

The Osteopathic Physician

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Osteopathy Stands for the Truth
Wherever It Is Scientifically Proven

The Osteopathic Physician

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Number 5

Wonderful Progress of Osteopathy in the British Isles

As Revealed at the Eleventh Annual Dinner of the British Osteopathic Association at Hotel Cecil, London, which is Reported for OP in the Inimitable Style of a London Journalist

On Friday evening, October 7th, a very cheerful party of osteopaths assembled at the Hotel Cecil for their eleventh annual dinner. Their cheerfulness was not merely due to the exceptionally pleasant dinner presided over by Dr.

Harvey Foote and Mrs. Foote, but to the fact, evidenced by the very large gathering, that osteopathy in Great Britain had made wonderful progress since the association was established little more than a decade ago. Members

of the association present came from all parts of England, Scotland, Ireland and Wales, and included medical practitioners who had added qualifications in osteopathy to their ordinary medical degrees.

The toasts of "The King" and "The President of the United States" were drunk with great enthusiasm.

INHERENT RIGHTNESS OF OUR CAUSE

Dr. J. Stewart Moore, of London, in proposing the toast of "The Visitors" emphasized the value of Great Britain and America working



Dr. Chester H. Morris

Eddie Cantor

Aphrodite, herself

Dr. Oliver C. Foreman

Galaxy of Stage Beauties in "Midnight Rounders"

Hunting That \$1,000 Perfect Spine!

Ten-Finger Simon-Pure Osteopathic stage scene at Garrick Theater, Chicago, at the matinee performance of Oct. 16th, held for the bene-

fit of the Child Reclamation Clinic of the Chicago Osteopathic Hospital.

This feature was part of the great national competition of the Society for the Prevention

of Spinal Curvature to award \$1,000 for the most perfect spine in America.

("Such backs are worth a million," says Eddie Cantor!)

hand in hand in the matter of osteopathy. In both countries great advancement was being made, and this not so much because of the inherent rightness of the principles of osteopathy. The guest of honor was Dr. W. Kelman McDonald, M.D., D.O., of Edinburgh, and the speaker extended a hearty welcome to him. Altogether he had known some score or so of medical men who had added osteopathy to their other qualifications, and not one of them had ever regretted it. Dr. Moore also extended a most hearty welcome to Mr. Bernard Bernard, the editor of "Health and Strength" and to Captain H. O. Carter, the distinguished barrister.

IMPORTANT TO BRITISH CHILDHOOD

Mr. Bernard Bernard, editor of "Health and Strength," after thanking his hosts for their kind invitation and warm welcome, said he had no doubt that osteopathy in Great Britain had come to stay. The British people were perhaps a little slow in taking up new subjects, but once they understood and adopted them, they stuck to them most tenaciously ("hear!" "hear!") As an advocate of health by natural methods he was most anxious that the English people should know what osteopathy means, and in this respect he hoped the newspaper press would do all they could for the association. All knowledge of use to society should be made widespread, and osteopathy meant a very great deal especially for the children of this country; often it gave them the chance of a healthy life which they could not otherwise obtain, and he sincerely wished the association all possible success in their humanitarian work. He would certainly do all he could to help them himself.

IMPROVING ITS LEGAL STATUS

Captain H. O. Carter said that speaking as a lawyer, he was well aware of the improved status of osteopaths in Great Britain. Though much remained to be done, much had been done, he was sure, to make this valuable science known to and recognized by the public and the authorities. In time, other sciences would bend the knee to osteopathy, but pioneers were needed to set forth the facts plainly and simply, without false pride or false modesty. One among them tonight held the highest degrees in medicine, and he had taken up the subject of osteopathy, and if it was good enough for him it was good enough for others. Osteopathy was one of the most valuable sciences of health and healing, and it should certainly be recognized as such.

NOTABLE ADDRESS OF PRESIDENT FOOTE

Dr. Harvey R. Foote, of 40A Park Lane, London, then read the president's address—"Osteopathy in the British Isles." After extending a most hearty welcome to the members and visitors present, as President of the Association for the last two years, Dr. Foote gave a brief account of the establishment of the association in Great Britain, and a little personal history of the principal pioneer osteopaths, whose courageous and untiring early efforts had made possible the present position of the association.

OUR BRITISH PIONEERS

Among those named were Dr. J. Martin Littlejohn, Dr. Jay Dunham, Drs. Horn and Walker, Dr. Pheils, Dr. Georgiana Watson—the pioneer lady-osteopath to settle in London. Dr. Hudson, Dr. and Mrs. Barker, Dr. William Smith and Mrs. Gulliland McArthur.

ONE GOLD STAR

Dr. Wilford Sidford, who graduated in osteopathy at Los Angeles in 1914, and on the outbreak of war joined the R. A. M. C. was fatally wounded in France in 1916. He was a most brilliant young man, and without doubt would have earned great laurels in the profession he had adopted.

During the war an offer was made to the war office for the osteopaths to give their services; the offer was at first rejected and opposed, even

to the extent of prohibiting soldiers and sailors to receive such treatment, but ultimately this order was countermanded—largely as a result of the efforts of Dr. Pheils, supported by a committee of osteopaths.

LONDON CLINIC OF UTMOST IMPORTANCE

The establishment of the London clinic at 12 Wigmore Street, under the direction of qualified osteopaths and managed by a lay society, was an event of first importance; and its development had demonstrated the soundness of the organization.

Dr. Foote summarized the legal position of osteopaths in Great Britain, and outlined some of the difficulties encountered; and also emphasized the need of an official register of qualified osteopaths to guard the public against pseudo-osteopaths whose qualifications were negligible or insufficient, and who constituted a very real danger to the public. He urged the need for publication of pamphlets and literature generally, explaining popularly the principles and practice of osteopathy.

Referring in detail to the London clinic, at No. 12 Wigmore Street, Cavendish Square, W. I., Dr. Foote said that their latest triumph there was the addition of a splendid X-Ray apparatus which had been donated. The clinic owed its existence in the first instance to the generosity of Major J. B. Paget—one of its very best friends; and the name chosen for the lay organization "The League for the Prevention of Spinal Curvature, Ltd." indicated to the public that osteopathy dealt principally with the spine. Dr. George S. Watson was in charge of the clinic; he is a graduate of the American School of Osteopathy, and had done special laboratory work under Lane. In time it was hoped that the clinic would have its own specially equipped laboratory, with all the latest appliances for chemical, analytical and bacteriological tests and it was hoped soon to get the latest apparatus for blood diagnosis.

A COLLEGE WANTED IN ENGLAND

Another great need was the establishment of a college of osteopathy in Great Britain; at present, training had to be obtained in America. With the growing interest and support coming from British medical men, he thought the college proposals were nearer realization than some of them believed.

