in regard to fees.

Dr. Edw. S. Howley, Mt. Vernon, Wash.

I raised my rates from \$2.00 to \$2.50 December, 1919. No trouble at all.

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In pathology the course this year has been put upon the broadest sort of an osteopathic foundation, and there has been incorporated in the work of this course special laboratory study by the student of the bony lesion and its effects.

It is the life purpose of the Faculty of the College of Osteopathic Physicians and Surgeons (operated under the supervision and control of the California Osteopathic Association) to make out of each student an intelligent, highly trained, fully qualified, efficient *osteopathic physician*. The faculty is composed of practicing physicians, each one a teacher of highest capacity distinctively fitted for his work by temperament, knowledge and experience. Theory and practice are harmoniously blended and the native ability of the student is sympathetically considered and encouraged.

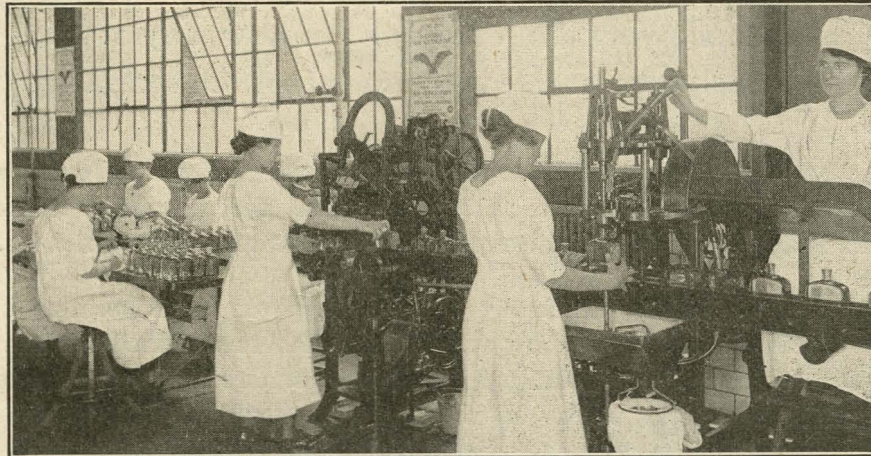
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The co-operation of the profession at large is earnestly desired and will be fully appreciated. Pick out among your acquaintances the young men and women of right character and inclination and urge them to consider the practice of osteopathy as a life work. Send us names and addresses and we will render all possible assistance in supplying information and facts for the benefit of the prospective student. If you can use some of our catalogs to good advantage, write us; we shall be pleased to supply you.

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Dr. Wendell W. Fessenden, Beverly, Mass.

Prices for 1915: Office examination, \$3.00; office treatment, \$2.00; house call, \$3.00; more than two miles, \$5.00. Prices for 1918: Examination, \$5.00 to \$10; office treatment, \$3.00; house treatment, \$4.00; more than two miles, \$7.00 to \$10. It was not difficult to raise prices—people expected it. Lost a few of the poorer class, but did twice the amount of business of previous year. I charged new patients advanced rate without explanation. Told old patients that I would have to charge more on account of high cost of living, etc. Other D.O.'s charge \$1.50 to \$2.00 for office; \$2.50 to \$3.00 for house. I find the patients are glad to pay for service given—"Value given, value received."

Dr. G. R. Starr, New York, N. Y.

Yes, I did raise my fee from \$4.00 to \$5.00 in 1917. Found no complaint from any one. It seems to have increased my practice. I certainly lost nothing. Just told my patients individually. Others charge about the same. No co-operation with M.D.'s.

Dr. C. T. Kyle, Menomonie, Wisc.

Your question "Raising Osteopathic Fees" is one of serious consideration. In my case it had to be done! Of course some kicked; I expected it. On the whole most of my people were reasonable and made no complaint. My prices were not excessive. In fact, I didn't raise in proportion to h.c.l. Raised from \$2.00 to \$2.50 per treatment. Those taking regular treatments, three times a week, charged them \$25.00 for a course of 12 treatments, when previously I gave 13 for \$25.00. Made this change only about 10 months ago. Should have changed years ago. It did down some grumblers from me, but they may return.

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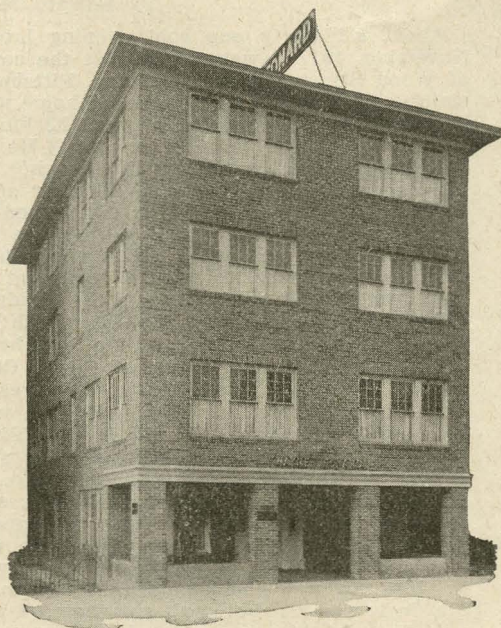
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The Osteopathic Physician

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3d, 1879.

EDITORIAL

Fairness, Freedom, Fearlessness
"Hew to the line, let chips fall where they will."

Vol XXXVIII October, 1920 No. 4

A MODEST VIOLET

The editor found the following gem pasted to the outside of a wastepaper basket in our job printery and shipping department across the street where our boys are wont to assemble for staff luncheon on Tuesdays. "Jay" runs the presses and "Ahlberg" is the "O. H." shipping clerk. Both divide honors as chefs on Tuesdays, but the "office boy" wrote this pome all alone with one hand and blushed to learn we would print it in *OP*. He may be editor some day!—H.S.B.

WASTE BASKET RUBBISH

Dedicated to A. A. and J. J.
After "Gray's Elegy" (a long ways)

Two mortals in two different countries born
This publication palace now adorn (?)
From early morn till dewy eve they toil
With mailing, printing, watching coffee boil.

Second spasm

Not near so vast mysterious is space (see Einstein)
Nor yet the origin of the human race
As the new theories that they evolve
Or osteopathic problems that they solve.

3

'Twould drive an osteopathic doctor to despair
To see the wisdom that is wasted there,
When Jay proclaims the principles of "Flu"
And Ahlberg learnedly expounds them, too.

4

In fancy, then, we hear the doctors say,
"What do those ginks know about vertebrae,
Or of the lesions that affect the spine?"—
Seat of all troubles—ask at number Nine

(South Clinton.)

5

They do not know—we know they never will
Acquire the science perfected by Still—
So why should they their minus talents waste;
They better stick to picas and to paste.

6

The proper place for creatures of their brain
Is in this basket—never seen again.
Full many a "gem" of purest ray serene
Here doth repose, unsung, unwept, unseen.

7th and last

In sweet oblivion hid from curious eyes
That no doubt would its precious text despise,
Rest here in peace until that final day
When on our Plant Old Glory holds full sway,
In fair Waukegan, forty miles away.

Words by A. Ahlberg, (office boy and shipping clerk).
Scenery by J. J. Sick, (job press feeder and coffee
boiler).

Special permit by Health Department, Oct. 6, 1920.

Right from the Heart

Give the best there is in you to your practice
and it will come back to you.

Never give out a diagnosis until you are
positive you are right.

Look prosperous, even though you bluff it.
—Mae V. D. Hart, D.O., Albany, N. Y.

Osteopathy for Putting Efficiency into Industries

By Edward N. Hansen, D. O., Pittsburgh, Pa.

About six thirty one cold evening late in November, 1917, I was standing at the corner of Wood Street and Fifth Avenue, Pittsburgh, waiting for a street car to take me home when I glanced up and saw Mr. Edward L. Parker, a neighbor, in his closed automobile. He was stalled in traffic (you know Pittsburgh!) and did not see me until I opened the door of his car and stepped in beside him. He turned and greeted me with—"Hello, Doc—you are just the fellow I wanted to see. Can't you go home with me for dinner? I want a treatment and want you to look at a couple of the children."

I thanked him and said I would go with him. He said: "Well, we just have time to go by the Wm. Penn. and get a couple of Clover Clubs. We did. You can't publish this. [Oh, yes, we can—it was before July, 1919. Do you mean two each? Oh, those good old days!—Editor.]

On our way out Mr. Parker, who is president of the Columbia Steel & Shafting Co., the largest concern of its kind in the world, said: "I have a man out at our plant, the superintendent of traffic, who is on the verge of a nervous breakdown. I can't get along without him just now and have been trying to get him in to see you but can't somehow. I want you to send him a receipted statement for about \$100 worth of treatments. Perhaps we can get him in to see you that way."

I answered, "No, Mr. Parker, that is not the way to do that. You say this man is beginning to break. Your plant is working at high speed on war work. Your business has tripled in the last three or four months. The department heads are working from twelve to eighteen hours per day to keep up their work. You can't get competent men who know your class of work to help them and you have not the time to teach those you could get; so, these men must work overtime and at high speed and on a terrific tension to keep things going. It won't be long until others show signs of breaking. The proper thing to do is fit up a room in your office building out at the plant. I will use it as a treatment room and come down there Monday, Wednesday and Friday mornings of each week and look after the whole office force. I will put it on a flat monthly retainer basis regardless of the number under treatment."

He said, "Doctor, I like the sound of that. I am going to New York tomorrow night for a few days and I will take this up with you on my return."

The following Sunday morning he called me up and asked me if I could go to the plant with him and look it over. I went and met several of the department heads. We talked the plan over and they were enthusiastic over it. We fitted up the room and Dec. 17, 1917, I made my first trip. At first we had to use some persuasion and education with some of them but several of the boys had had treatments before and two of them were patients of mine and with their aid I soon had the confidence of the bunch and they were all enthusiastic over the arrangement very soon.

An interesting incident was the case of the superintendent of the plant. He had a very bad liver and suffered considerably with indigestion, being off duty every few months for two or three weeks. He was afraid to begin treatment. He said a brother of his had taken treatment and his neck was injured. I was convinced that he was not injured by an osteopath and later I found I was right about it. We finally convinced the superintendent and he became my best patient.

I treated these men and some of the girls in the office, about 60 in all, through the strenuous times of the war and I am still on the job. Not a single one lost a day from illness except this superintendent and he took influ-

enza while I was off duty with it myself. I contracted influenza the 12th of October and was not able to practice until the 12th of November and the superintendent took the flu about the fourth of November. The first thing he said was "If Doctor Hansen had been on the job I would not have this." The same superintendent said to me about the first of the following May, "The last two springs are the first in years that I have not been laid up with a severe attack of my liver and I attribute it to these treatments."

One of the girls had a very bad bursitis in the right knee—six months standing. Had been in the hands of several Orthopedic surgeons, had the usual casts, etc. Was diagnosed as tubercular. Was going on crutches. In a month she had dispensed with the crutches and is in splendid condition now.

A prominent Pittsburgh attorney inquired about our service at the plant. Mr. Parker said, "Dr. Hansen is on the job and no one that he has had under treatment has lost any time." (That was prior to Nov. 1st, 1919.) The attorney remarked, "It's good insurance." Mr. Parker replied, "I consider it so."

Our service is for the office force only at present and about 60 are under my care. I do not have at any time more than one fourth of them under treatment but I go through the offices every trip and take those who need treatment. Mr. Parker is a very progressive and broad-minded man, very enthusiastic over Osteopathy, but also friendly toward medicine.

Jan. 30th, 1919, Mr. Parker called me to see him at his home, he had attended the McKinley banquet the night before and thought he was poisoned by eating crab meat. I found his stomach greatly distended and tender all over, soreness was not localized, whole abdomen seemed sore as if from the distention, pulse normal and no temperature. He told me he had taken castor oil early in the morning. I treated him, told him to abstain from food and ordered an enema providing the bowels did not act freely before eleven o'clock. He got the enema and fine results. Mrs. Parker called me about 2 p. m. and said he had a temperature of 101 and was in considerable pain. I saw him about 4 o'clock and diagnosed the case as acute appendicitis and recommended a surgeon. He went to the hospital that night about 11 o'clock and was operated upon about midnight, made a good recovery. His case proved to be one where a prompt operation was imperative and the early diagnosis saved him.

A little incident in connection with this concerning a nurse who was in the employ of Mrs. Parker when she and the three children were down with the flu, all at the same time. Two trained nurses were on the job. The patients were all having treatment and made good uneventful recoveries and Mr. Parker liked to tell these nurses, who had not had any experience with Osteopathy, how wonderful the treatment was. One of these nurses called at the hospital to see Mr. Parker when he was convalescing from his operation and remarked that this was one thing the osteopath could not handle. Mr. Parker answered, "The osteopath diagnosed the case and sent me to a surgeon. What could any other general practitioner do?"

I was unfortunate enough to contract the flu just when the epidemic was on in Pittsburgh and so missed a great part of those cases but my wife and I treated 60 cases of influenza and did not lose a case and none of them contracted pneumonia.

Some of these cases had medicine with the treatment but the majority did not and they were the ones that responded best. I was delighted in a couple of instances to have the usual order reversed. You know too often it's

You Can't Get a Better Investment
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the Osteopath who is discharged and the M. D. called when things begin to look bad. In this case it was the M. D. that was discharged and the Osteopath called and we did not fail them. However I am broad-minded enough to work with any M. D. who is broad-minded enough to acknowledge the value of Osteopathy and treat me ethically, and I am glad to state that there are a number of such men in Pittsburgh and I work with them and get the best of courtesy at their hands and I try to remember the golden rule when working with them. That's just as it should be, I think.

Getting back to Osteopathy in Industries, as a part of welfare work and as an aid in keeping men fit and efficient and curing them in the shortest time possible when sick, IT'S GREAT! And industries are beginning to recognize its value.

For several years back one of the railroads entering Pittsburgh has been sending both office men and train men to me for treatment and I think that if the Government had not taken over the railroads when it did, I would have had a contract with them and would have been admitted to the hospital in the town about 60 miles from Pittsburgh which is their headquarters. We may still get it now that the roads are returned to their owners.

I was recently approached by a representative from another large corporation concerning a contract similar to the one I have with The Columbia Steel & Shafting Co. and negotiations are still pending. These few straws show how the wind is blowing. It's a great field for Osteopathy and Osteopathy is equal to it and, as Mr. Parker says, "It's good insurance to the Company and fine for the physical condition of the employees."

Dr. Young Won McCole Prize on His Laryngeal Technique

Dr. C. W. Young of Grand Junction, Colo., has been declared the winner of the prize of \$10 offered by Dr. Geo. M. McCole of Great Falls, Mont., some months back, for the best and most original contribution published on handling cases in the great pandemic. "How I Treat My Flu-Pneumonia Patients" was the article and it appeared in *The OP*. The outstanding feature of his article was his original work in "windpipe or laryngeal technique". This treatment is of great value and should be given much study and use by the profession. We give further data on this method in this issue and illustrate the method of treatment by a halftone.

Tell It to R. K. Smith

Hasn't osteopathy been on the map long enough for some of the modern short story writers to know something about it? I get so sick of stories and books in which the doctor is always an M. D. and something of a hero, too, and the patient recovers—in spite of not because of, etc. We know wonderful things are happening every day in our practice and we seem to think we cannot publish them because it isn't ethical. Now if the doctor in the stories could be an osteopath, sometimes that would go a long way to bring us prominently before the public, especially if the stories are written by accepted and known authors. We could not then be accused of exploiting ourselves. Surely some of our profession know some of these authors personally and could suggest this. Why not get in the movies, too, in a dignified manner—not in the comics. We need more push and not to be always occupying a back seat.