GLASGOW WANTS A CLINIC TOO

It was pleasing to know that a request had come from Glasgow for the establishment of a branch clinic of the League for the Prevention of Spinal Curvature, Ltd.; and Drs. Alfred T. Moore, McArthur and Anderson were supporting the movement most enthusiastically.

"It is hoped," Dr. Foote concluded, "that this clinic movement will spread throughout Great Britain, and that great good will follow our efforts. I have the ambition to see our profession on this side give the lead to America in clinic organization. We are, of course, quite separate and independent from the American League, which is an organization for America only. In some respects, our league in Great Britain is further developed than the American league. We are the first to operate under a lay-organization, and the first to have engaged the whole-time services of a qualified osteopath on salary working in the league's own premises.

This not merely adds to our prestige, but it correlates our forces. As individual practitioners, we may all be blessed with a successful practice, but it is impossible to unite and concentrate the influence of the various private practices and bring all this to bear upon the public. The various practitioners, however, can support the clinic as a medium through which the profession can express its faith in osteopathy as a means of securing the betterment of humanity." (Applause.)

GREAT ADDRESS BY DR. McDONALD

Dr. W. Kelman McDonald, M.D., D.O., of Edinburgh, was then introduced by the presi-

dent, and was listened to with rapt attention while he read a paper entitled "Osteopathy and the Confessions of a Medical Convert." Dr. McDonald said he was only a beginner in osteopathy, comparatively speaking, but he had passed through several stages of progress of thought, and knowledge brought the confidence of experience and inspired him with sufficient courage to address the association that evening in response to the invitation with which they had honored him. Though he was born in London he was Scotch to the backbone, and in this strange land it was a great sustainment for him to see the "kent faces" of his brother and sister and wife, and many other friends he had come to know and respect through his studies in osteopathy.

He graduated in medicine at the Edinburgh University in 1907, and afterwards was himself cured of Muco-membranous Colitis by an osteopath. This put his body—or to be more correct, his bowel—at rest, but his mind into a state of unrest. Muco-membranous Colitis was supposed to be of neurotic or neuropathic origin, and if those adjectives were scratched out and "osteopathic" substituted, in nine cases out of ten that would be accurate.

The world neurasthenia which was in everybody's mouth nowadays, was originally termed "the X-disease"—X being the unknown quantity. In ninety-nine cases out of a hundred, the unknown quantity was to be found in the framework of the body—which was in itself an unknown quantity to the average medical practitioner, who was interested only in organs, in diseases of them and in such gross framework abnormalities as dislocations and fractures, and his physical examination was almost purely ventral or on the front aspect of the body. Heart, lungs, liver, spleen and stomach he loved to investigate; anything so important or basic as the backbone, failed to interest him and was to him a true "terra incognita" or unknown land.

RECALLS HIS FIRST DOSES

Dr. McDonald's first dose of osteopathy was when he himself and other members of his family were cured by it. His second was when, as Resident Physician of the Royal Infirmary at Edinburgh, a wonderful number of patients were cured by Compound Tincture of Cardamoms—a very harmless, pleasing, pleasant-smelling, nicely-tasting mixture; really of course they were cured by the healing powers of nature, and so he himself as their physician got his second dose of osteopathy. His third dose came when patients complained quite incidentally of "pain in the back," and when he himself noticed that patients with sciatica had pain and tenderness in the lumbar region and over the sacro-iliac joints, that patients with stomach trouble had pain and tenderness in the middle dorsal region, that patients with heart trouble had pain and tenderness in the upper dorsal region, and that patients with headaches had pain and tenderness in the upper cervical region, and he looked at the patients' back and in a fairly large number of cases was able to recognize structural abnormalities, especially in the cases presenting "group lesions."

But though he recognized these structural abnormalities, he felt quite incapable of remedying them then, although he was confident they could be remedied. The remedy he knew now lay in osteopathy. It did not lie in the giving of drugs. This fetich certainly went back to the days of Hippocrates who was famous among the Greek physicians. He was born on the Island of Cos, 460 B.C., and was commonly called 'The Father of Medicine.' It was pathetic in a way to think that the great word Hypokrites had given derivation to our English word "hypocrite" and that "hypocrisy" should be defined as "a feigning to be what one is not."

TRIED TO FORGET IT!

After this third dose of osteopathy, he buried himself in purely scientific medical research

work, and for eighteen months worked in the laboratory of the Royal College of Physicians, Edinburgh, investigating the sensory nerve endings in muscle. After preparing some sixteen thousand microscopic sections, he wrote an M.D. Thesis and was awarded a Gold Medal and given the Syme Surgical Fellowship. He then took up the study of maternity and diseases of women for several months, hoping (he must confess) to drive all thought of osteopathy out of his head. But in the end he had to investigate the subject—prove to himself that there was nothing in it or get to know all that osteopathy had to teach.

WENT TO THE FOUNTAIN HEAD

It was in this dangerous frame of mind he arrived at Kirksville, U. S. A., late in the year 1910, and what he gained there he owed directly to Dr. Andrew Taylor Still who really taught and educated him as only a born leader of thought could do, and indeed retains his hold and influence even though he is now dead. From three other men at Kirksville—Dr. George Still, Dr. George Laughlin and Dr. Gerdine the surgeon, the physician and the pathologist—he had also learned much, but in the retrospect they became ordinary mortals, whereas old Dr. Still stood alone in his greatness, and it was through this old man he had come to see that osteopathy was not something to be classed with exercise or electricity or massage, but it represents a principle, indeed, a religion, for one could consciously or unconsciously worship a creator when one is lost in wonder and admiration for the excellence of a piece of His work in the form of the human body. Dr. Still dedicated his book on osteopathy "To the Great Architect and Builder of the Universe, to Osteopaths and all other persons who believe that the First Great Master Mechanic left nothing unfinished in the machinery of His Masterpiece—Man—that is necessary for his Comfort and Longevity."

BACK TO SCOTLAND

In March, 1912, Dr. McDonald said, he had returned to Scotland, and started practice as an osteopath in Edinburgh and Dundee, earning the title of "The Itinerant Bonesetter," or "the man who takes the 'sigh' out of sciatica," and being called other names—not all of them pretty ones. April 1915 to June 1919 was taken up with war service. Still he had practiced osteopathy now for over five years and given some twenty thousand treatments—an average of three hundred and thirty per month—so that he could fairly claim to have had considerable practical experience.