—Ellen H. Brooks, D.O., Kingman, Kans.

Health Is Wealth

Manipulative surgery is worth more than \$2 at any time or place.—Albert C. H. Esser, D. O., Chicago.

My Septennial

John Barr, D. O.

VI

IN a way Aden never got very far away from Kirksville. When we were all getting ready to leave, he said he expected to locate somewhere in Missouri—that's as far as his cash would carry him. So, sure enough, seven years later I dropped in on him hardly fifty miles distant from the old school.

Now, this particular town was not supposed to have a population much in excess of 1,000, so I supposed Aden hadn't worked himself to death. When I got off the train and crossed the street to what was apparently the main block and the biggest building in the block, I was mildly surprised to see facing me in prominent letters—ADEN BLOCK. So that explained why he had dropped down here; he had relatives who either wanted him to locate there or had gotten him in spite of their wants.

But no, it wasn't so. Aden Block belonged to Dr. Aden, who had the second floor corner for offices. This I learned of a native at the entrance, and after climbing a flight of stairs found myself in a large reception room, which happened to be quite empty save for my own presence and a prominent poster stating that the doctor would return at six o'clock. I figured that out to mean 6 p. m. rather than a. m., and as it was then about 4 in the afternoon decided to look over the town while I waited, instead of 'phoning to the residence.

Walking down the street a block or so, I came to a public garage which proclaimed itself the home of my favorite flivver. Being somewhat mechanically minded—that is really the reason osteopathy first appealed to me—I found my way in among the parts and pieces on the floor and picked up a conversation with the only mechanic in sight.

It wasn't long before he volunteered information as to the ownership of the

place. Lo and behold, it was my one-time friend, Dr. Aden!

Truly, osteopathy must be well thought of in this town, mused I, meandering down the shady side of the street. So I made inquiry of a leisurely disposed chap in front of the postoffice:

"How many osteopaths in the town?"

"None at all," said he; "there's Doc Aden and old Doc Miles that's retired, and then there's a veterinary down at Siler's barn. That's all of the doctors we have in this growing town, not counting Ted Miller, the tooth-puller."

My cigar went out as I pondered this disquieting information. Had I made a mistake after all and looked up the wrong Aden? No, it wasn't so. At seventeen minutes after 6 into the reception room breezed the same bulky Aden I had known in the years before.

Yes, he owned the Aden Block and the garage and had a stock ranch four miles out of town. I believe he was a director in the bank and Secretary of the Commercial Club.

"And how's practice," I ventured. Well, it seems he had so many irons in the fire lately that that one had cooled off a bit. He was in the office almost every morning and he had found that most of the acute cases got well on catharsis and rest so he used most of his time to better advantage! I didn't stay for dinner though I don't doubt but it would have been a good one.

But train-time was soon due and as I departed, decided that about all I had found that afternoon was a cracking good location for a live osteopathic physician.

And as I sucked up a strawberry soda in a sticky little store across the way from the depot, the thought drifted into my mind that Aden, of all the bunch the closest to Kirksville, had gotten the farther away.

No Raise of Rates in These Offices

Dr. John F. Morrison, Ogden, Utah

I am an excellent osteopath but a poor business man. If osteopaths were as good business men as their profession warrants I am sure we all would be charging double the fee we now do. Altho my prices have always been \$2.00 office, and \$3.00 home I have in many cases discounted bills. That is all past. Cases that are too poor to pay the full price I accept no fee from at all. As to raising my prices my business education has been so neglected that I am a moral coward.

Dr. F. C. Dymond, Jackson, Minn.

No, I have not raised my fees but I find that I made a serious error in not doing so two years ago when the people would have taken it as a matter of course. As long as business was brisk I got by all right and made a little money and thought I was flourishing; but lately there seems to be a general tendency in this section to economize; business is not so good as it was; and I find the old fees inadequate with the lessened volume. With the general expectation of price reductions in the near future I fear the public will not take kindly to an upward revision at the present time.

Dr. Edward Sluyter, Alma, Michigan

Haven't raised. Chiro competition. Nevertheless, I ought to.

Dr. H. Olson, Rochester, Pa.

With the exception of confinement work, fees same as 1915. Do not co-operate with M.D.'s as to rates.

Dr. H. H. Walpole, Lancaster, Pa.

Here's a thought: Many patrons come from walks in life that have suffered most financially, such as teachers and ministers—fixed incomes, etc. Shall we make their burdens greater? You may be doomed for a certain term to walk the night.

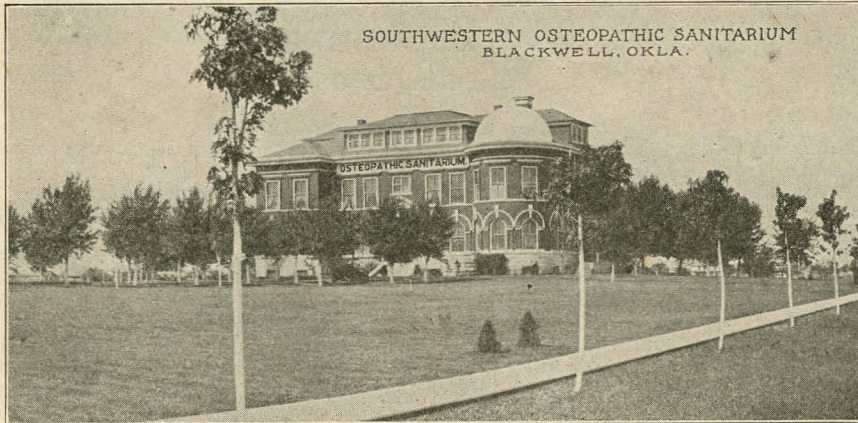
Dr. George I. Lill, Allentown, Pa.

No raises.

Dr. Arthur T. Hoffman, Augusta, Maine

No raise in our rates. Two dollars, the usual charge here. No co-operation with M. D.'s.

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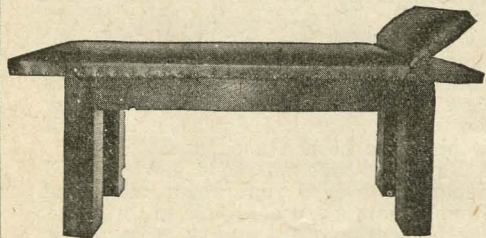
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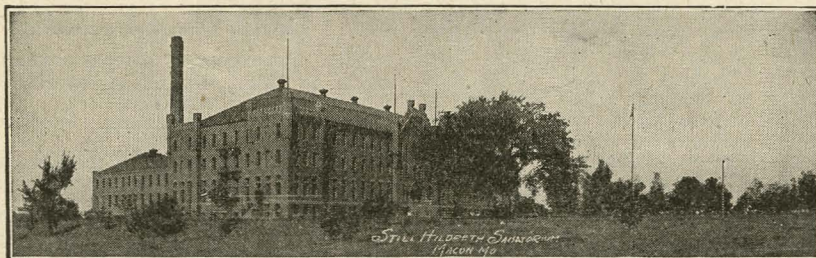
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Write for Information

Dr. W. P. Abell, Princeton, Ind.
Have not raised fees. No other osteopaths here.

Dr. Arthur S. Bean, Brooklyn, N. Y.

(1) We have not raised fees since 1915. (2) Other D. O.'s here charge from \$2.00 to \$5.00 at office. (3) No co-operation with M. D.'s on fee raising. Do not think "inability to pay living expenses," etc., holds true here. My belief is that most of D. O.'s here are not only making good but saving each year. Those who are not are living extravagantly, beyond reason. Those whom I know who are having hard times are putting out a very poor brand of osteopathy or have a personality which badly handicaps. I believe now D. O.'s are making the mistake in the East of overcharging rather than undercharging.

Drs. Watters and Watters, Conrad, Mont.

In regard to raising fees: We are getting \$2.50 for office, \$3.00 for house and \$1.00 per mile for country calls, same as M. D.'s. I am opposed to any raise if it can possibly be avoided. There is a tendency now toward a decline in prices in many lines and D. O.'s who can exist should, or they will get the same reputation as the profiteers—raised because they had the chance. It will be hard to come down with the decline which is sure to follow in all lines. Would like to see our rates in force all over the country and now is the time for underpaid D. O.'s to get their just fees, but as for us we are getting enough.

Dr. Charles A. Arand, Sault Ste. Marie, Michigan

Have not raised, but have made more uniform rates and have cut out much charity work. Talks with patients made me think a raise not possible here owing to local conditions. My increase of practice each year offset the shrinkage. Local physicians have not changed rates.

Dr. W. C. Dawes, Bozeman, Mont.

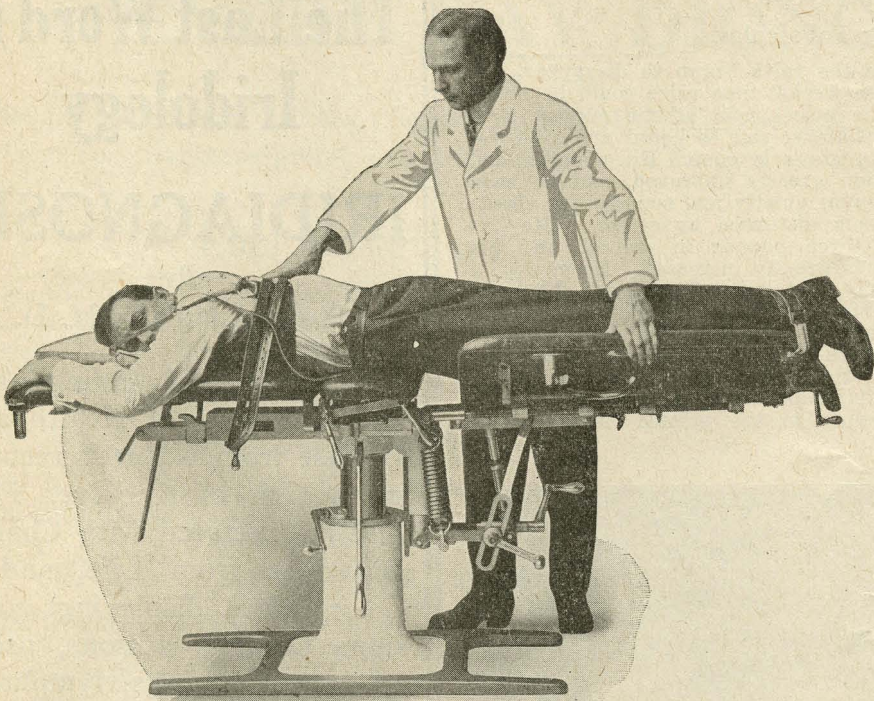
I have not raised my prices; get \$2.00 for office and \$2.50 house calls, but \$1.00 per mile extra for country calls. That latter is raised 50 cents per mile. It seems to me that a great deal more is said about the shrinking dollar than about the expanding life—too much thought about making a living and not enough about making a life. Both are important but if we think mostly about the dollar we are falling far short of our opportunities. I know a lot of business men who are not getting rich, and a few who are that are not making a life. So, stick to the old boat, educate your people, give them the best you have, and I think all will get by. You don't have to work so terribly hard to earn \$40 a day in osteopathic practice, not counting Sunday's; that will make \$12,480 a year. That is counting it from the standpoint of the work one is able to do. Financial burdens of the people were so heavy that I decided not to add to them by raising my prices of treatment. I will make that my contribution to humanity.

Seattle Physician in City to Give Address.

[From the Bellingham American-Review]

Dr. W. E. Waldo, of Seattle, president of the American Osteopathic Association, was the guest of osteopaths and their wives of Whatcom, Skagit and San Juan counties last night at banquet held in the private dining room of Hotel Leopold. Dr. Waldo gave an excellent informal talk on the condition and progress of the osteopathic profession in Washington and throughout the country. His remarks were followed by a general discussion. The physicians present were Drs. Joseph Knox, G. E. Foster, A. Munn, J. Wesley Kaylor, W. R. Widdel, Katherine Parrish, Katherine Glowman, Bellingham; Van Blarcom, Orville Caldwell and Edward Howley of Mount Vernon, and Ralph St. Pierre of Anacortes. Dr. Waldo will be the guest of local physicians today in an auto trip through Bellingham and environs before leaving for Seattle at noon.—Sept. 26.

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Little Stories of the Clinic

By C. W. Young, D.O., Grand Junction, Colo.

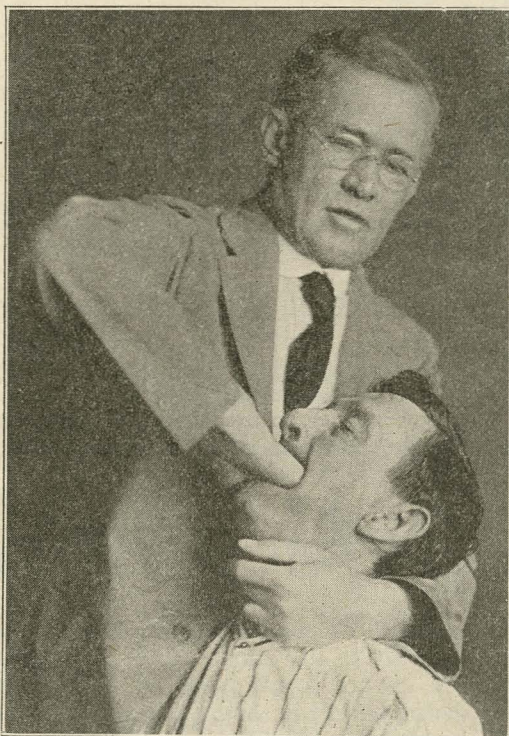
Astonishing Results in Pulmonary Tuberculosis

Mr. Charles Taylor, aet., 61, was a plasterer. About four years ago he was overtaxed with long hours, and worked when he was compelled to breathe great quantities of dust. He began to have a cough and progressively grew weaker, till finally three years ago he became incapacitated from working, and for two and a half years he lay around the house, with cough, expectoration and fever.

Six months ago he went to the great Woodman open air sanitarium near Colorado Springs. At first he seemed to improve, but later progressively grew worse, and came to Grand Junction July 31, 1920, and I began giving treatments. He weighed 136 pounds, normal weight 155. He was sleeping only three or four hours out of the twenty-four. He had marked pain and tenderness in the lungs; was hoarse; coughed a great deal, with some expectoration. Could walk from the street into the house and that was about all he could do. Had fever of 101 degrees F. or a little more every afternoon. Moist rales could be heard all over the lungs. Sputum analysis, positive. He has had no night sweats or hemorrhage, and there were no cavities in the lungs.

I have been treating him three times a week up to this date (September 18, 1920), using the windpipe technique, described in the Osteopathic Physician, June 1919, and have accomplished what I have been regarding as the impossible. The fever left him also entirely after the first treatment. Only once the fever rose to 100 degrees F. after a particularly strenuous treatment. Lately there has been a slight subnormal. After a few

treatments the rales began to disappear. In about three weeks' time rales could be heard only in the apices, and at the present time no rales whatever can be heard and all soreness in the lungs is gone. His appetite and bowel action greatly improved, and he soon began sleeping quietly and soundly for eleven hours—rarely disturbed by cough. He has increased three pounds in weight and his strength has greatly increased. He can walk a mile easily, and can do light work about the house, including carpenter work. He secures liberal quantities of sunshine and air, and his sister brushes his skin vigorously every day with a bristle brush. He is now practicing deep breathing and light chest exercises. He eats according to the printed list given in July O. P.