He could re-echo the words of old Dr. Still and declare truthfully and sincerely: "I worked along faithfully, patiently and hopefully, finding out that the human body was just as liable to strains and variations as a steam engine, and that after correcting the strains and variations health was sure to follow * * * * I found mechanical causes for disordered functioning * * * * I adjusted the body framework and secured such good results that I was encouraged to keep on and on until now I can truthfully say that I am satisfied that osteopathy is the natural way by which all of the diseases to which the human family is heir can be relieved, and a large majority of them cured."

STRONG IN THE FAITH

Such, Dr. McDonald said, was his testimony and he was glad to have had the opportunity of giving it before the British Osteopathic Association. He firmly believed that osteopathy was a great truth, a great discovery, and that it supplied a most satisfactory method of handling the sick; that it is the most sane and natural system of healing imaginable. It was a laying on of hands, and it enabled its practitioners to be most valuable and valued members of the community. It had given him a life-work in which he was absolutely contented and happy, finding it a great privilege to be able to help suffering fellow-mortals. A few days ago

a woman came into his consulting room without conventional greeting and asked simply and directly, "Will you help me?" He had felt full of joy and immeasurably proud to know that he had at his finger-tips the means to help her if helped she could be, and thankful above all that he was not fated to be a mere prescriber of pink pills, potions and poisons. After summarizing the general causes of disease, Dr. McDonald emphasized the vital truth contained in the words so often quoted from Dr. Still: "Find it, fix it, and leave it alone," and urged all those present to have ever with them a big thought of gratitude to the pioneer who blazed the way—Dr. Andrew Taylor Still. (Loud applause.)

Dr. Pheils made a singularly happy speech in proposing a toast to the president.

ON THE RIGHT TRACK WITH CLINICS

H. Stuart Doig, Esq., B.L., a distinguished journalist, was then called upon to address the gathering. After thanking the president and members of the association for extending an invitation to him to be present at so important a gathering, Mr. Doig said it was really his wife who discovered osteopathy for him, and she was now Assistant-Secretary at the London Clinic. He did not wonder that she was both interested in and fascinated by the work of that institution. It was most impressive to him as an outside observer, and he was sure it was on the eve of great developments. Mr. McDonald's address had been a great inspiration to them all; it was obviously the emanation of a cultured mind, and an experienced, intelligent and conscientious man determined to break with prejudice could not fail to have a great influence inside and outside the medical profession to which he belonged.

CLINICS ADVERTISE OSTEOPATHY

As an old newspaper man himself, he was sure they were on the right lines in trying to establish clinics wherever possible. Whilst osteopathy was felt by the public to be merely a matter of private profit, sympathy was not aroused; the newspapers were shy of discussing it, for this and other reasons, and the establishment of clinics was the only way to get at the heart of the public. The jealousy displayed against the osteopath was becoming much more friendly, he thought, and it would break down altogether when sufficient distinguished physicians like Dr. McDonald came out and showed their determination to add osteopathy to their other professional attainments. It was along those lines that support and sympathy and publicity were available, and he would urge again the establishment of clinics all over the land, so that the public would realize that osteopathy was not simply a mysterious practice for the private profit of those who had acquired a knowledge of it, but a great new system of healing whereby the public would be enormously benefited.

The toast of "The Ladies" was responded to in a pleasing and witty manner by F. A. Hornbrook, Esq., after which a very hearty vote of thanks was extended to the speaker of the evening, Dr. McDonald, and also to the president.

NEW OFFICERS ELECTED BY BRITISH OSTEOPATHIC ASSOCIATION

President—William Cooper.
Vice-President—Mrs. Effie L. Gulliland McArthur.

Hon. Secretary and Treasurer—Mrs. Harvey R. Foote.

Members of Council (term expiring 1923)—Miss Beatrice Hamilton, Miss Georgiana G. Watson, George S. Watson and Alfred T. Moore.

Members of Council elected last year, to serve until 1922, Miss Marion Hall, F. H. Ashton and F. Grantham Browne.

From the mistakes of others a wise man corrects his own.

The greatest satisfaction in life is to do good work. —Hubbard

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Low Table Technique

Dr. Still's Technical Methods Classified

Earle Willard, D.O.

III

Surely no one expects that I am undertaking a classification of the different ways and means of adjusting the spine that Doctor Still employed.

His way of correcting spinal conditions was admirably adapted to a man of powerful build, with muscles of iron, whose outdoor life fitted him for the most arduous labor. But Doctor Still himself knew that his own *modus operandi* was not for the rank and file. He discouraged those who attempted to make adjustments exactly as he made them. For he knew it was not always practicable for others to imitate or attempt to duplicate his way of applying certain fundamental principles.

But the principle underlying his method of operation can be successfully applied by a physician of even small stature and slight build. Direct leverage adjustment with speed will prove successful when mastered by any one. It is merely a matter of applying the principle.

At the outset then, let us compare the technic that I am offering tentatively for standardization with the methods employed by *Dr. Andrew Taylor Still, the greatest corrector of spines the world has even known.*

THE COMMON FACTOR

This technic, for instance, has certain points in common with Doctor Still's technic. The underlying principles in each system are the same. The distinctive characteristics of Doctor Still's method, and of the system presented here, are these:

First, the patient's body must be placed, and the physician must stand—placing and holding his own arms and hands—so that correction or adjustment is easy, painless and certain. This includes, of course, the tensing (or as it is sometimes called "taking the slack out" of the tissues) in the region to be corrected. Which in turn implies that the patient is brought to release the voluntary muscular tension or contraction.

Second, the contact with the involved bone—the one to be moved or adjusted—must be correct. And after the vantage point, or the desired bony "eminence" has been found, the same precision must obtain in determining the direction or angle the force shall travel.

Third, the corrective force must be transmitted deftly and swiftly. Speed is the third prerequisite for successful correction; for in addition to replacement one of the objects is the relaxation of all involuntary or reflex muscular contraction.

So much for the underlying principle. But before we apply it in practice let us make an inclusive statement of the various contacts or methods employed in correcting vertebral lesions. It might be well to state, although it is a matter of secondary importance, that the following classification, as well as the names given the various contacts, are original.

DORSAL AND LUMBAR CONTACTS CLASSIFIED

In the dorsal, lumbar and pelvic contacts the patient lies prone. In the descriptions to be given, the adjuster is standing on the patient's left, the right hand being the palpating hand.

I

ANTERO-POSTERIOR SPINAL CONDITIONS

A. Single Contact Correction—Contact with the lesioned spinous tip.

B. Double Contact Correction—Contact on each side of the median line with the laminae.

A. THE SINGLE CONTACTS

1. The Semilunar (Os Lunatum) Contact.
2. The Os Magnum (Os Capitatum) Contact.
3. The Thumb-Semilunar (Os Lunatum-Thumb) Contact.
4. First Metacarpal Contact.
5. Fifth Metacarpal Contact.
6. Pisiform Edge Contact (Contact Os Pisiforme Edge.)
7. Pisiform Flat Contact (Contact Os Pisiforme Flat.)
8. Proximal Scaphoid (Navicular Proximal) Contact.
9. Distal Scaphoid (Navicular Distal) Contact.



Dr. Earle Willard

B. THE DOUBLE CONTACTS

1. The Thumb-Index Contact.
2. Bilateral Thier ar Contact.
3. Bilateral Phalangeal Contact.
4. Bilateral Pisiform Contact. (Os Pisiforme Bilateral.)
5. Bilateral Scaphoid Contact. (Os Pisiforme Bilateral.)

II

LATERAL SPINAL CONDITIONS

- A. Unilateral Transverse Contacts.
- B. Bilateral Transverse Contacts.
- C. Lateral Spinous Contacts.

A

UNILATERAL TRANSVERSE CONTACTS

In each of the following contacts listed, excepting Multangular Costal Unilateral, the corrective force is delivered straight downward upon the posteriorly prominent transverse process. In number seven, Multangular Costal Unilateral, the contact is made with a lesioned rib,

the contact point being that part of the rib lying just beyond or lateral to the transverse process.

THE CONTACTS

1. Pisiform Neck Leverage. (Os Pisiforme Neck Leverage.)
2. Scaphoid Neck Leverage. (Navicular Neck Leverage.)
3. Unilateral Pisiform Edge Contact. (Contact Os Pisiforme Edge Unilateral.)
4. Unilateral Pisiform Flat Contact. (Contact Os Pisiforme Flat Unilateral.)
5. Unilateral Proximal Scaphoid. (Navicular Proximal Unilateral.)
6. Unilateral Distal Scaphoid. (Navicular Distal Unilateral.)
7. Unilateral Trapezium-Trapezoid Costal. (Multangular Costal Unilateral.)

B

BILATERAL TRANSVERSE CONTACTS

In this group of contacts for correcting lateral deviations, although the contact is bilateral the corrective force is delivered to one side only. The hand placed opposite the median line from the contact or adjusting hand, acts merely to steady the adjuster's shoulders and help hold the contact hand firmly in position.

THE CONTACTS

1. Bilateral Pisiform-Transverse. (Os Pisiforme-Transverse Bilateral.)
2. Bilateral Scaphoid-Transverse. (Navicular-Transverse Bilateral.)
3. Bilateral Trapezium-Trapezoid Costal. (Multangular Costal Bilateral.)

C

LATERAL SPINOUS CONTACTS

1. Thumb-Spinous Neck Leverage—Face Pointing Toward Physician.
2. Thumb-Spinous Neck Leverage—Face Pointing Away From Physician.
3. Lateral Thumb-Pisiform. (Os Pisiforme-Thumb Lateral.)
4. Lateral Pisiform Edge Contact. (Os Pisiforme Edge Lateral.)
5. Lateral Pisiform Flat Contact. (Os Pisiforme Flat Lateral.)
6. Lateral Proximal Scaphoid. (Navicular Proximal Lateral.)
7. Lateral Distal Scaphoid. (Navicular Distal Lateral.)

SACRO-ILIAC LESIONS GROUPED

- I. Anterior Innominate.
- II. Posterior Innominate.
- III. Anterior Sacrum.
- IV. Posterior Sacrum.
- V. Rotated Sacrum or Twisted Pelvis.

—SACRO-ILIAC CONTACTS CLASSIFIED—

I

ANTERIOR INNOMINATE

1. Os Lunatum-Thumb Contact.
2. First Metacarpal Contact.
3. Fifth Metacarpal Contact.
4. Os Pisiforme Contact Reinforced.
5. Os Pisiforme Contact Direct.
6. Navicular-Sacral Contact.
7. Os Pisiforme-Navicular Bilateral Sacral.

II

POSTERIOR INNOMINATE

1. Os Capitatum Contact.
2. First Metacarpal Contact.
3. Fifth Metacarpal Contact.
4. Os Pisiforme Spinous Contact Reinforced.
5. Os Pisiforme Spinous Contact Direct.
6. Navicular-Spinous Contact.
7. Os Capitatum Contact Bilateral.

III

ANTERIOR SACRUM

This is a condition characterized by forward sagging of the lumbo-sacral articulation, and the correction is made by overcoming the points of rigidity maintaining the condition. The contacts for correcting all such conditions are given in their respective places.

IV

POSTERIOR SACRUM

(Contact in the median line near the base of the sacrum.)

1. Os-Pisiforme Navicular.
2. Os Pisiforme-Sacral Spinous Contact Reinforced.
3. Os Pisiforme-Sacral Spinous Contact Direct.
4. Navicular-Sacral Spinous Contact.
5. Os Pisiforme-Sacral Contact Bilateral.
6. Navicular-Sacral Contact Bilateral.
7. Bilateral Thenar. (For Bedside Cases.)

ROTATED OR TWISTED PELVIS

Twisted pelvis is characterized by lateral deviation of the fifth lumbar and often other vertebrae, by forward wheeling of one innominate and by backward wheeling of the other innominate. The contacts for correcting these conditions have already been named under their respective headings.

One innominate lesion is found post-mortem for every four or five lumbar lesions, indicating that much of the sacro-iliac involvement diagnosed as this or that form of actual articular displacement is after all a reflex involvement. Nevertheless, whatever the nature and cause, the effect is often far reaching and profound. And the easy and effective methods of correction to be described fill a long felt want.

OCCIPITO-ATLANTAL LESIONS GROUPED

- I. Bilateral Flexion Lesions.
- II. Bilateral Extension Lesions.
- III. Side Tilting Rotation Lesions.

—THE CONTACTS FOR CORRECTION—

1. Mandible Cranial Contact—Patient Prone.
2. Occipito-Mandible Contact—Patient Supine.
3. Bilateral Cranial Contact—Patient Supine.

ATLANTO-AXIAL LESIONS GROUPED

I. Rotated Atlas

—CONTACTS FOR CORRECTION—

1. First Finger Contact—Patient Sitting.
2. Second Finger Contact—Patient Sitting.
3. First Finger Contact—Patient Supine.

II. Lateral Atlas

—CONTACTS FOR CORRECTION—

1. First Finger Contact—Patient Supine.

III. Postero-Lateral Atlas

—CONTACTS FOR CORRECTION—

1. First Finger Contact—Patient Supine.

CERVICAL LESIONS GROUPED

Those below the Atlas

- I. Flexion Lesions.
- II. Extension Lesions.
- III. Sidebending Lesions.
- IV. Rotation Sidebending Lesions.
- V. Sidebending Rotation Lesions.