I give some spine and rib treatment. J. Henry Hook, D. O., of this city, examining Mr. Taylor at my request, found a middle tubercinate hypertrophied and against the septum, with retained secretions above this contact. Appropriate treatment with nasal douches has brought relief and benefit. Before giving the windpipe technique, I have him remove a plate of upper teeth. I then insert the whole hand below and back of the epiglottis. Sometimes I first pull the hyoid bone forward, and then can slip the fingers easily beyond the epiglottis. I then place the fingers firmly just above the larynx and against the base of the epiglottis and pull forward. This creates a great expulsive effort. Sometimes I make him cough four or five times before I withdraw my hand, when the slime comes pouring out in great quantities. At the present time I have to pump much more vigorously to get the slime out. Sometimes it helps to push against the larynx or the space just above with the outside hand, while traction on the epiglottis is made by the inside hand. One day I made twenty-seven insertions of my hand, while the patient made 150 expulsion efforts or coughs. I would suggest standing behind the patient as illustrated by the photo of Mr. Taylor taking the

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Carbuncle

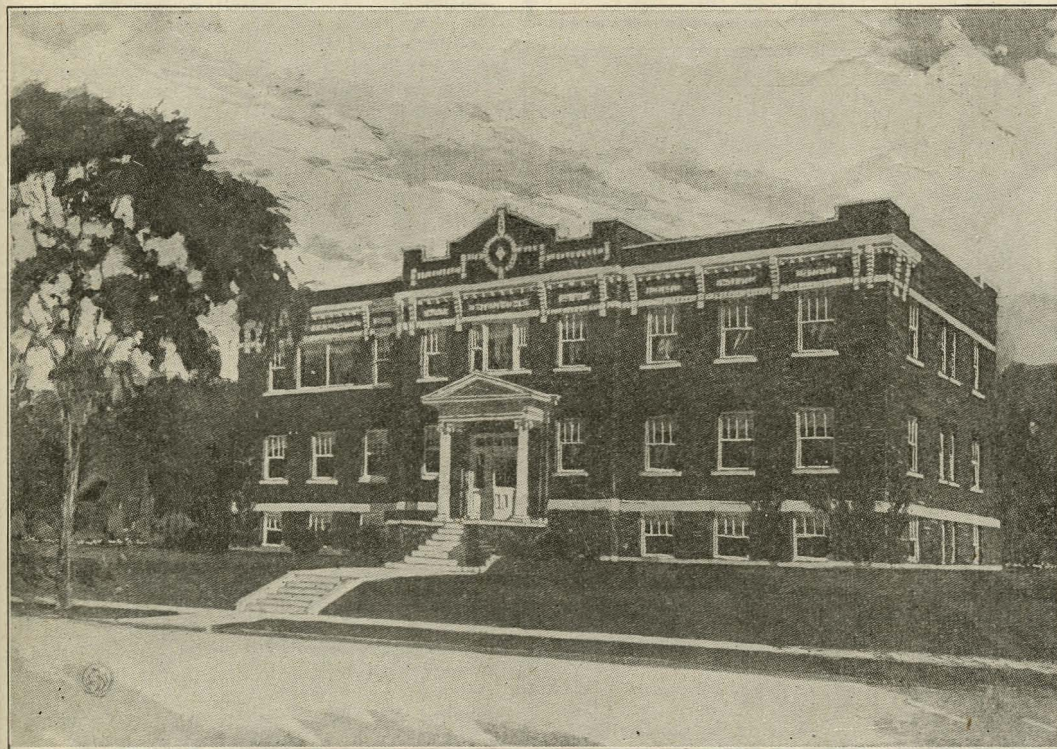
Dr. W. writes: "That case of Carbuncle I ordered DIONOL for cured it in great shape, and I received the fees and many bouquets. Thanks to DIONOL."

Infected Wound

Dr. C. writes: "A shrapnel wound in the foot of a Canadian soldier had failed to heal under any other treatment. Naturally I had little hopes of helping him. So gave him some DIONOL temporarily, with instructions. Sometime after he came in and showed me that DIONOL had healed the wound completely. No use saying I was surprised."

THE DIONOL COMPANY (Dept. 12) Detroit, Michigan

Wonderful Year for the Laughlin Hospital, Kirksville



The Laughlin Hospital, Kirksville, Mo.—Dedicated to Andrew Taylor Still

We have just completed the first 12 months of this new institution. Over 900 surgical cases were handled, just as they came, with a mortality of but three in that number. Receipts for the year were over \$105,000 — practically all of it Dr. Geo. M. Laughlin's work.

Our institution is entirely out of debt and paid for from the receipts of our practice. It is one of the best equipped small hospitals in the state. We maintain a fine home adjoining for nurses. We are prepared to handle successfully all classes of surgical cases and invite the co-operation of osteopaths.

An able staff supports Dr. Laughlin in the following departments: 1. Osteopathic. 2. Orthopedic. 3. General Surgical. 4. Obstetrics. 5. Gynecology. 6. Nose and Throat. 7. Proctology and Urology. 8. X-Ray and Laboratory Diagnosis.

For further information address Dr. George M. Laughlin, Kirksville, Mo.

Buy a Bond Today and Help Us Complete Our Flotation by Christmas!

treatment. I believe the retained secretions is the greatest bar to recovery of tuberculosis, and this technique will prove a great revolution in securing drainage of the focus of infection. I hope the profession will excuse this presentation of a case before complete recovery, but I beg that you all try it out and let me know results, as millions are dying of the great white plague, and if this treatment is valuable the sooner we begin to use it the better.

**Your Bunting Building Bond
Is Ready—Send for It!**

WHERE THEY GET IT OFF THEIR CHESTS

“Normalizing Pregnancy” Still Under Fire

That article by Dr. J. S. Baughman of Burlington, Iowa, “Osteopathy in Tubal Pregnancy,” in July O. P., was a crime. The writer is in a class all by himself, and its publication has by this time, no doubt, done harm enough to osteopathy to take years to over-

come. How could any thinking man or woman believe such a thing? Why, I don't believe you could convince even a second year student in any of the colleges nowadays that such a thing were possible.

Burlington, Iowa, is a town of about 25,000 I believe, and I don't know how many physicians there are there; but if Dr. Baughman has had three cases in what appears to be a period of about two years (one child is reported as now 4 and the other one 2) he has certainly had more than his share of tubal pregnancies. Statistics wouldn't allow him that many in ten years unless he does nothing but obstetrical work and has a large clinic to draw on for material.

A fertilized ovum, the first requisite of pregnancy, attaches itself to the inner surface of the tube and grows fast, and from this site the placenta grows, and it also is fast to the tube. Does Dr. Baughman expect the reader to believe that a three-months foetus—the placenta has formed by that time—can be worked loose from the tube wall, forced into the uterus and then made to re-attach itself to the unprepared walls of the uterus (unprepared because the patient has not menstruated for three months) and continue to grow, there being no let-up in the foetal circulation, and at the end of a total of nine months find delivery as a normal child? Where did the good doctor study his embryology? It's an exact science, not given to us by medical men, but by scientists.

Why, there would be exactly as much sense and reason to say that one could manipulate a pyloric cancer from its site, have it float down and lodge in the rectum and, at the end of nine months, by setting an innominate lesion, cause the patient to be delivered of a full-grown cancer which at the present time is four years old and perfectly normal and healthy—and the mother is well, too! Perhaps we should have aided the delivery in this hypothetical case by a liberal dose of Pluto, but not for mine—I'm osteopathic to the core!

I do hate to have the profession I love and admire subjected to ridicule and made fun of because of the written word of some unthinking men. Dr. Baughman should take a good course in diagnosis. That's where his trouble lies. I've no doubt he cured these cases—only they were NOT TUBAL pregnancy! Sorry to take up so much space, but I just had to get that off my chest. Am I right?—Chester D. Losee, D.O., Hackensack, N. J.

Dr. Baughman Stands to His Guns

Editor OP: I have been somewhat amused at the attempt at criticism of Dr. Hill's of our article on “Normalizing Tubal Pregnancy”. “There are none so blind as those who will not see.” The doctor evidently hangs to back numbers of medical lore for his guide, though every decade necessitates a change.

I have no apologies to make on terms used, and it seems hard for the doctor to be able to read “neck or cervix” instead of the word and as a typographical error. He will find that I used both terms he designates in the article, so that as far as being familiar with the use of the words collected in expressing our thoughts in the English, I dare say my readers will be able to follow the thought and be benefited thereby.

Beg to advise that I am now treating another

**A STANDARD DIET FOR
Infants, Invalids and Convalescents**



*The Original
Malted Milk*

*The Original
Malted Milk*

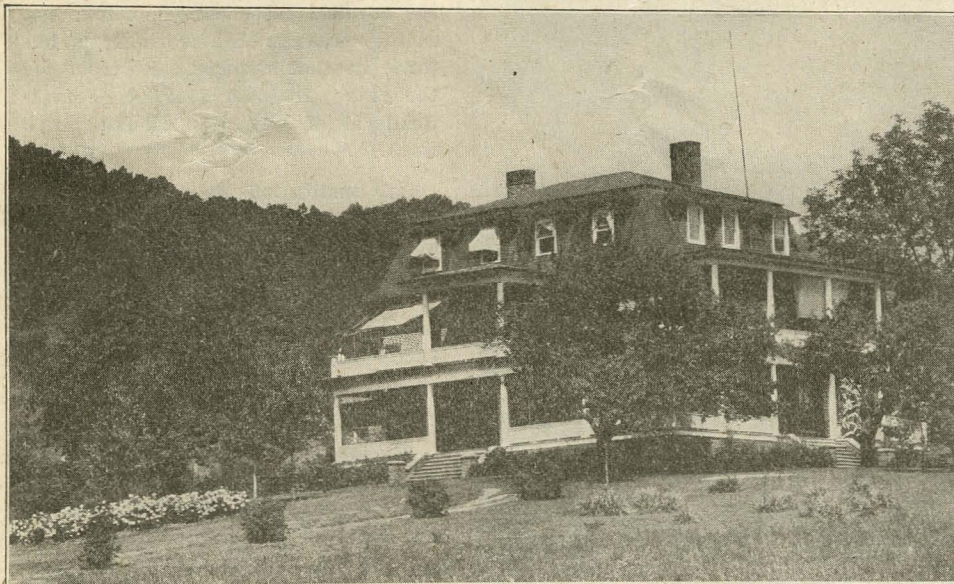
**DIGESTIBLE
NUTRITIOUS**

**CONVENIENT
RELIABLE**

Has the quality and flavor imitations lack.

Samples prepaid upon request.

HORLICK'S MALTED MILK CO., - - - Racine, Wis.



ASHEVILLE OSTEOPATHIC SANATORIUM

Devoted to the osteopathic care of patients. Rest Cure with Milk Diet, or Scientific Dietary, as indicated in each case. Correspondence invited. Rates on request.

ELIZABETH E. SMITH, D. O. - - - Asheville, North Carolina

**Get a Bond Today and Help Us Pay for
Some of Those Shingles.**

Special Information for Osteopaths

Under the laws of some States osteopaths are prohibited from using anything of a drug nature.

Dionol and Emulsified Dionol **have no drug contents** whatever and hence do not come under these restrictions. Their action is in strict consonance with osteopathic principles, being entirely mechanical, hence no drug re-actions are possible.

Osteopaths, throughout America, are using large quantities of these preparations, and there has never been a legal exception taken to their use, excepting in one case, and when the authorities learned the above facts the case went by default and they never even appeared against the doctor in question.

Dionol treatment is the only remedial agent that we are aware of that acts strictly in a mechanical sense and without drug reaction and which may be safely employed, internally or externally by drugless physicians generally.—The Dionol Co., Detroit, Mich.



The Delaware Springs Sanitarium

Emphasizes *Diagnosis*, believing that a condition accurately diagnosed is half cured.

All modern facilities for diagnosis, as well as treatment, are found in our equipment.

Our institution has been inspected and endorsed by many of the best men in our profession.

THE DELAWARE SPRINGS SANITARIUM
Delaware, Ohio



NO ADVANCED PRICES

Weissfeld Brand Washable Coats for Dentists, Doctors, Druggists, Osteopaths, Jewelers, etc., made to order or ready made. Seventy-five different materials to choose from. Write for styles, materials and prices, free upon request. Parcel Post prepaid to all parts of the world. Smoking Jackets, Dressing Gowns, Bath-Robes, and Hospital Uniforms a specialty.
WEISSFELD BROS., Mfrs. of Clothing & Uniforms of every description.
345 W. Broadway, New York, N. Y.

struck "pay dirt." Talk of national advertising on a lone \$50,000 white chip—oh, heck! If Woodall had \$50,000 to turn loose in Birmingham, he might stir it up, but even then he would not have farther to go than around the block to hear some one say: "Osteopathy, Osteopathy—what in the heck is osteopathy? I never heard of it." Pardon my effusiveness, but I had to get just this off my chest.—*Wm. A. Settle, Peterborough, Ontario, Canada.*

Your editorials in regard to raising our professional fees and the advertising campaign for osteopathy in the magazines which has been proposed I have read. You are right, absolutely right. Your name should have been Henry "Straightshot" Bunting. I believe firmly that if anything will react unfavorably upon the general good of osteopathy it will be an attempt to educate the public through the paid advertising columns of the popular magazines and newspapers. It will deprive us of much legitimate publicity of the kind you mention. It does not seem fair for a group of men to assume to represent the profession and put the profession in bad with the reading public by advertising our profession to the public along side of commodities such as Ingersoll Watches, Pillsbury Flour, etc., which are purely commercial products. Dr. R. K. Smith, representing the Press Bureau of the American Osteopathic Association is in a position to render the profession a service which money cannot buy outright and which differs so markedly from the proposed paid advertising section plan that there is no comparison as to the efficiency. There is a right and a wrong way to do everything and this plan of buying newspaper and magazine advertising is ethically and economically wrong.—*G. V. Webster, D.O., Carthage, N. Y.*

I am with you in your analysis of Dr. Woodall's system of advertising osteopathy, even tho his scheme were a practical thing from a financial standpoint. Far better that those of the profession who can write do so thru special articles in the standard magazines and papers. The average editor fears no ill effects if the article is well written and shows the earmarks of authority.

—*Ray Kerr Eldridge, Philadelphia, Pa.*

Comment on the Woodall Advertising Plan

I have just read your criticism of Dr. Woodall's publicity scheme and agree with your main argument fully. I, too, took issue with Dr. Woodall about this scheme not long ago and I don't think he liked it very well. It takes quite a bit of courage to oppose some of the well meant but mistaken plans of some of our people, but, we have a few very enthusiastic people who would certainly get us in bad if they were not held back once in a while. It is too bad that we have to hold some of these people back because the vast majority of our people need to be stimulated and not inhibited. On the whole, we have too little energy and initiative.—*Walter E. Elfrink, D.O., Chicago.*

Have just read Bunting's answer to Woodall in the September OP and consider it a most clear and irrefutable statement. What he says is "cold blooded fact," as anyone who knows even the rudiments of advertising must realize. Wm. Wrigley hit Broadway with \$100,000 and never saw a trace in return; he hit it again a little later with \$250,000 and never got an "echo" from his hard dollars: still later (of course, you know the story) he went down there with a half million and that time he

Private Joseph Highsaw's Cure Like Skeyhill's

By Drs. Chas. A. and Etta E. Champlin, Hope, Arkansas.