—CONTACTS FOR CORRECTION—

- I. Flexion Lesions—First Finger Contact Reinforced—Patient Supine.
- II. Extension Lesions—First Finger Contact Reinforced—Patient Supine.
- III. Sidebending Lesions—First Finger—Transverse Contact—Patient Supine.
- IV. Rotation Sidebending Lesions.
 1. First Finger Lamina Contact—Patient Supine.
 2. Second Finger Lamina Contact—Patient Sitting.
 3. Thumb-Lamina Contact—Patient Supine.
- V. Sidebending Rotation (Postero-Lateral) Lesions.
 1. First Finger—Spinous—Transverse Contact—Patient Supine.

RIB LESIONS AND THE CONTACTS FOR CORRECTION
First Rib.

1. Thumb-Index Costal Neck Leverage.
2. Fifth Metacarpal Contact Neck Leverage.

Second or Third Rib.

1. Pisiform Costal Neck Leverage.
2. Scaphoid Costal Neck Leverage.

Fourth to the Tenth Ribs Inclusive.

1. Multangular Costal Contact Unilateral.
2. Multangular Costal Contact Bilateral.

Eleventh and Twelfth Rib.

1. Ilio-Costal Bimanual.

(To be Continued.)

Work!

The three phases of the one pre-requisite of success, work:

1. Work is preparation for your work.
2. Work in the work that you prepared to work.
3. Work in the success that comes from working in the work that you wanted to work.

If you have to say something mean, talk to yourself.—Orville D. Caldwell, D.O., Mt. Vernon, Washington.

Worried Over "Mixing"

The thought I have in mind regarding the profession is—Why do a great number of osteopaths seem to want to "mix" as we call it? Here in Colorado we have an unlimited license and it seems not only in Colorado but other places that osteopaths are practicing medicine. True, they have the legal right, but are they not getting away from the principles laid down by Dr. Still? We had a hard fight in many states to get licenses and did not ask for a license to "mix." I think osteopaths should stick to their profession unless they take special work. I could say more along this line but space forbids.—Rodney Wren, D.O., Trinidad, Colorado.

"Palmer doesn't want educated students,—we do."

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in

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This brochure was written in the main by Dr. J. Deason and Dr. T. J. Ruddy, assisted somewhat by HSB, and has been read and approved by a number of our leading specialists, including Drs. C. C. Reid, H. J. Marshall, J. D. Edwards, W. J. Siemens, K. L. Seaman and others.

These men all say it is a very fine and very serviceable production which has the charm of being *equally* usable by and useful for the specialists in our ranks, and the rank and file of our general practitioners who stand behind our specialists. It will build up confidence for the whole profession by enhancing the respect due osteopathy and will work to retain within our profession multitudes of our patients who now pass over to the medics when they require specialism.

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The Indifferent Osteopath

Address of Mr. Philip H. Gray, founder and donor of the Detroit Osteopathic Hospital and the Detroit Osteopathic Nurse's Home and Training School, before the Ohio Osteopathic Society at its annual meeting at Delaware, Ohio, October 7.

I believe this is a timely theme and one which should be stressed again and again. To the farthest corners of our country and beyond, wherever osteopathy is represented by her trained champions, and should become known and approved of men, let stress be brought to bear on every last indifferent osteopath to throw off indifference, and launch into every possible form of endeavor to not only save osteopathy from her malicious enemies, but put her safely over the top, where she rightly belongs. If osteopaths are sincere and alert everywhere, osteopathy really has little to fear from the forces of opposition, but her real danger lies in the indifference in her own ranks. What have you in osteopathy? A great discovery which has been developed only in part, in which there is unlimited field for research work, and in which vision is free and most alluring.

Do you know what you have, indifferent osteopath, and is it worth saving? How long, think you, if osteopathy should go down to defeat, will you pick your comfortable income in your comfortable way? Of course, then, your effort to save is vital. Christianity is bigger than any Christian or group of Christians. Osteopathy, too, is bigger than any osteopath or group of them. It must and will become, in the healing world, one of the great schools of all history. Yet osteopathy seems to have some poor excuses as practitioners representing it here and there. There is not sufficient reason for this. From the first the osteopathic student should be selected for the needed personal qualities. The fact that other established schools of healing have an over production of inferior representatives in practice is no condition for osteopaths to duck behind.

Osteopathy is a new school, and born to achieve great things. There is no good reason why osteopathy, in these newer years, should not set her standards so high that she will have a much greater percentage of sincere, alert and honorable representatives than any other school of healing in the world at this time.

I never allow myself to judge osteopathy by some of the osteopaths I have seen or heard about. It is not because osteopathy or Christianity are in error at any point that people break into both folds and make poor marks. Christianity is truth—the world needs it. It needs no apology, revision or correction. Rather apologize for the poor, faltering, humanly-weak Christian. Revise and correct him. Shall we say? "Osteopaths are only human. Don't crowd them too hard. Indifference is a human weakness or quality and you cannot banish it." Yet with my conception of the value and message of osteopathy, somehow that is not a sufficient excuse to cover the situation.

Osteopathy is on the right track—a new track. It is not a side line, but a main line leading into a largely undeveloped realm. It presents a wonderful challenge to all of you who have taken up that challenge, or may come to do so. This great school needs all her followers working like a hive of bees, and there shouldn't be a drone in this particular hive. It looks to me as if many bearing the name of osteopath haven't really accepted the challenge. I charge you that you will not be real, creditable osteopaths until you have taken that challenge in full measure and are doing the work and bearing the responsibility which accompany it. As I see the osteopathic challenge, it should be a whip to your broad visioned endeavor. For you to ignore or belittle the challenge as I esteem it, will keep you from anything like notable achievement and will blight you as a frost blights.

Many unrighteous causes remain in existence because of the constant co-operation and deter-

mination of the champions of those causes. Other unrighteous causes would be desperately menacing to our country if their champions could fully co-operate. They fall apart. They quarrel and disagree, thus fortunately minimizing the evil effect of their causes.

But yours is a message of truth and healing. It is yours to bless and bring help. Have your co-operation and endeavor reach from your office through your local osteopathic society or fellowship—on through what your state society stands for and needs your personal help to achieve, and yet on to an interest in your national body, ever hoping and working that all these different lines of osteopathic fellowship and necessary organization shall be wisely led in every decision and deed. Here are important marching orders for you. Be careful lest the destroying germ of indifference cripple you here, just where your loyalty and ability can mean so much to your profession.

One indifferent osteopath is a drag to all others. He acts as a brake to the smooth, free action of osteopathy wherever he is located. Brakes have their proper places, but the indifferent osteopath is out of place acting as a brake while working at the stunt of indifference. Osteopathy must and will win, and you will want to ride with it to victory. Indifference towards osteopathy's need of you, and its need of your service, will land you some day with a heart break if you have any feelings that can be broken. For some time, when that glad day comes and hard fought battles have been won, you will have been a selfish, self-isolated, indifferent representative of your school, and you will have done little or nothing to entitle you to share in the joy and happiness of your fellows. Spare yourself this humiliation. Today while the battle is yet on—have a broad vision—think deeply and generously—be courageous and thus inspire courage in others—work honorably, nobly, tirelessly—and your reward is sure.

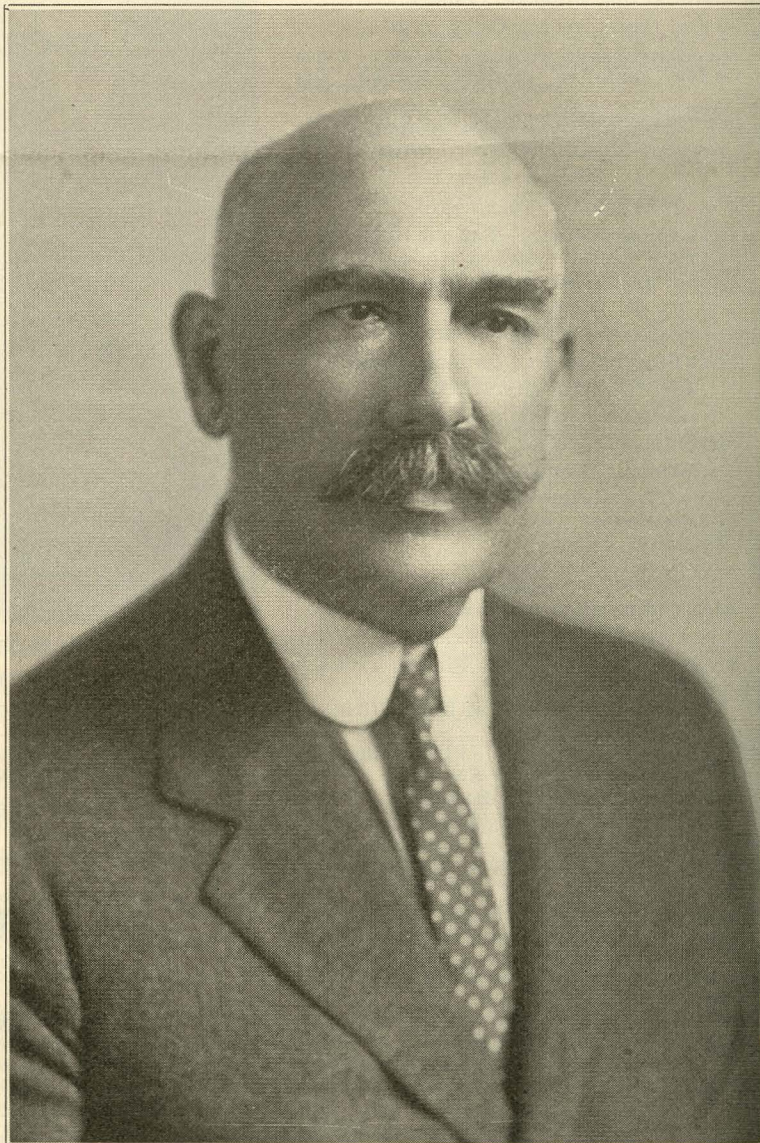
Heaven is a sure reward, but it is not going around presenting itself to people. It isn't that cheap. You must live right to earn and enjoy it, or eternal heart break is likely to be the reward. We like to read about the courageous, indomitable soldier, who by his pluck and daring inspires others and turns the tide of battle. It need not be the soldier alone

who does such a noble and outstanding deed. An osteopath can do it. There is occasion for him in the battles he has to fight to do much the same. The less we read about the cowardly, shirking soldier, the better. He, by his indifference or fear and panic, can take the daring out of those around him and throw the conflict.

The greatest military hero didn't win all the battles of his time. He only fought up to the limit of his own physical capacity, or the limit of his ability as a general—no more than that. You cannot fight and win all the battles of osteopathy, but somewhere you can serve and be engaged in the conflict, you indifferent osteopath, up to the limit of your physical ability.

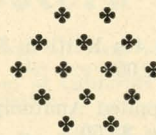
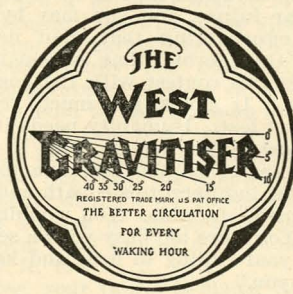
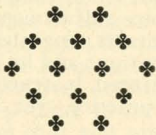
Had you heard that osteopathy has very determined opposition—pitifully narrow and unprincipled opponents? Do you know that the fight is not merely threatened, but is on, and that it is a battle royal? Will you—you can by your indomitable courage and pluck inspire others around you to join with you in fighting osteopathy's battles where you are; or will you—you can, shirking and indifferent by your own inactivity and inertia, discourage many others about you, and thus perhaps throw the battle in your locality.

"Let George do it," doesn't go in osteopathy. There is enough service and to spare for every osteopath who is worthy of the name. Let the unworthy ones step out and take off the name. My mind does not readily except anyone. Why should it? The service needed is so urgent, so vital, so epoch making, so many sided that you



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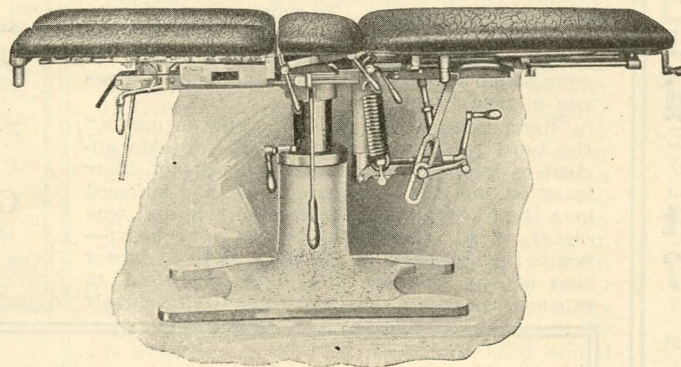
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can do some of it, and thus hearten and help others to fight who may be in tighter places than you.

Osteopathy is not fully over the top yet, but no friend can doubt that it will be, of course, in the near future, and you may by your own personal effort bring that glad day all the quicker. God forbid that osteopathy should lose out in this contest with the hosts arrayed against it. It holds too much truth to be crushed and lost. Humanity needs it too much that it must suffer defeat. But if it does go down I want to be the first one to point my finger at the indifferent osteopath and say, "You are responsible for this. You wouldn't sacrifice a thing. You were too busy with a selfish application of your calling to hear and heed the demand for you."