Joseph N. Highsaw, age 30 years; native of Beaumont, Texas. Enlisted at Jefferson Barracks, Mo., August 23rd, 1911, and was sent to Co. C, 15th Reg. Inf., which was soon sent to China and later to the Phillipines. Was honorably discharged August 24th, 1914. Re-enlisted September 2nd, 1914, for seven years, C. A. C., unassigned, and was sent to the Phillipines again.

On December 2nd, 1916, while carrying a foot-locker up the stairs at Manila wharf, he began to stagger and finally fell in an unconscious state. Consciousness returned partially on third day, with a sensation of rolling out of left side of cot and the head aching severely on the left side as if it were bursting. Left arm and leg were numb and could only be moved with difficulty. Sight in left eye was almost lost. Deaf in left ear to tuning fork of 2,000 or more vibrations. Mentality dull.

Was sent back to States in February, 1917, and was held under observation in an Army Hospital until May 1st, 1917, and then sent out on light duty under physicians' care until January 14th, 1919, when he was discharged on full pay (\$30.00 per month), as physically unfit for further duty, due to lesion in pontine angle of left cerebellum. Operation had been advised but he would not submit to it.

Mr. Highsaw entered the Agricultural Department of the University of California, but was sent home to Beaumont, Texas, because of his inability to concentrate for study. In November, 1919, he applied to the Federal Government for medical aid, and was sent to Major Holt, who referred him to Dr. Ray Kirchen-Daily who brought him before the Harrison County Medical Society at Houston, Texas, December 11th, 1919. They advised rest from vocational training until April 1st, 1920. In January, 1920, compensation was cut from \$80 to \$16 per month, without any known cause, even though he had himself and a widowed mother to support and was ordered to do no work and had no other means of support.

Necessity soon drove him to work, even though prostrating headaches and extreme vertigo incapacitated him from one to three days of each week. These attacks were accompanied by a blind, band-like, transverse space, like an abyss. This never entirely disappeared during his best days. Objects, if seen at all with left eye, were very indistinct and at an angle of about 70 degrees. Vertigo gave the sensation of falling to the left and at his worst times he would occasionally fall in a semi-conscious state.

Mr. Highsaw visited me for osteopathic diagnosis and treatment May 21st, 1920, at which

How Much of This Load Will You Share With Us?
\$1,000? or \$500? or \$100? Be Just to Your Boosters!

THE OSTEOPATHIC PHYSICIAN

time I discovered and adjusted atlas lesion in about five minutes. Headache disappeared at once, but left the left half of face and scalp numb. This wore away gradually during the next three days.

Sight of left eye began to clear and print to take natural form and position. Dark angle gradually faded to normal objects in the field. Tendency to fall to left subsided. Nervousness and sudden starting from slumber gave place to normal well-being and restful sleep.

On June 2nd, slight vertigo returned, but with no tendency to fall and no ocular disturbance. Adjustment was again made on above date, since when he has been perfectly normal and able to work six days of each week. He is now in vocational training, pursuing a course in electrical engineering.

If You Use Skeyhill

If you use Tom Skeyhill, (and you should) be sure you have everything organized before he comes, right off the reel. Also keep him informed of what you plan for him.

—T. B. Johnson, D.O., Youngstown, O.

Skeyhill Lets Loose for Osteopathy in Chicago and Elsewhere

Tom Skeyhill is swinging around the circle preaching osteopathy, and world peace, and making a tremendous hit wherever he appears. He made a three-day campaign in Chicago recently, appearing first at the Illinois Theater, Chicago, Sunday, October 10th at 3 p. m., along with Alma Hayes Reed, concert soprano, of national fame, in a benefit for Chicago Osteopathic Hospital. He then delivered his oration, "Rebuilding the World". Alice Baker Blackman was Miss Reed's accompanist.

On a return engagement he spoke through three days at the Chicago College of Osteopathy, Morgan Park High School, the Press Club, Washington Park Woman's Club, Austin Woman's Club, Austin High School, Chicago Literary and Writers' Club, Carter Harrison Technical High School, Hamilton Club, Chicago South Side Woman's Club, Lane Technical High School, Lake View High School, Senn High School.

Wednesday night, October 20th, at Medinah Temple he electrified a big audience. Mr. Perry S. Patterson presided. Dr. James M. Fraser was Chairman of the Promotion Committee in charge of this work. The enterprise was a tremendous success.

Skeyhill stimulates interest in osteopathy wherever he goes on this special mission. His appearance in any community, as Director of Publicity R. K. Smith has pointed out, ought to be promptly followed up by a vigorous campaign of explanatory literature in order to utilize the interest which Skeyhill stirs up for educating the people about osteopathy. The value the profession gets out of Skeyhill will depend very largely upon the value they put into his visit and lecture, the way they advertise him, fill up his house and follow up his work with a campaign of education after he is gone. We shall be glad to make suggestions for literature to any osteopath who dwells anywhere along the Skeyhill lecture trail.

Skeyhill has already appeared at the following places: Los Angeles and San Diego, Minneapolis, Youngstown, Warren, and New Philadelphia, O.; Des Moines, Rock Rapids and Washington, Ia.; Kirksville, Louisville, Blackwell and Oklahoma City, Okla.; Detroit and Chicago.

President Waldo Is Stirring Up Things

Let's All Pull Together and Help Him Get 1,000 New Members

I have set my heart on securing one thousand new members for the A. O. A. the next year. For many, many years our efforts have been handicapped for lack of support. It seems that now, since the profession has decided on a united policy and has outlined a program that everyone can get behind, there isn't any excuse for one not doing his share.

"Every Member Get a Member" has been adopted as a slogan, and if every member will get a member, my ambition will be more than realized. But it is not for interest that I am asking them to join. It is for themselves and for their own benefit that I would urge them all to do this. The satisfaction of feeling that one is doing his "bit" is worth more than the cost of membership. May I count on you and your facile pen to get behind this movement?

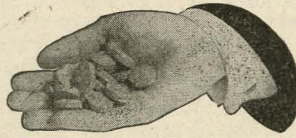
I visited Bellingham lately, as you will note per the enclosed copy. After talking to them about State and National matters I finished with a talk on educating the public by educational literature, such as you and others publish. Our schools turn out graduates only slowly these days. Scores of people literally die because of a lack of osteopathy. We have dozens of practitioners that aren't even holding their own that should be kept so busy that they could not take care of the people that would seek their aid if they only new what osteopathy could do for them. The practitioner wants to be kept busy. He deserves to. Then, for heaven's sake why doesn't he educate the people so that he will be kept busy? All of which may be done purely from a selfish viewpoint, but even if so, the public will reap the benefit, which is the main object to be desired. So using osteopathic field literature justifies itself two ways—all ways, in fact.

I expect to travel and speak to a good many of the Western Societies before my year is up and I intend to carry this same message to all. I do not know anything the profession as a whole needs so much as good educative publicity and many individual osteopaths need it personally even more than the profession does as a whole. Fraternally,—W. E. Waldo, D.O., President A. O. A., Seattle, Wash.

"EVERY MEMBER GET A MEMBER."

DOCTOR—HERE IS A HELPING HAND!

WHY NOT USE Bran-O-Lax?



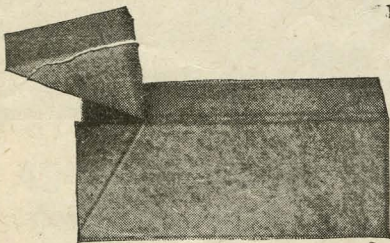
Gilbert's BRAN-O-LAX is used extensively by Osteopathic physicians and hospitals in treating patients for constipation, indigestion and internal disorders, BRAN-O-LAX combines the merits of all other wheat bran preparations. It is in the only logical form—that of a condensed tablet, sanitary and convenient. They will keep indefinitely.

BRAN-O-LAX is a light food diet for the sick and convalescing, as well as a gentle laxative. BRAN-O-LAX contains one heaping tablespoon of plain nutritious wheat bran. In eating four or five tablets, you will have taken into the stomach more wheat bran than if you had eaten one half loaf Graham or Whole wheat bread. 1 Box 25c Post Paid U. S. or Canada.

5 Boxes \$1.00 Post Paid. Prices in quantities on request.

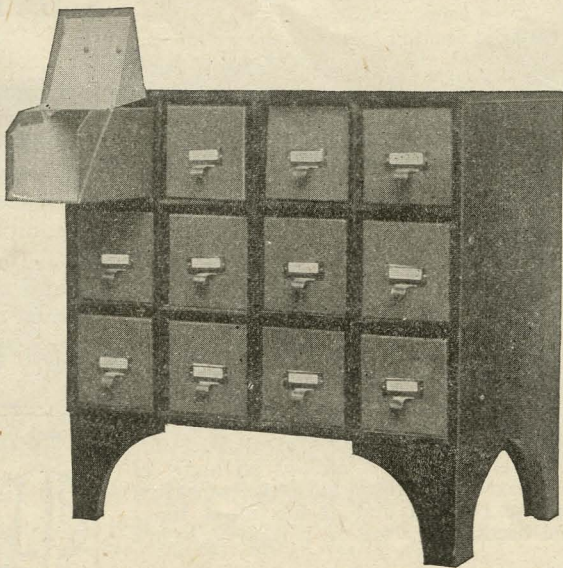
GILBERT BRAN-O-LAX COMPANY - - - - - Lynchburg, Va.

The Kimono Problem Solved BY M. C. KIMONO BOXES and CABINET



The M. C. Kimono Box is for keeping your patient's kimono clean and out of the dust; sanitary and convenient; a separate box for each patient. Each box has a brass card holder to insert patient's name. Boxes are made of extra heavy Chip Board covered with water proof brown paper. Size of box is 13x5x5 inches. Prices:

1 Doz. Lots - \$ 7.00 2 Doz. Lots - \$13.50
5 Doz. Lots - 30.00 100 Lots - - 46.00



The M. C. Kimono Cabinet, including base, is 21 inches high, 19 inches wide, 13½ inches deep. It holds 12 kimono boxes. Cabinets are carried in stock in mahogany finish only. Prices on other finishes furnished upon request.

Price of M. C. Kimono Cabinet, mahogany finish.

With base and one dozen kimono boxes\$24.00

Cabinet and one dozen kimono boxes, without base. 20.50

Cabinet without base or boxes... 14.00

All prices f.o.b. Michigan City, Indiana

Michigan City Paper Box Company

Michigan City, - - - Indiana

You Can't Get a Better Investment Because It Pays 7 Per Cent and Boosts Practice for You!

To Get the Full Value out of "Osteopathic Health"

The monthly magazine service

- 1—Use it regularly each month on annual contract. Use a sufficient quantity. (You get them at a lower price and win bigger results by operating on annual contract.)
- 2—Have every copy go out bearing your professional card. (We make no charge for imprinting your card on annual contract.)
- 3—Let us mail it out from this office to your list of names thus insuring regularity. (Each envelope addressed individually on the typewriter, and typewritten copy of your list furnished for revision when requested. We do the complete job for you cheaper and better than you can do it yourself. Save yourself time and bother.)
- 4—If you want quick and big results, follow up this magazine at periods of one week with additional mailings of our new "Harvest Leaflets" which you can use in quantities cheaply.

This plan used with intelligence, discretion and vigor can not fail to win a harvest for osteopathy and the osteopath who makes the campaign in any locality where it is applied.

Remember that we, as an Agency, offer you a complete Advertising and Practice-Promotion Service—we furnish you Original Plans, Peerless Media and even Effect Distribution for you. For the kind of service rendered our charge is lower than that of any expert advertising agency on earth. Twenty years of success at it!

The BUNTING PUBLICATIONS, Inc.

Henry Stanhope Bunting, President

9 South Clinton Street - - - CHICAGO

Osteopathic Women's National Association Is Now on Its Way

The sentiment which has been growing among our women practitioners during the past few years, for an Osteopathic Women's National Association, was crystallized into action at the recent Chicago Convention during the Sunday afternoon of the Women's Bureau of Public Health.

During the conference, the report of the survey of our women was given, showing that the replies received were practically unanimous in favor of such an organization.

With the established precedent of all groups which have nation-wide definite aims and policies being nationally organized, with a desire to not only maintain the splendid work started, but to advance our program and to cooperate with other organizations in this public program for the welfare of women and children, the only course which seemed clear to our women, in order to secure effective machinery, to promote these objects, was to effect a national association.

Discussion followed upon the advantages of a national association to our women for broader service to humanity, for larger opportunities in advancing our program, and for recognition and representation among organized womanhood thru affiliation or federation with other national organizations. These and many other points were presented and thoroly discussed.

At the close of the discussion, a motion was unanimously carried in favor of organizing an Osteopathic Women's National Association, followed by the election of a temporary Chairman and Secretary. The following day, during the business session of our Section Meeting, the constitution was adopted and the officers elected.

It is the desire of the Executive Committee

that, under the new organization, all of the machinery of the past Women's Bureau of Public Health be retained and strengthened. Our present State Chairmen have been selected to carry on the work of organization in their respective states. Each is to have its own State Osteopathic Women's Association, convening as in the past, during the State Convention, electing their own President and other officers, just, as in the past, they elected their Chairman.

The Committee earnestly desires that Osteopathic Women's Clubs, such as are now organized in Los Angeles and Chicago, be organized in every large city and in the District Societies, where possible. The line of organization recommended would eventually lead from local Clubs to State Associations, all federated into the National Association.

To the local clubs should be added the Affiliate membership.

The securing of Student membership among women in our colleges is to be stressed with a desire to assist these students in preparing for public welfare work among women and children.

A large number of the women present at the convention became members of our Association, following the adoption of our Constitu-

tion. Our slogan is 100 per cent membership. Will you help complete full membership in your state, effect your state organization and secure your refund, that our splendid program of activities may not be interrupted? Please send in your application for membership at once to Dr. Katherine McL. Scott, Secretary, New First National Bank Building, Columbus, Ohio.

Officers

Josephine L. Peirce, D. O., President, 201 Savings Building, Lima, Ohio.

Fannie E. Carpenter, D. O., First Vice-President, 27 E. Monroe Street, Chicago, Ill.

Julia E. Foster, D. O., Second Vice-President, Stein Building, Butler, Pa.

Robertta Wimer-Ford, D. O., Treasurer, Hoge Building, Seattle, Wash.

Katherine McL. Scott, D. O., Secretary, New 1st National Bank Building, Columbus, Ohio.

Julia E. Richardson, D. O., Auditor, Auditorium Building, Minneapolis, Minn.

Aurelia S. Henry, D. O., Membership, 341 Madison Avenue, New York City.

Janette H. Bolles, D. O., Professional Education, 1457 Ogden Street, Denver, Colo.

Eliza Edwards, D. O., Policy, Traction Building, Cincinnati, Ohio.

Fannie E. Carpenter, D. O., Press, 27 E. Monroe Street, Chicago, Ill.

Robertta Wilmer-Ford, D. O., Finance, Hoge Building, Seattle, Wash.

New Chapters Forming In the Osteopathic Women's National Association

By Dr. Fannie E. Carpenter, Chicago, Chairman, Press Committee

Our slogan 100 per cent membership. Every woman in the profession a member of the O. W. N. A.