In Detroit there are osteopaths whom I haven't met yet, or scarcely know at all. Meeting me is not the point, nor necessary. But if these osteopaths, not all of whom perhaps are indifferent, were really interested in what we are trying to do for their profession in our city, we would be sure to meet, and meet often. These very ones may have wonderful practices and their office doors tally a constant procession of patients in and out. But these osteopaths don't interest me an iota until they get into the game and help to lift the load that is big enough for all to be carrying.

In Detroit we want one hundred percent of our osteopaths active and alert. We are going to make it as uncomfortable as possible for the indifferent osteopath. Such an osteopath must join forces with us. We want them all. Is it too much to expect? Well, we will expect it anyway. And why just Detroit? We want every city and locality in America to be a stronghold for osteopathy.

God be praised for such a splendid body of people as I saw and met at your national convention at Cleveland in July. It was an inspiration to me, and deepened greatly my conviction of the worthiness of your profession and my purpose to help it.

Fix your eyes on your profession—your cause, and not on your personal practice, big or little as that may be. To what extent do you, indifferent osteopath, believe that this is your cause? Is it lip service only that you give? Is your belief in it limited to the fact that it gives you a good living?

"Render your heart and not your garments," the Lord said through his prophet to his ancient people. He wanted the depths of their being on the altar of service. He had suffered long their perfunctory, formal service and was weary of it. Osteopathy wants your heart—wants the depths of it. It has a right to expect that of you because you have professed to espouse her cause and have committed yourself

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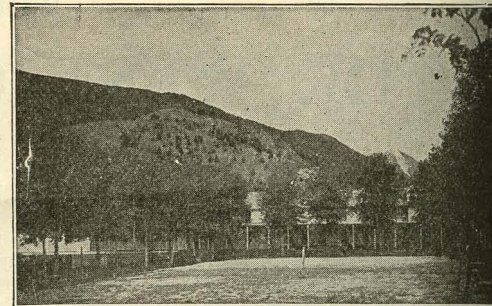
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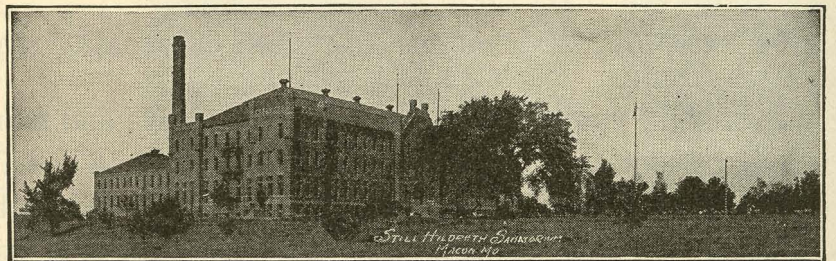
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for life to her. Yet after you have made your living day by day, you have but a perfunctory, formal service to offer her in response to her need. Perhaps she is fortunate to hold even your lip service. Because the hearts of such a multitude of osteopaths are withheld from her altars, osteopathic gatherings are indifferently attended and sincere, deserving osteopathic effort struggles hard because of lack of support.

Are you one who is responsible for this? Does no local, state or national rallying of your fellows interest you? Have you nothing to give to such fellowships, or nothing to receive from them? Perhaps you feel that you are superior to those who will meet at such gatherings. If so, come out of the hallucination. Don't make that mistake. You are decidedly not superior to

those who attend these gatherings. They are the ones who are trying to make osteopathic history which you would profit by, and your rightful place is to work side by side with them.

Perhaps it's a personal dislike or a grudge against someone that will cause you to absent yourself from the gatherings, where you belong. Would you actually put this in the scales against the greatness of your cause—the cause which you should be eager to help in the biggest kind of a way within your ability? And again, perhaps you have become a chronic fault finder and disturber; at least, the others have got your measure that way. Fool them—exercise self control by staying in the meeting, but go back and sit down. You'll enjoy the rest and the rest will enjoy it, too.

The cause, your cause, is bigger than a man, even if that man is you. The cause is bigger than you many times multiplied. You are biggest when, though not fully agreeing with the action your fellows may take, you nevertheless abide by the majority's decision. To sulk, to "take your dolls and go home," is too small a game for you to let yourself play. That hurts you and hurts the cause.

Do you know, you indifferent one, that to stay at home when your fellows are meeting together—to absent yourself from these fellowships while you nurse a grudge or harbor a hate against someone you may or may not meet, is exceedingly hurtful to yourself? You are really the sufferer, and not the one you seem to have so much feeling against. Doesn't your osteopathic student training give you that dope? It ought to. And so you perhaps let a personal quarrel, which ninety-nine times in a hundred is but a misunderstanding, keep you from doing your duty to that most worthy profession which you represent.

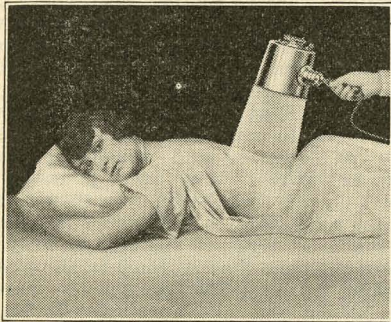
Thus many times, for different inadequate reasons, you have failed to do what you could do. It was not so much that you committed—you omitted. The world might stand the sins of commission, but it groans and staggers under the sins of omission, that which people ought to be doing and do not do. Osteopathy stands in jeopardy today principally because her representatives have been and are guilty of such omissions.

All osteopathic gatherings should be, and can be interesting and profitable. Yet because they so frequently are not, it must be confessed many members absent themselves. Right here, why shouldn't authoritative osteopathic circles, or committees appointed for the purpose, put out a line of suggested interesting and profitable programs for all kinds of meetings? Perhaps that has been done already and I am not aware of it.

When the indifferent or almost always absent osteopath comes to a meeting, and he hasn't been to one for a year or more, he invariably heartens others. They take new courage. He is welcomed to his face; he is welcomed behind his back. "What has happened that he is here?" they ask, and everybody is glad. Thanks, come again.

Is your practice so small that you feel you are not a forceful or significant enough osteopath to attend gatherings of your fellows and be any help to others? Is your indifference really a sort of shyness, timidity or needless modesty? Come out of that error, too. Mix with others and grow with them in osteopathic efficiency and force. There is no other cure for this thing that ails you, whatever it is.