Memberships keep coming in from all parts

of the country, but we want you, Doctor, and your loyal support and co-operation. Send in your application for membership today to the Secretary, Dr. Katherine McL. Scott, New

Bunting Building Corporation Bonds Are
Delivered Just as Soon as You Pay for Them.

Osteopathy Founded on Bed-Rock of Science

You know that osteopathy works in harmony with the laws of Nature and in accordance with principles of science; but would you not like the public to know and appreciate these facts?

Expert testimony as to the facts from a recognized authority is at your command. Listen to this!

A. T. Still: Pioneer Immunologist

Long before Behring, or any other bacteriologist, worked in this line, Dr. Andrew Taylor Still, the founder of osteopathy, began to treat infections on the principle that the body itself contained the cure, which was virtually the announcement of the theory of immunity; and Still will ultimately be given credit for this original thought in the future history of medicine.

We make no stupid, ignorant or undemonstrable claim when we say that osteopathic treatment quickly stops the growth of many pathogenic germs in the human body, especially when the infection is treated early in its course. The earlier it is given the treatment the better the results. All osteopaths know this to be true. Now this is precisely what Behring found to be the case with his antitoxin treatment for diphtheria, and it is the one important consideration in the application of the antitoxin in human diphtheria. When the powerful and highly diffusible toxins of the diphtheria organism have destroyed beyond repair vital organs of the body, neither antitoxin nor osteopathy can reconstruct them. But if the treatment be given while there are as yet comparatively little toxins in the blood and the tissues, the antibodies—that we must assume are made following osteopathic treatment which lowers tissue tension along the spine, caused by the toxins, and thus releases the nerves—these antibodies, we say, quickly neutralize the toxins, just because there is but a small quantity of them as yet present. In other words, it is easier to repel the small advance of an invading army than it is to save the country after a horde of the enemy have ravaged and sacked it and killed half the population—From "Osteopathy Potent Where Serums and Vaccines Fail," by Professor M. A. Lane.

This is only a small part of the splendid testimony to A. T. Still and the Science of Osteopathy which appears in the brochure "Osteopathy Potent Where Serums and Vaccines Fail." Price \$4.00 per hundred, with envelopes, express prepaid. Don't you want to preach this to your field?

OSTEOPATHIC HEALTH

9 S. Clinton Street, Chicago

First National Bank Building, Columbus, Ohio. Already our women are falling in line with the organization plan of the Association, in the formation of local clubs and State Associations. Colorado leads out with the organization of the first State unit. The officers of the new Colorado Osteopathic Women's Association are:

President, Dr. Janette H. Bolles, 1457 Ogden Street, Denver.

Vice President, Dr. Amy Schoonmaker, Burnett Building, Colorado Springs.

Secretary-Treasurer, Dr. Clara S. Richards, 310 Masonic Temple, Denver.

Where is the next state to follow Colorado's lead?

The first city to organize a local unit since the Chicago Convention is Omaha. A most enthusiastic meeting was reported last month, at which Dr. L. Van H. Gerdine was the guest, and made the address. Dr. Florence Mount was one of the women who furnished the inspiration and initiative in the organization of the Omaha Club.

We want you to know the officers of our local clubs. If you are making plans for organizing in your city or state, and feel you would like the advice or suggestions of groups already organized, we are sure you will find a ready response if you write to the President or the Corresponding Secretary of any of these clubs.

Osteopathic Women's Club of Omaha

President, Dr. Florence Mount, 305 Lefang Building, Omaha.

Vice-President, Dr. Angela M. McCreary, Brandeis Theatre Building, Omaha.

Secretary, Dr. Josephine Armstrong, Omaha.

Treasurer, Dr. Alice Johnson, Omaha.

Osteopathic Women's Club of Los Angeles. President, Dr. Louise P. Crow, Baker-Detweiler Building, Los Angeles.

Vice-President, Dr. Caroline P. Jackman, Los Angeles.

Correspondence-Secretary, Dr. Lillie Vance, Story Building, Los Angeles.

Recording-Secretary, Dr. Eva Kate Coffey, 639 S. Grand Avenue, Los Angeles.

Federation Secretary, Dr. Jane Bashor, Los Angeles.

Treasurer, Dr. Grace Wyckoff, 2428 Budlong Avenue, Los Angeles.

Osteopathic Women's Club of Chicago.

President, Dr. Sarah M. Hummel, 27 E. Monroe Street, Chicago.

1st Vice-President, Dr. Nella B. C. Drinkall, 1421 Morse Avenue, Chicago.

2nd Vice-President, Dr. Zuie A. McCorkle, 4951 Kenmore Avenue, Chicago.

Recording-Secretary, Dr. Lucille S. Brand Russell, 7510 Parnell Avenue, Chicago.

Treasurer, Dr. Gertrude Gaylord, 11415 S. Michigan Avenue, Chicago.

The Osteopathic Women's Club of Chicago has instituted a Scholarship Loan Fund for the purpose of assisting young women who wish to study osteopathy but who have not the necessary funds to carry them through school.

AMONG OUR OSTEOPATHIC INSTITUTIONS

Organizational Work at the Los Angeles College

By Edward S. Merrill, D.O., Chairman Publicity Committee of the Board of Trustees of the College of Osteopathic Physicians and Surgeons.

Reorganization of the Board of Trustees: Under the efficient management of Dr. T. J. Ruddy, the new President of the Board, there has been a complete reorganization of the Board of Trustees together with the election of some new members. The Board has been divided into committees and this year instead of the old haphazard and careless way of calling meetings, which have never been on time, and which never did business in an orderly manner, the work of the Board will be done largely at the Committee meetings. The Board being only called together to OK or to refuse to OK the action of the several committees.

The several activities of the committees will be headed by men who have had much experience in the undergraduate department, the postgraduate department and the hospital committees all being officered by men who have had the best training in their line.

The Business Department: The College has just received word from Mr. Edward H. Light of San Diego, that he will accept the position of Promotion Secretary to take the place of the present Business Manager, resigned. This is a big step toward solving some of the educational and business problems which are confronting the College.

Mr. Light has been for eleven years Promotion Secretary of Beloit College, Beloit, Wis. He is a graduate of Denver University and later postgraduate of Beloit College and is a member of the Beta Theta Pi and Phi Beta Kappa Fraternities. In his official capacity at Beloit College he cemented the Alumni to the College and succeeded in raising \$100,000, two years ago, from the Alumni of that institution for the College endowment. He has had charge of the Commons and of the student activities, has controlled the dormitories and boarding places, has installed an organization

for the internal working of the College itself and has doubled the number of students in the College by his faithful work and in coming in contact with the High schools of the Middle West.

The Clinic: Dr. Edward Abbott, who has had his internship from the Los Angeles County Hospital, has been drawn from the private practice to take charge of the clinical department of the College. He is now surrounded with a large group of clinical instructors which will supplement the work of full time paid professors in the science department. The patients will be handled in the clinic as they are in some of the big diagnostic clinics of some of the major hospitals in the country. The attending physician will take the patient to his particular department which seems to be indicated from the original complaint and then he will be routed from one specialist to another until he has all of the examinations that are necessary including the laboratory work, and then all of this material will be summed up and he will be put in the hands of the students for appropriate treatment.

In addition to this method a large number of practitioners around Los Angeles have signified their intentions of coming into the clinic and taking over the actual treatment of the patients and working with the students giving them their ideas. In this way each student will have the benefit of having some thirty or forty physicians over him showing him their particular methods, over the course of a year. With the work in the County Hospital and the Receiving Hospital of the Police Department and the out patients work of the last year, which is provided for in the curriculum, the student should have training second to no institution in America, today.

Educational Department: Under Dr. Louis

Help Us Put It Over by Christmas!
You Can Do It by Buying Your Bond Today!

C. Chandler, the new President of the College, and a man who is thoroughly up in educational work by reason of his connection with educational institutions throughout the country. The work in the College has been divided up into departments with a head of each department who shall stand as organizer and who shall stand responsible to the president for the work in the several branches underneath him. By this system the old inco-ordination which has hampered the growth of the institution will be done away with and one can put his finger upon any weak point in teaching force. Lecture work is largely supplanted by clinical and laboratory work and the student is given the benefit of the latest pedagogical researches.

The New Dean: Dr. Henry S. Miles who comes to the College from Sacramento is eminently fitted by education and temperament to carry out his part in this new work as dean. He already has the confidence of the students and his character, loyalty and wide experience in osteopathic circles makes the Board feel that the relationship between the student and the faculty will be well taken care of this year.

The Purchasing Department: This department last week bought forty-two new Bausch & Lomb sub-staged equipment microscopes and this, together with the completion of the new physiological laboratories of 1500 square feet, insures better work in bacteriological and physiological lines than is given in any university in America today.

The New Enrollment: With a week still before registration there are already thirty-five students enrolled with prospects of more than fifty in the freshman class. In view of the defection of several of the older members of the faculty and the Board and the consequent slowness of reorganization, even to the point where no catalog has yet been issued by the College, this is a remarkable tribute to Dr. Ruddy and to Dr. Chandler in their reorganization ability. With the optimism and the enthusiasm which will come, not only to the student body but to the profession in the state, from the new teaching order and the installation of true osteopathic ideals, the outlook for the College for this year and for the future is very rosy.

Dr. Styles Added to Des Moines Still College Faculty

Des Moines Still College has a new technician and clinician. He is Dr. John H. Styles, Jr., who is known to a large number of the profession as one of the biggest and best natured of the brethren. (He says he has to be, for he is too fat to fight, and can't run.)

Dr. Styles, who is a graduate of the Los Angeles College of Osteopathic Physicians and Surgeons, returns to active professional work after an absence of about three years, spent in the service of the National War Work Council of the Y. M. C. A., and as a rural work specialist and sex hygiene lecturer for the State Committee of the Young Men's Christian Association in Iowa.

The Doctor is a graduate of the Willmar (Minn.) High School. His preparatory collegiate work was taken at Macalester College, St. Paul, where he spent three years. The first two years of Dr. Styles' professional training were obtained in the American School of Osteopathy, at Kirksville. He then went to Los Angeles, where his course was completed in the C. O. P. & S.

After graduation, and a period of special post-graduate work, the Doctor went to Portland, Ore., and located for practice. He continued in practice there until the war came, when he returned to Kirksville, (which by the way, is Mrs. Styles' home) and there entered the service of the Army Y. M. C. A.

He was immediately ordered to Camp Funston, Kans., where he spent the better part of a year and a half as an Army "Y" man. While at Camp Funston, Dr. Styles incorporated into his program a comprehensive campaign for sex education, seeking thereby to supplement the Army lectures with personal conferences and detailed instruction. This work met with an eager response on the part of the men and was continued with remarkable success throughout the Doctor's army service.

After the armistice was signed, Dr. Styles contemplated returning to his practice. He was approached at this time, however, by the State Committee of the Iowa Y. M. C. A. and offered a position as general secretary for rural Y. M. C. A. work in Black Hawk County, with headquarters at Waterloo. This proposal also contemplated an active sex hygiene campaign in that locality and over the state. Feeling that there was still a call for service, the Doctor accepted the offer and went immediately from Camp Funston to Waterloo.

For the past year and a half Dr. Styles has been engaged in the work in Black Hawk County. During this period he has lectured extensively over the state, and has held personal conferences with over fifteen hundred boys and girls on matters pertaining to their sex lives and problems. In this work, as well as in the more regular types of rural activity, the Doctor has established an enviable reputation for himself throughout Y. M. C. A. circles. But through it all the osteopathic urge was insistently strong, and Dr. Styles has been ready for some time to return to the fold. Then the call from Des Moines Still College came, and



Dr. John H. Styles, Jr.,
Des Moines-Still College of Osteopathy.

he decided to return to professional life.

Dr. Styles is a man of wide experience and professional attainment. He is, in addition, a literary man of parts. He has had considerable newspaper experience, and is the author of many widely known poems. While engaged in active practice in Portland, the Doctor was a steady contributor to several of the magazines of the profession. It is understood that he plans to resume contributing to the literature of the profession. It might be of interest to add that Dr. Syles, who is a member of the Atlas Club, has recently been appointed Editor-in-Chief of the Atlas Club Bulletin.

Dr. Styles has received a reception by the student body commensurate with his general preparation. Wherever he goes and comes and into whatever he does he infuses and enthruses new life. Part of this comes from his good nature, but largely through his ability and versatility. His versatility enables the college to make use of the wonderful opportunities which are possible in Des Moines by way of good will of the public, and a large supply of clinical material. Everybody knows him; everybody likes him; everybody makes him a friend.

The institution feels that it has a find, for he rounds out and helps to make the now splendid faculty of which the Des Moines College boasts. The future with such enthusiasm is easily conquered.

Really a Great Book for Doctors

The most interesting book read this summer was "The Freudian Wish," by Holt, which might be described as the latest thing in psychology. Taking the basic idea of Freud, Holt follows its necessary implications in normal psychology.—Elwira Tracy, D.O., Yonkers, New York.

Dr. John H. Crenshaw, Physician-in-Chief, Liberty Hospital, St. Louis, Mo.

I have just read the bond announcements on pages 3 and 5 of *The OP* and beg to advise that I am very sorry indeed that I can't take at least ten or fifteen of your good 7 per cent bonds, not alone for the splendid investment which it undoubtedly is, but especially to help along osteopathic propaganda. I believe you have done more to educate the laity osteopathically than any other propaganda that has ever been put out.

As I told you in my other letter we are preparing to build a new hospital and I have the problem of raising a little over \$200,000 for this purpose. Consequently I cannot take your bonds in sufficient quantity to be of any service to you but I herewith buy one of your bonds. Dr. P. H. Howard said he would take another, and possibly some of the other members of the staff will also take a bond or two. They are doing this expressly to help osteopathy in a small way as they are all bearing the burden of raising this other fund with me and of course none of us at this time can really spare any cash.

Dr. Howard left Thursday afternoon for a short hunting trip in Colorado. He will be back in two weeks. At that time he will take up his bond and you may send mine on at once. Each member of the staff would like to take one or two of the bonds just to say that they are all subscribers to your building fund, but I know that they are heavily subscribed on some other propositions that will keep their noses to the grindstone to pay out on that; consequently they cannot do anything at this time.

When we get in our new hospital which will be several months yet, I want you to come and visit us to see what an institution we really have.

Help Put a Roof Over the Presses
That Grind Out Osteopathic Success.

THE OSTEOPATHIC PHYSICIAN

A Few of the Many Who Back Us Up!

Dr. Fred Bischoff, Waukegan and Chicago, Ill.:
 "I am with you heart and soul in your building project. Am sure it means growth and increased prestige for osteopathic field literature campaigning. You have done a wonderful work for the profession for twenty years and, I believe, are destined to do a great deal more if you are properly backed up by the profession. I regard your building site as the most desirable spot in Waukegan for your industry and the fact that you are opposite the new post-office will be a great advantage in your mailing work. It gives me more pleasure than I can tell you to place my subscription for a \$1,000 bond, and I would take more at this time had I not made several contributions to local institutions lately. All success to you. Your new office and printing plant will be a great credit to osteopathy."

Dr. Nettie M. Hurd, Chicago, Ill.:
 "I prize your bonds as an investment. Am glad to do my bit toward your success. Increase my subscription to two bonds. Wish I could own a hundred of them."

Dr. Charles S. Green, New York City:
 "For reasons of sentiment as well as loyalty to the man and company that have done so much to bring osteopathy to the fore and keep it there, the entire flotation of \$50,000 ought to be subscribed and held by the osteopaths alone. Put me down for a one thousand dollar bond."

Dr. George W. Goode, Boston, Mass.:
 "I have read with care your editorial in September *OP* on your publishing relations to the profession, as well as the bond advertisements you have put out, and what you say is true. Every D.O. worthy of the degree should get behind your proposition. My answer is my subscription and check enclosed herewith for one \$100 bond."

Dr. John W. Banning, Brooklyn, N. Y.:
 "I have read your appeal to the profession and am of the opinion that you have a claim on it, and I am backing up my view of the matter with my check for two \$100 bonds. I wish you all success in this undertaking."

Dr. J. V. McManis, Kirksville, Mo.:
 "I am with you on your project for building a model printing plant for osteopathic publicity's benefit at Waukegan, Ill. You may well be proud of what you have done for osteopathy and are still doing. We are all proud of your work, and many thousands of dollars of money would not compensate us for your possible loss to the profession." Here is my order for \$1,000 of your excellent bonds. Wish I could take ten times as much."

Dr. L. Alyse Oliphant, Virginia, Ill.:
 "I am sorry not to have been one of the 'co-workers' who answered your first appeal to the profession, but I can hear you say 'better late than never', so here I am with my little old \$100 for the gold bond, etc., and if I can see my way clear to getting another any time soon I will surely do so, and be glad to help on the good work. I am hoping the subscriptions and checks will flow in upon you fast now as I know it means added work and expense to have to call upon us repeatedly for co-operation like this, which we should give and eagerly too, at the first call." By a later letter: "I enclose another check for \$200 for two more bonds."

Dr. Fred A. Belland, Sharon, Pa.:
 "Your bond investment looks good to me and I want to endorse your publishing activities in behalf of osteopathy, so I will take four bonds."

Dr. Ralph Kendrick Smith, Boston, Mass.:
 "Enclosed please find check for Bunting Building Bond. I should certainly feel ashamed of myself if I wasn't in on this deal. Team play is the only thing that is going to win in osteopathy. We've all got to boost each other in everything that is worth boosting at all. Osteopathy is not going to win by everybody playing a lone game. No single force in osteopathy has been more persistently, everlastingly at it, than you have, and personally, it makes me feel kind of good all over to have a few of my dollars participating in your cooperation in osteopathy. More power to you."

Dr. Arthur G. Hildreth, Macon, Mo.:
 "I wish you every success in your bond flotation and Waukegan plant building plans and will be glad to give you any aid that I can."

Dr. George W. Riley, New York, N. Y.:
 "I am glad to back up your building enterprise; you deserve support by our profession; and you may put me down for \$500 or \$1,000 of your 7 per cent security."

Dr. O. J. Snyder, Philadelphia, Pa.:
 "It is a real pleasure to recognize the good work you have done for the profession for so many years as publicity and promotion expert—especially by as profitable a form of recognizing you as investing in your 7 per cent First Mortgage Real Estate Gold Bonds. I enclose my check for \$500 and may take more of the issue later."

Dr. George A. Still, Kirksville, Mo.:
 "Such enterprise as your wonderful 'Osteopathic Health' propaganda for the science and profession, not to add The *OP*'s constructive work as a newspaper, are worthy of all encouragement by the members of our profession. I am glad to send you my check for \$1,000 for an equivalent amount of your good building bonds."

Dr. Harry W. Gamble, Missouri Valley, Ia.:
 "Those building plans for putting a roof over the head of osteopathic propaganda look good to me. The bond proposition you offer is likewise an attractive investment from a selfish business point of view. There is therefore both good business and deep sentiment arguing in favor of making investment in your security. I enclose my check for \$500 and would take a bigger slice but for having had a hard experience with smallpox in the family, practice shot to pieces for a time on account of it, etc."

Dr. Hugh R. Russell, Buffalo, N. Y.:
 "I glory in your enterprise, my brother, and am glad to say, put me down for a substantial investment in your attractive First Mortgage Real Estate Gold Bonds. I'll leave it to you to say whether I'll take \$500 or \$1,000 worth."

Dr. A. A. Bashline, Grove City, Pa.:
 "You are deserving of all the appreciation and encouragement for your valuable services to osteopathy, and I am glad to place my subscription for a \$500 bond. I enclose the name of W. F. Roslyn and also one of my patients, each of whom likewise want a \$500 bond."

Dr. Hugh Beaton, Danville, Ill.:
 "Every osteopath ought to subscribe for these good bonds. Kindly notify me when they are ready for delivery and I will send cash for three bonds."

Dr. R. E. Tuttle, Hicksville, O.:
 "Please find check for four Bunting Building Bonds of \$100 denomination—two for myself, and two for my mother."

Dr. Riley D. Moore, Washington, D. C.:
 "I am loaded, but if it will help any I'll gladly promise to take a \$100 bond anyway, before March 1st, 1921, your 'goal day'."

Dr. Edith B. Nicholson, Rutherford, N. J.:
 "Have mislaid the subscription blank but I am enclosing my check for a \$100 bond."

Dr. Carl P. McConnell, Chicago, Ill.:
 "That was a clear, forceful and, I think, a just statement in September's *OP* calling on the profession to buy your building bonds. You have earned the right to expect that we will do this much for you. It will help us as a profession, I dare say, quite as much as it will help you, if we do this. As an investment it is really an attractive proposition. I expect therefore that the profession will respond generously and absorb your whole issue in short order. Put me down as a buyer and a little later on, before the whole issue is taken up, I will advise you how much I can handle."

Dr. Grace Kramer, Ackley, Ia.:
 "Am just starting in practice, so am at great expense. Nevertheless, am interested enough in osteopathy to want to see it grow, so I borrowed the money to buy my \$100 bond."

Dr. P. Victor Aaronson, San Francisco, Calif.:
 "Every osteopath who has the good of the science at heart should support your work in behalf of the profession and I take pleasure in subscribing for one bond."

Dr. M. Feodore Langton, Toronto, Canada:
 "It cuts dreadfully to have to pay the high exchange on American investments at this time, as you can well understand; but my sense of loyalty for your services to osteopathy is great enough to stand a 10 per cent loss and find pleasure in it. Does that prove I am with you? I enclose \$110 in Canadian currency for my one \$100 Bunting gold bond."

Dr. Ruth E. Humphries, Waltham, Mass.:
 Please reserve for me \$300 of your 7 per cent First Mortgage Realty Gold Bonds; a check for \$50 as first installment on the four-months payment plan is enclosed. I wish the amount were many times greater. May your good work go on."

Dr. John B. Buehler, New York City:
 "I am strong for Bunting's good work to put osteopathy on the map and keep it there. My subscription enclosed for two bonds."

Dr. Mary S. Crosswell, Farmington, Me.:
 "It is a pleasure to take a bond in appreciation for your work for the cause of osteopathy."

Dr. W. C. Dawes, Bozeman, Mont.:
 "I am glad to kick in for a \$100 bond. You deserve your whole bond issue subscribed by our profession within thirty days."

Dr. Louisa Dieckman, Buffalo, N. Y.:
 "I enclose order for a bond for myself and another for one of my patients."

Dr. Emma Gardner, Hagerstown, Ind.:
 "Put me down for one bond on the four monthly installment plan."

Dr. C. W. Young, Grand Junction, Colo.:
 "I have saved up \$100 and if it is not too late will be glad to become a cog in your wheel."

Dr. Ernest C. Bond, Milwaukee, Wis.:
 "I endorse your project fully; you merit our professional support, and I will be glad to help by investing to whatever extent I can."

Your Money Will Bring 7 Per Cent With Safety
 In a Bunting Bond Besides Boosting Osteopathy.

PUBLISHER'S DEPARTMENT

Fine for You—November "OH"

Five pages of short editorial paragraphs on osteopathy, health and disease are the opening feature of the November issue of *Osteopathic Health*. You will like this feature. Your patients, your field will like it.

But there are only 7,500 copies to sell, over and above contract orders, so there is no use in boosting it very hard. It will sell itself and be "all out" in the course of a month, just as every other number has since January, 1920—except September, with its illustrated "Philosophy of Osteopathy" (4,500 left), and the August issue on "Children's Diseases" of which we have but 800 copies left. We, of course, are still selling October, "Every-day Osteopathy."

This November installment of our Public Education Service for the Profession is entitled "Osteopathy Cures Various Nervous and Blood Disorders." Good wigwagging title for flagging public attention, eh? Surely.

"Rheumatism", Goitre—simple, Exophthalmic, etc., Diabetes and Constipation are the four main topics of discussion.

Dr. Carl P. McConnell reviewed the manu-

script of the "Goitre" article and said "It is essentially modern in its method of presenting this interesting subject in which osteopathy is now demonstrating such a remarkable percentage of cures." You will like it.

You see this November issue is well balanced between acute and chronic conditions.

If you don't enjoy our regular promotion service of *Osteopathic Health* you ought at least to order the magazine sent to you on an individual subscription (\$1.00 per year) so you can review these excellent articles as fast as they come out. Then you could order such numbers as win your enthusiastic admiration, as this month's issue undoubtedly will. Of course it is real wisdom to use *OH* in good quantities 12 months a year on annual contract. There is a right way to do everything. For your practice-promotion, this plan is *it*. You can't beat this plan. Adopt it. Why not have and use the best?

Order today.

THE BUNTING PUBLICATIONS, INC.,
9 So. Clinton St., Chicago.

SUCCESS CREATES ADDED NEED OF POPULAR LITERATURE

Some osteopaths occasionally express the idea that if there were greater efficiency in technique in the profession the results from osteopathic treatment would be so much improved that the circulation of popular literature about osteopathy would be unnecessary. The thought intended seems to be that if osteopathic practitioners uniformly produced A-1 results for their cases, the good word about osteopathy would be spread so enthusiastically by word of mouth and there would be no need of printed explanations.

Well, of course, the more uniformly successful in curing his case an osteopath is the more his reputation grows and the bigger becomes his clientele, but that does not in any way militate against the use of popular literature. The more successful osteopathy is and the more famous it becomes, the greater the demand for and the need of good, popular explanatory literature.

As a matter of fact, the two are entirely separate factors in osteopathic progress. While entirely distinct, yet they are intimately related. One is as necessary and essential as the other if we are to make real progress in winning the world to an understanding of osteopathic principles and to spread confidence in osteopathic therapy. Each works in its own way. Both co-operate fully.

In the long run, osteopathic popular literature cannot be used successfully by a man who cannot give a good account of himself as an osteopathic physician in the treatment room. On the other hand, the bigger a man's practice grows as a result both of his efficiency in diagnosis and treating and the use of popular explanatory literature, the more he needs such literature to do his explaining for him. The busier he is, the more he needs his time, thought and energy for actual definite practice, and the more valuable to him becomes the literature which does his explaining and popular educating for him. It is a big help to efficiency in one's practice, isn't it, to serve patients who

have a sympathetic and intelligent understanding of osteopathy? This, in brief, is the testimony of all consistent patrons of *Osteopathic Health*—patrons who have been using this literature service year in and year out, for ten, fifteen, or twenty years running.

Because the value of this feature of "Osteopathic Health" service is not so generally appreciated as it ought to be, many osteopaths who could use it to the utmost advantage do not do so. They think of it *only* in terms of "patient getting" instead of also in terms of "patient educating" and friend-making for the science. Of course, for the young man in practice—the young chap who starts with nothing and has a clientele to build up—"Osteopathic Health" is indispensable and serves a different purpose wholly. It puts him on his feet. It serves him as a medium for advertising osteopathy and bringing patients to his office, thus giving him a chance to demonstrate his ability as a real osteopathic physician before he starves out waiting to be discovered.

WOULD A COPY OF "OH" MONTHLY HELP YOU?

It is very advantageous for those who order field literature on their own prescription (that is, buy what they like irregularly) to place a single subscription for *Osteopathic Health* which comes to you by the year for \$1.00. You know war and the paper famine terminated our old-time custom of sending out free sample copies. When we must print editions of short 5,000 copies or more of filling actual current orders it is easy to figure out that we can't afford to send out upwards of that number of free copies as samples. There is another good reason: The profit on the whole edition would not stand such an overhead expense at present costs of printing products. But if you order only what you like, how can you tell what you want if you don't see it? You ought to place your individual subscription, therefore, and get *OH* delivered on your desk every month. Then

Dr. James D. Edwards Osteopathic Physician and Surgeon

Originator of FINGER SURGERY
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Impairment. Practice Limited to
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to order it.

Of course, we think that is a poor way to do
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know best, go ahead and do it your way. To
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the individual subscription list at \$1.00 per
year. There is no other way. Shall we do this?
Say the word and we shall be glad to.

IN D.O. LAND

Dr. Goode Examiner for State Boxing Commission
Dr. George W. Goode, of Boston, Mass., has been
appointed Examiner by the State Boxing Commission
of Massachusetts.

Good Practice Open in Pulaski, Tennessee

Dr. C. N. Brackett who has practiced at Pulaski,
Tenn., for a number of years announces that he is
removing to Memphis and that he leaves a good practice
in Pulaski for some D.O. who is not entirely satisfied
with his present location. For particulars get in touch
with Dr. C. N. Brackett, 501 Lyceum Bldg., Memphis,
Tennessee.

Dr. Edgar S. Comstock Talks to Medical Liberty League

The American Medical Liberty League held its second
annual meeting at Hotel Sherman, Chicago, October
24th, 25th and 26th. The convention was addressed,
among others, by Dr. H. W. Pierson, editor, *Hahneman-
nian Advocate*, and by Dr. Edgar S. Comstock, of the
Chicago College of Osteopathy.

Fire Damages Home of Dr. J. H. Maxfield

Dr. J. Harris Maxfield, of Newark, N. J., suffered
damage by fire at his residence, Berkeley Heights Park,
October 21st. Carpenters had been at work in the upper
part of the building. A fire broke out and before it
could be gotten under control, the roof and third floor
of the residence had been destroyed. The loss fully cov-
ered by insurance was mostly on the building itself as
nearly all the furniture was rescued.

Dr. Thomas C. Morris Joins Chicago College

Dr. Thomas C. Morris, ASO-1900, of Spokane, Wash.,
has been put under contract by the Chicago College of
Osteopathy as professor of Osteopathic Technique, Super-
visor of Clinics and College Physician. He has reported
for duty and is now on the job. Many attendants at
AOA conventions have admired Dr. Morris' technique
work and will approve heartily of his new connection.

Dr. Quinn, President Women's Democratic Club

Dr. Ella X Quinn, Miami, Fla., has the honor of being
the first duly elected president of a woman's democratic
club in Dade County, Fla. Dr. Quinn was absent from
Miami for about four months during the summer. After
visiting the AOA convention at Chicago, she stopped
over at Pittsburgh, Baltimore, Washington, Columbia,
Jacksonville, St. Augustine to examine and treat pa-
tients. Dr. Quinn's Miami office, until later in the
winter, will be at her residence, 1019 12th St.

Dr. Ralston Enjoys a Good Vacation While "OH" Keep His Practice Active

I have just returned from a six weeks' vacation and
motor tour through Old New England. I find that osteo-
pathy is forging ahead in the East. All the members
of the profession whom I saw or heard of appeared to be
very happy and prosperous in practice. I enclose
check to cover account for the little *OH* whose monthly
visits kept my practice beautifully alive during my
absence.—*John L. Ralston, D.O., Glencoe, Ill.*

Minnesota Meeting

The Minnesota division of the A. O. A. held its annual
convention at Minneapolis, October 1st and 2nd. Officers
elected were: President, Dr. C. L. Larson, Zumbrota;
Vice-president, Dr. O. R. Milstein, St. Paul; Secretary,
Dr. C. S. Pollock, Minneapolis; Treasurer, Dr. Ethel
Becker, Preston; Librarian, Dr. Martha A. Covell, Min-
neapolis; Trustees, Dr. L. S. Keyes, Minneapolis; Dr.
C. E. Mead, Redwing, and Dr. L. U. Miller, Winona;
Delegates to the AOA, Dr. W. G. Sutherland, Mankato;
Dr. C. S. Pollock, Minneapolis.

—*F. E. Jorris, D.O., ex-Secretary.*

Passing of Dr. Fred W. Gage

Dr. Fred W. Gage died at his home in Chicago Sep-

tember 30th. His end was not altogether a surprise as
his health broke completely about a year ago, neces-
sitating his retirement from practice. He suffered from
a serious heart lesion and a general nervous break-
down. The profession has lost one of its landmarks by
Fred's passing. He was one of our most loyal and de-
pendable men and is mourned by a host of friends in
and out of the profession. Dr. Gage is survived by Mrs.
Gage and a son, F. Wallace Gage, and daughter, Mrs.
R. W. Zimmerman.

Dr. Peirce Heads New Department Ohio Woman's Club

Announcement in the *Ohio State Journal* of Columbus
states that Dr. Josephine L. Peirce has been appointed
chairman of a newly organized department of child
welfare of the Ohio Federation of Women's Clubs. Dr.
Peirce has served for six years as chairman of the
Public Health Department of the Ohio Federation of
Women's Clubs. The new department will comprise
welfare work with the child of all ages, including
prenatal influences and maternal care of the infant.
This is a field of work in which Dr. Peirce has been
active.

Fees Up!

A great many osteopaths are actually trying to com-
pete with chiros at chiros' prices and it can't be done.
The chiros live and work on too low a basis to be classed
as professional servitors. Raising osteopathic fees gives
public notice that there is a difference between a daily
"punch" and comprehensive examination and treatment.
Everybody puts his own value on his own work, of
course, and all one requires is courage sufficient to take
the step. It really takes more nerve to raise from \$2.00
to \$2.50 than it does to raise from that to \$5.00.
—*Wm. E. Waldo, D.O., President, AOA, Seattle, Wash.*

Vermont Meeting

The annual convention of the Vermont Osteopathic
Association was held October 16th at St. Albans. Officers
elected were: President, Dr. Howard A. Drew, Barre;
Vice-president, Dr. J. H. Spencer, St. Albans; Secretary-
treasurer, Dr. Geo. D. Eddy, Burlington; Delegate to
AOA, Dr. H. A. Stevenson, St. Albans; Executive com-
mittee, Dr. Howard A. Drew, Dr. Dale S. Atwood, Dr.
L. D. Martin, Dr. C. G. Wheeler, and Dr. G. D. Eddy.
The constitution was revised to coincide with that of
the AOA. Resolutions were passed favoring 1920 AOA
Legislative Program and opposing National Health De-
partment.—*Howard A. Drew, D.O., President.*

King County, Seattle, Meeting

The King County, Seattle, Wash., Osteopathic Society
held its annual meeting October 19th. Officers elected
were: President, Dr. Elizabeth Hull Lane; Vice-presi-
dent, Dr. James H. Moore; Secretary, Dr. Ida F. Rosen-
crans; Corresponding Secretary, Dr. Roberta Wimer-
Ford; Treasurer, Dr. Martin D. Young; Chairmen
of Committees appointed: Membership, Dr. Margaret
Moore; Finance, Dr. Claude Synder; Press, Dr. A. E.
Cunningham; Policy, Dr. J. R. Honold; Legislative,
Dr. A. B. Ford; Program, Dr. J. T. Slaughter; Clinics,
Dr. N. Henrietta Crofton; Entertainment, Dr. Melissa
Boddy, Dr. T. Oren Watson, Dr. Minnie Potter, and Dr.
Hattie Slaughter.

New York State Annual Meeting

The annual meeting of the New York State Osteopathic
Society was held at Utica, N. Y., October 22nd and 23rd.
Favorable action was taken on the question of uniform
legislation and the society went on record to seek legis-
lation in accord with the model bill as drafted by the
A. O. A. Legislative Committee. Dr. Aizen gave a very
lucid and interesting explanation of the bill and its ob-
jects. Officers for the coming year are: President, Dr.
Carl D. Clapp; Vice-president, Dr. Mary E. McDowell;
Secretary, Dr. E. R. Larter (re-elected); Treasurer,
George V. Webster; Directors, Dr. C. R. Rogers, Dr.
Ralph M. Crane, and Dr. A. B. Clark; Sergeant-at-arms,
Dr. John R. Miller.—*Edwin R. Larter, D.O., Secretary.*

Indianapolis Osteopathic Association Organized

A new organization of osteopaths has been formed
at Indianapolis, Ind. It is known as the Indianapolis
Osteopathic Association. Its purpose is to stimulate
original research and to encourage and foster good
fellowship. The association hopes later on to establish
a free osteopathic clinic. The officers are: President,
Dr. C. B. Blakeslee; Vice-president, Dr. Roland McCabe;
Secretary-treasurer, Dr. Kate Williams; Trustees, two-
year term, Dr. George Tull; one-year term, Dr. Walter
Grow; Publicity, Dr. Roland McCabe, and Dr. Ferne
Eckert; Program, Dr. Kate Williams, Dr. M. E. Clark,
Dr. E. V. Woodruff.—*Roland McCabe, D.O., Chairman,
Publicity Committee.*

Timely Operation on Dr. McCole's Little Daughter

I received a letter from Dr. George Still, saying that
he had let my little girl out of bed, and one from my
wife, bubbling over with thankfulness. Julia Ardella,
age 3, was struck in the side with a teeter-toter a few
weeks before, making a bad bruise, but she kept going
with very little complaint. The G. A. R. excursion came
along a little later and a kind Providence led us to de-

Get a Bond Today and Help Us Pay for
Some of Those Shingles.

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Dr. Nettie M. Hurd
Orificial Gynecology—Diseases of Sigmoid,
Rectum and Anus

Dr. W. Frank Powers
Acute and Chronic Diseases

REFERRED CASES CONSULTATION

Detailed diagnostic report and complete in-
structions as to advisable treatment returned
by mail to physicians.

OH Job Lots at Bargain Prices

Occasionally we have some accumulated, assorted copies of OH for sale as "job lots" at bargain prices. Some bear a professional card imprint put on thru error. These are otherwise in first class condition. Others are slightly damaged or soiled. Mixed assortments of these copies "as is" and taken just as they run without selection, are priced at \$3.00 per hundred. Reduced price when any large accumulation is taken. Old imprints blotted out and new imprints made without extra charge. If interested in large lots, write for description of what we have.

OSTEOPATHIC HEALTH

9 South Clinton St., Chicago

that Mrs. McCole and the little girl should visit me folks in Kirksville. They got there just in time have Dr. George Still open a large abscess in the skin and find further an abscessed appendix. The incision was also impacted above the injury. It took exceedingly fine surgical work and after treatment to bring through safely. You know, I guess, how I feel about Dr. George, and this is just one more proof of what I have said before and that is, that anything in a surgical way that human hands can do Dr. George's can. This is a safe surgical slogan—let George do it!"
—Geo. M. McCole, D.O., Great Falls, Mont.

West Virginia Meeting

The West Virginia Osteopathic Society held a special meeting at Parkersburg, October 16th. The Legislative Committee gave a comprehensive report of the work done in the state and expressed themselves as being satisfied with the laws as they exist, since osteopaths are all privileges the practitioners of any other school enjoy. A program to secure more osteopaths for the Mountain State was adopted and will be religiously executed. The formation of a new association, termed Ohio Valley Osteopathic Society and comprising the states of Ohio, Kentucky, and West Virginia, was discussed at length. A committee was appointed to further the plan. The subjects of Publicity, Public Education, and Public Clinics were subjected to much discussion. The society voted unanimously to put the "Double Membership Clause" into effect immediately. Dr. J. H. Robertson of Huntington, was chosen Delegate to the House Representatives for the next AOA meeting and Dr. E. Morris, of Clarksburg, alternate. The association desires correspondence with any osteopath who is desirous of practicing A. T. Still osteopathy and is seeking good location.—G. E. Morris, D.O., Secretary.

R. P. Buckmaster Expects to Resume Practice
Dr. R. P. Buckmaster, of Orlando, Fla., writes us of his change in activities and asks us to make his location clear to the profession. He says: "Twenty years of fighting for osteopathy and taking care of a busy practice was beginning to tell on my own health so I decided to get out on the outside for a time. I organized the Sam Johnson Real Estate Company and am glad to say that we are doing a fine business. I keep in close touch with osteopathy, however, and maintain my membership in the different professional organizations. Later on I expect to get back into active practice of osteopathy, after taking a thorough post graduate course. I feel I shall never be content to rest out of practice because I am for osteopathy "heart and soul." My brother, Dr. O. L. Buckmaster, formerly of St. Cloud, Fla., has removed to Orlando and is carry-

ing on the practice in association with Dr. C. L. Brundage. Thus there will be no loss as to the number of osteopaths practicing in Orlando. There will still be six resident osteopaths in active practice, more I believe, than in any other town or city in Florida."—R. P. Buckmaster, D.O., Orlando, Fla.

Typhoid Takes Life of Dr. Pennock, of Amarillo

Dr. L. N. Pennock, senior partner of the firm of Pennock & Cradit, of Amarillo, Texas, died at his home October 22nd, following a six week's siege of typhoid fever, which is believed to have been contracted while the doctor was on a camping trip this summer. Everything in the power of the best physicians in the city, and from the Southwestern Osteopathic Sanitarium, of Blackwell, Oklahoma, to assure the recovery of Dr. Pennock were without avail. He had worked very hard during the influenza epidemics and was in poor physical condition to withstand such a serious attack. Dr. Pennock was born in Missouri in 1872, attended the University of Indiana and graduated from the American School of Osteopathy in 1904. He was a member of the A. O. A. and a trustee of the Texas Panhandle for the last twelve years, and in Amarillo for the last five years. He was one of the A. T. Still "old school" osteopaths, and had built up an enviable reputation as an osteopath and a man all over the large Panhandle country. He made it a practise to attend post-graduate schools and clinics every year, kept alive to all the problems of osteopathy, and was one of the pioneers in this section of the country.

Los Angeles Society September Meeting

Southern California has lived up to its reputation for quick and enthusiastic action, in connection with the recent tour of Signaller Tom Skeyhill through that sunny southland. Skeyhill arrived in Los Angeles at 11:45 a. m. on Saturday, September 18th. He was immediately taken in tow by Dr. Robert D. Emery, president of the Los Angeles association, and rushed to the noon meeting of the City Club. Although his appearance there was a surprise both to himself and the club, he carried the occasion with flying colors. He was then rushed away to San Diego, without being allowed a breathing spell, where he was taken in charge by Dr. Gladys Morgan, president of the state association. A public mass meeting in this far southern city gave Skeyhill the opportunity for a most effective appeal against the tyranny of war, and incidentally for the benefits of osteopathy, and breadth of vision in matters medical and civic. On Sunday evening the speaker was back in Los Angeles, and was rushed from there to the city of roses, Pasadena, where he spoke in the First Presbyterian Church. His audience there was as enthusiastic as it was large. The following day was given over to the Los Angeles Society. On account of the short time allowed for publishing the meeting, the attendance was below the hundred mark. The scarcity of numbers was more than compensated for by the enthusiasm of the occasion. Skeyhill's appeal for unity in the profession, and his account of the sudden cure of his blindness, experienced at the hands of an osteopath, were given in a manner to arouse admiration for the speaker and enthusiasm for the ideals of osteopathy. On Tuesday and Wednesday Signaller Tom conducted a cyclonic tour of the high schools, including all of the important Los Angeles institutions, and speaking before crowded assemblies. This program was varied with an after dinner speech before the Kiwanis Club. The star event of Skeyhill's tour was his appearance on Wednesday evening before a crowded audience in Trinity Auditorium, where his hearers were held spell-bound for over two hours. The subject of this address was "The Reconstruction of the World."

Iowa Waking Up—Has Good Meetings

The six district associations of the Iowa Division A. O. A. held their annual meetings as follows: Second District at Council Bluffs, September 15th. Program included Atzen on "Fundamental Principles Between Schools of Practice"; Gilmour on "Legislation in Iowa"; Kline, of Malvern, on "After Effects of Flu"; Thompson, of Red Oak, on "Nervous Diseases"; also good clinics. Officers elected: President and State Trustee, Dr. Lillian Wagoner, of Creston; Secretary-treasurer, Dr. Rolla Hook, of Logan. Sixth District at Perry, September 16th. Program: Taylor, of Des Moines, in public lecture on "Osteopathy"; Clinics: Gilmour on "Iowa State Affairs"; Round Table on Acute Diseases". Officers elected: President and State Trustee, Dr. C. L. Shaw, Indianola. Third District, at Ottumwa, September 17th. Program devoted entirely to business and discussion of the state association plans and Iowa legislation by Gilmour. Officers elected: President, Dr. C. J. Chrestensen, of Keokuk; Secretary-treasurer, Dr. E. W. McWilliams, of Columbus Junction. First District, at Cedar Rapids, September 21st. Program: Gerdine, of Macon, "Hysteria and Neurasthenia". Officers elected: President and Trustee, Dr. B. H. Rice, Cedar Rapids; Secretary-treasurer, Dr. Mary J. Mason, Cedar Rapids. Fourth District, at Ft. Dodge, September 22nd. Program: Discussion state problems and legislation, Gilmour. Balance of meeting devoted to very practical round table of technique by all present. Officers elected: President and Trustee, Dr. E. M. Van Patten, Ft. Dodge; Secretary-treasurer, Dr. Carolyn Barker, Ft. Dodge. Fifth District, at Sioux City, September 23rd. Program: Dr. H. R. Holmes, of Chicago, on "Technique"; W. C. Gordon, Sioux City, on "Osteopathy in Anemia". Officers elected: President and Trustee, Dr. R. T. Quick, Sioux City; Secretary-

treasurer, Dr. Elizabeth F. Mochrie, Sioux City. We had really good meetings all the way around and had good programs except for the constant reappearance of "yours truly" on the same old subject of get-together and join the associations and get laws and all that stuff. I really think though that it was a good exhibition of the fact that Iowa is coming out of her long, long sleep and is about to do something right in the home and the lair of the "chiro". The state, through its officers, is trying to make these district meetings good and I believe that this is proof that it is worth while for any state association to make the effort. Dr. A. E. Hook, of Cherokee, one of our very oldest pioneers in the state is leaving practice and has sold out. He goes to Kirksville for a rest, but his later plans are indefinite. Iowa hates to lose him.—R. B. Gilmour, D.O., Sioux City, State Sec'y.

Statement of the ownership, management, circulation, etc., required by the act of congress of August 24, 1912, of *The Osteopathic Physician*, published monthly at Chicago, Illinois, for October 1st, 1920. State of Illinois, County of Cook—ss. Before me, a Notary Public in and for the State and County aforesaid, personally appeared H. S. Bunting, who, having been duly sworn according to law, deposes and says that he is the editor of *The Osteopathic Physician*, and that the following is, to the best of his knowledge and belief, a true statement of the ownership, management, etc., of the aforesaid publication for the date shown in the above caption, required by the Act of August 24, 1912, embodied in Section 443, Postal Laws and Regulations, to-wit: 1. That the names and addresses of the publisher, editor, managing editor and business managers are: Publisher, The Bunting Publications, Inc., Chicago, Illinois; Editor, Henry Stanhope Bunting, Lake Bluff, Illinois; Managing Editor, H. S. Bunting; Business Manager, Ralph Arnold, Chicago, Illinois. 2. The owners are: H. S. Bunting, Lake Bluff, Illinois; H. D. C. Van Asmus, Lake Bluff, Illinois; R. A. Weston Arnold, Chicago, Illinois; A. M. Sick, Park Ridge, Illinois; H. F. Hosley, New York City, 810 Singer Bldg. 3. That the known bondholders, mortgagees and other security holders owning or holding 1 per cent or more of total amount of bonds, mortgages or other securities: None. 4. That the two paragraphs next above, giving the names of the owners, stockholders, and security holders, if any, contain not only the list of stockholders and security holders as they appear upon the books of the company, but also, in cases where the stockholder or security holder appears upon the books of the company as trustee or in any other fiduciary relation, the name of the person or corporation for whom such trustee is acting, is given; also that the said two paragraphs contain statements embracing affiant's full knowledge and belief as to the circumstances and conditions under which stockholders and security holders who do not appear upon the books of the company as trustees, hold stock and securities in a capacity other than that of a bona fide owner; and this affiant has no reason to believe that any other person, association, or corporation has any interest, direct or indirect, in the said stock, bonds, or other securities than as so stated by him. H. S. Bunting, Editor. Sworn to and subscribed before me this 20th day of September, 1920. (Seal) Ralph Arnold. (My commission expires December 5th, 1923.)

You will find enclosed my check to cover one year's subscription for *The OP*. It sure is a great paper and no osteopath can afford to be without it.—M. R. Runions, D.O., Correctionville, Ia.

"The Osteopathic Physician" is getting better all the time. It is beyond doubt the best publication in the field.—H. H. Stewart, D.O., Crete, Nebr.

PERSONAL

Dr. J. L. Walker, formerly at Sunnyside, Wash., has opened up an osteopathic hospital at Yakima, Wash.

Dr. Lillian M. Whiting, of Pasadena, Calif., announces that her daughter, Dr. Lillian Whiting is now associated with her in practice at 1315 Fair Oaks Ave., South Pasadena.

Dr. Blanche Mayes Elfrink, of 27 E. Monroe St., Chicago, has announced that hereafter she shall limit her practice to obstetrics and gynecology, including pelvic surgery.

Dr. Charles F. Bandel, of Brooklyn, N. Y., spent two months in the mountains of New Hampshire. He returned to his practice the latter part of September in splendid health after his visit at the mountain resorts.

Dr. O. S. Miller and Dr. C. C. Wageley, announce the removal of their offices from 804 Pine St. to more commodious quarters in the Central National Bank Bldg., northwest corner of 7th and Olive Sts., St. Louis, Mo. Dr. Geraldine M. Stevens of June 1920 class ASO will be associated with them.

A postal card received from Dr. James D. Edwards, of St. Louis, Mo., dated October 2nd, at St. Johns, Newfoundland, states that he is up North seeking a rest cure on his way home from his recent tour through Europe.

Dr. F. E. Dayton, of Escanaba, Mich., attended the convention of the American Association of Orificial Surgeons at Chicago, October 3rd, 4th, 5th and 6th. He read a paper entitled "Successes, Orificial and Otherwise". It was devoted mainly to reciting findings of osteopathic clinics.

How Much of This Load Will You Share With Us?
\$1,000? or \$500? or \$100? Be Just to Your Boosters!

Dr. William F. X. Dierkes has returned to active practice at Carbondale, Pa., after some months out of practice during which time he was taking post-graduate work in medicine, surgery and osteopathy. Dr. Dierkes has secured his M.D. degree but he says that he is still giving his patients "osteopathy" even though he has an "M.D." tacked on to his name.

Dr. H. C. Montague, of Muskogee, Okla., has announced that he now has associated with him Dr. T. A. Rieger, who for the past three years has been chief examiner and attending surgeon to the A. S. O. Hospital, Kirksville. Much new equipment for diagnostic and surgical purposes has been added to the office. Both general and specialty practice will be handled.

After twenty-one years of active practice at Cherokee, Ia., where he established one of the very finest clientele in the state, Dr. A. E. Hook, has retired from active practice and will take a long needed rest. He will reside at Kirksville, Mo., where he owns some residence property. He has sold his practice at Cherokee to Dr. J. A. Hirschman, formerly of Kirksville, Mo.

After having completed a year of work in laboratory methods, including blood chemistry at Gradwohl's Laboratory in Chicago, and ex-radiance at the Victor School in Chicago, and basal metabolism and clinical pathology at the Mayo Clinic, Rochester, Dr. Grance C. Shank is returning to Los Angeles, Calif., to act as director of Dr. T. J. Ruddy's newly equipped laboratories.

Dr. C. C. Reid, of Denver, Colo., is president of the National Association of Lions' Club. The organization issues quite a substantial monthly magazine. The September issue contains a full report of the national convention for 1920, which was held at Denver and it shows that there has been a phenomenal growth in the organization and that a royal good time was given to the members at the Denver meeting.

LOCATIONS and REMOVALS

Dr. W. H. Baker, at Novinger, Mo.
Dr. D. F. Spicer, from Delaware, O., to Marion, O.
Dr. C. J. Ridley, from El Centro, to Escondido, Calif.
Dr. B. A. Harry, from LaFayette, La., to Rosewood, Texas.

Dr. Cora Pippenger, at 485 W. Monterey Ave., Pomona, Calif.

Dr. O. L. Danile, from Greenfield, Ia., to Reedley, California.

Dr. Clara Busse, from Neenah, to Goodwin Bldg., Beloit, Wis.

Dr. Hazel Waggoner, from Louisiana, Mo., to Carrollton, Illinois.

Dr. R. R. Sterrett, from Clay Center, Kans., to Missoula, Mont.

Dr. Pauline Munro, at 347 W. White Oak Ave., Munrovia, Calif.

Dr. Wilfred W. Micks, from Connellsville, Pa., to West Newton, Pa.

Dr. Wm. Stryker, from Livingston, Mont., to McMinnville, Ore.

Dr. Dewia E. Hegwer, from North Bend, Nebr., to Fremont, Nebr.

Dr. A. C. Tebeau, from Hendersonville, to Fayetteville, North Carolina.

Dr. Vera E. Bullard, from Vergennes, Vt., to St. Johnsbury, Vt.

Dr. H. L. Crosser, from North Baltimore, to Niles Bldg., Findlay, O.

Dr. E. A. Moore, from Voegtli Bldg., to 1224 Pearl St., Boulder, Colo.

Dr. George W. Sutherland, from Estherville, to Sault Ste. Marie, Ontario.

Dr. W. C. Carter, from Delta, Colo., to 413 E. Capitol Ave., Springfield, Ill.

Dr. T. A. Rieger, from Kirksville, Mo., to Phoenix Bldg., Muskogee, Okla.

Dr. C. F. Robinson, from Unionville, Mo., to 415 N. High St., Marshall, Mich.

Dr. Charles J. Muttart, from Widener Bldg., to 1813 Pine St., Philadelphia, Pa.

Dr. Leonard Tabor, from Kansas City, to 215 S. Main St., Excelsior Springs, Mo.

Dr. Henry C. Sands, from 456 W. 63rd St., to 6520 Kenwood Ave., Chicago, Ill.

Dr. Luella B. Miller and Dr. Roy N. Miller, from Baton Rouge, La., to Steelton, Pa.

Dr. T. I. Moffet, from Belding, Mich., to 1108 S. Franklin St., Kirksville, Mo.

Dr. C. N. Brackett, from Pulaski, Tenn., to 501-2 Lyceum Bldg., Memphis, Tenn.

Dr. May H. Pease, from Philadelphia, Pa., to 217 Waterman St., Providence, R. I.

Dr. G. E. Mickle, from 617 E. Liberty St., to 711 N. University St., Ann Arbor, Mich.

Dr. L. D. Perry, from 6 Lamb and Farwell Bldg., to 7 Hippodrome Bldg., Warren, O.

Dr. Madeline Doyle, from O'Neill, Nebr., to 212 Aldrich Block, Grand Rapids, Mich.

Dr. J. Robert Moseley, from Petoskey, Mich., to St. Augustine, Fla., until June, 1921.

Dr. Thos. G. Burt, from Groton, S. D., to 607 W. Vernon Ave., Los Angeles, Calif.

Dr. J. Willis Galbreath, from 421 Widener Bldg., to 1923 Chestnut St., Philadelphia, Pa.

Dr. L. S. Larimore, from Blackwell, Okla., to Kansas City, Mo., with offices in the Ridge Bldg.

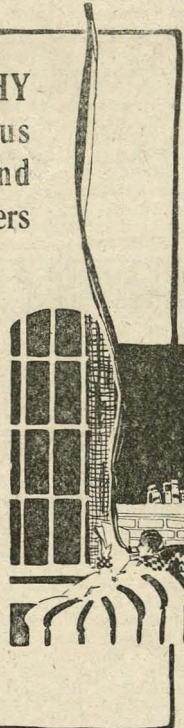
Dr. O. S. Miller and Dr. C. C. Wageley, from 804 Pine St., to Central National Bank Bldg., St. Louis, Mo.

Dr. Lottie E. Wright, from 414 McClymonds Bldg., to Leonard Agency Bldg., 312 E. Main St., Massillon, O.

**OSTEOPATHIC HEALTH
for NOVEMBER**

**OSTEOPATHY
Cures Various
Nervous and
Blood Disorders**

"Rheumatism"
Goitre
Diabetes
Constipation



If you are starting a campaign and want something that will get quick attention—use this November issue. It tells about complaints so common that nearly everybody is interested.

**Osteopathic Health
for
October**

Every-Day Osteopathy

**Brief Facts About Some of the
Common Ills It Cures**

Kidney Disease Not Associated With Backache.

Sleep for the Sleepless.

Chronic Suppuration of the Ears.

Bronchitis Cured by Adjusting a Vertebra.

Chronic Headache Curable.

Eye-Strain May be Due to Faulty Body Mechanism.

Gallstones.

Asthma.

Neuritis.

Acute Congestion of the Liver.

Constipation.

Stomach Trouble.

Facial Paralysis

Anemia—What Is Best for It?

Dyspepsia from Two Viewpoints

Cause and Cure of Catarrh

Insanity and Mental Troubles.

Osteopathy After Confinement.

You need this magazine as an aid in your every-day practice. It means more money for you, because through it you cause more people to rely on osteopathy and desire your services. The demand for osteopathic treatment grows in proportion to the extent the people know about it and its benefits.

MARRIED

Dr. Blanche Barton Broderick, of Duncan, Okla., and Mr. John D. Lee, May 29th.

Dr. Helen Kelley and Clifford Groff, both of Belle Plaine, Ia., July 24th, at Cedar Rapids.

Dr. A. B. Carson, of Piqua, O., and Miss Lucille Merideth, also of Piqua, O., August 31st.

Dr. Elva George, of Brush, Colo., and Mr. W. D. Kaucher, of Kansas City, Mo., October 15th.

Dr. Allen Barnes Ames and Miss Elizabeth Wing Woodward, both of Winooski, Vt., September 15th.

Dr. W. E. Bodenhamer, of La Grange, Mo., and Miss Louise Harding, of Eolia, Mo., September 1st.

Dr. Paul A. Reilly, of Stillwater, Minn., and Miss Louise Vande Guft, of Austin, Minn., June 30th.

Dr. Wilbur W. Illsley, of Hermiston, Ore., and Miss Frances Gardiner, of Baker City, Ore., July 28th.

Dr. Hugh Beaton, of Danville, Ill., and Miss Louise Keller, of Connersville, Ind., at Connersville, October 8th.

BORN

To Dr. and Mrs. George M. Glasco, of Warren, O. a daughter, Elizabeth Matilda.

To Dr. and Mrs. L. E. Staff, of Jacksonville, Ill., a boy, October 10th, Leonard Ellis, Jr.

To Dr. and Mrs. A. Leon Sikkenger, of Norway, Me., on August 11th, a 6½ pound baby boy, Albert Leon, Jr.

DIED

Dr. Harvey John Wentworth, graduate of ASO January 1907, August 28th, in Appomattox, Va., age 47.

EXCHANGE and MARKET

FOR SALE—Established practice in Missouri county seat, 2,000 people, only osteopath in county. Eight bed hospital equipment. Man and wife doing minor surgery and optometry would do well. Average \$800 to \$1,000 a month last year. Good reasons for selling. Address No. 248, care The OP, 9 S. Clinton St., Chicago, Ill.

FOR SALE—10 Elgin Motor \$90; 10 Co-operative Grocery Society of America \$350; wanted Thompson Malted Food at \$1.10 a share. Address L. J. Mather, 6877 Union Ave., Chicago, Ill.

FOR SALE—Best for woman, or man and wife—good practice and office equipment in best location in one of the best county seat towns of Central Illinois. Established fourteen years. Going for P. G. Address No. 249, care The OP, 9 S. Clinton St., Chicago, Ill.

FOR SALE—Eight volumes Reference Handbook, 1915, good condition; Diseases of Women (Crossen) 1914; Principles of Osteopathy (Tasker) 1913; Osteopathic Gynecology (Woodall); State Board Questions (Wood). Address No. 246, care The OP, 9 S. Clinton St., Chicago.

WANTED—Position as assistant to busy osteopath for few months to gain experience and knowledge of up-to-date methods, primary objects. Compensation necessary. Graduate ASO 1918. Licensed in Missouri, Iowa and Nebraska. Age 33, married. Address No. 247, care The OP, 9 S. Clinton St., Chicago, Ill.

WANTED—Competent osteopath to take charge of large practice for one year. Must be able to practice in Wisconsin. Very liberal arrangement to right man. Address No. 250, care The OP, 9 S. Clinton St., Chicago.

Good opening for a woman in third largest city in Florida. Best all year around climate. Reason, retiring. Better than \$5,000 cash this year. Will sell for \$300 cash. Furnishings could not be bought for that. Address No. 252, care The OP, 9 S. Clinton St., Chicago.

WANTED—Assistant; married man with Illinois license; general practice; practice already established. Address No. 251, care The OP, 9 S. Clinton St., Chicago.

WANTED—Position as an assistant or will take charge of practice preferably in Minnesota. Address No. 253, care The OP, 9 S. Clinton St., Chicago.

WANTED—Position as assistant, to take charge of his practice. Address No. 254, care The OP, 9 S. Clinton St., Chicago, Ill.

Poor Man

Where can a man buy a cap for his knee,
Or a key to the lock of his hair?
Can his eyes be called an academy
Because there are pupils there?
In the crown of his head what jewels are found?
Who travels the bridge of his nose?
Can he use when shingling the roof of his mouth
The nails on the end of his toes?
Can the crook of his elbow be sent to jail?
If so, what would he do?
How does he sharpen his shoulder blades?
I'll be hanged if I know, do you?
Can he sit in the shade of the palm of his hand?
Or beat the drum of his ear?
Does the calf of his leg eat the corns on his toes?
If so, why not grow corn on his ear?

**You Can't Get a Better Investment
Because It Pays 7 Per Cent and Boosts Practice for You!**