Or, do you consider yourself a big noise in the profession and absent yourself from osteopathic functions because you have too large a practice to share the time and fellowship with others? That is sheer nonsense. I know osteopaths who seem to claim that sort of thing, and their fellow osteopaths size them up as bluffers and four-flushers. Show yourself at all the osteopathic fellowships, you big, overworked, but indifferent osteopath. Give yourself this relaxation and thus give your conceit of self a chance to come down a few sizes. You've got



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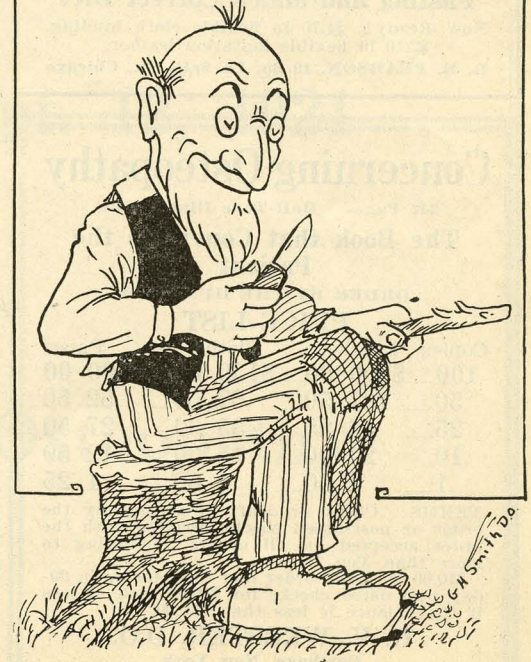
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lots of tools to help the cause with, and when you get your bearings and fellowship with others has given you your own proper measure, as it surely will, you may show such form, disposition and atmosphere that you will be a card at every meeting and a real inspiration to all your fellows. Give it a throw. It's worth while trying out.

Do you really believe, you indifferent ones, that now you have your schooling you can shut yourselves up in your office, make a good living, and can't be reached or shouldn't be disturbed? Have you no other responsibility to the cause you are schooled in? Do you really think you can or should get away with it? When you have espoused the cause of osteopathy and are educated and graduated in it, I tell you, you cannot shut yourselves up in your offices. Of course, offices doubtless mean the necessary living, but you owe much, and always will owe much as long as you are osteopaths, to the profession you have chosen. It needs you. It must have you and your championship. You can and should be a champion in the battles being fought.

God forbid that the time should ever come when osteopathy will have no struggles, no grades to make, or no trouble on the wire. You are in a cause that can't stand still. It must grow and develop and many times, perhaps, be discouraged. It may fight and lose, and it must fight and win until men declare it and acclaim it everywhere.

And when men do declare it and acclaim it everywhere, where will your sitting be, you indifferent osteopath? Will you be holding down a front seat at some of the love feasts? No, indeed, you'll know you have no part or place in that kind of ceremony. You haven't the nerve to mix in joy times like that when you realize that your shoulder was never at the wheel, and there is no stain or soil of past battle and struggle to be found on you anywhere. Your name will be looked for in vain in the honorable roster of those who helped and won. They sacrificed, they tried, they gave, and in doing so they grew and strengthened. They came to positions of influence and authority. They are entitled to the recognition and acclaim coming to them, and they have a rightful and undisputed part and place in the glad day.

But you, you indifferent "what do I care" osteopath, you excused yourself every time you were asked for a service. A wonder at excuses, you. You perhaps promised to perform a service or take a place on a committee, and then

didn't. Or if you did, you performed the service so indifferently that no one would ask you again. You were always finding the reasons why you could not, instead of the reasons why you should. And what of you? You have shrunk—you have weakened. Your faith in osteopathy is uncertain and at low ebb through your own fault. You couldn't inspire anybody with confidence in your profession. You have no authority in osteopathic circles. No one credits you. You are a back number and the glad day is not for you. You have crowded yourself out of it and everybody knows where to place you.

No, osteopathy must have you in full for fellowship with it. No matter what your connection, or engagement, or personal responsibility, you must plan to disengage yourself enough from these things to give of your vitality again and again. Here is another case where giving is better than receiving, yet where the giver is sure to eventually receive most gratifying reward and return for his sacrifice and effort in the cause of his profession.

Are you content with what you know and learned back in student days? It gives you enough to live on and something besides. Enough is enough. Why exert yourself when you have enough knowledge, even though it may be getting a bit stale, to yield you a fair income? Well, that's all right, if you say so, only don't overlook the fact that if you are thus content osteopathy is going by you in its march to greater discoveries and successes—in its findings of newer methods and more effective forms of treatment. Are you indifferent to your need of seasons of post graduate study and training whenever such a thing is possible, even to sacrificing to make possible so vital a thing in your professional life? You must do this thing.

You must throw off indifference in all its shapes and sizes and use and be used of your profession. Take your place in the lap of osteopathy and share with her her trials and her glories. You are not the keeper of a lighthouse who must live isolated, and yet you have a great light to cast about you. Don't hide it under a bushel or shut it behind your office door, and perhaps come to think that you are a great help in the world. Study, read, work—that your your light may be brighter and brighter. Keep it up and out where it can be seen. Hold it high and steady that you may guide men to the great truths you are so privileged to represent.

"Even so let your light shine before men; that they may see your good works, and glorify your Father who is in Heaven."

AOA Picks a Business Manager and Will Move to Chicago, June, 1922

Mr. Roy H. McClure has been selected and placed under contract as Business Manager of the AOA to report to Dr. H. L. Chiles at Orange, N. J., Nov. 15th as business affairs understudy until he is able to carry alone the whole business routine of the organization.

That is the outcome of the councils of state which have pondered the problem whether to employ a lay business executive or train up some member of the profession for that work. The selection was made, we understand, by President Scothorn, Ex-President Waldo and Trustee H. F. Morse, acting as a committee under instructions from the trustees, who visited Chicago and looked over a bunch of candidates immediately after the Cleveland convention.

Mr. McClure is a brother of Dick McClure, organization chairman of International Rotary. He is said to be well trained in every line needed to handle the business end of our association. He served as membership secretary and field man of the Laundry-owner's National Association. He was raised in the printing business. He was reporter and sporting editor of papers

in Nebraska, Keokuk, Milwaukee and Chicago. He was telegraph editor of the Dayton Journal over a year and city editor of the leading paper of Butler, Penn. Also secretary of the Chamber of Commerce at La Salle, Ill., and Past Secretary of La Salle Rotary Club. Later he was financial secretary and general assistant to Wm. E. Fitch, La Salle, Ill. His age is 28. Status, married. His new AOA duties, generally speaking, will be the work of a Financial Secretary and Managing Editor of the *Journal*, to secure exhibits, advertising, etc., and do all the detail work of the Secretary.

This is the full program: To bring about centralization of offices and work with headquarters in Chicago before the end of the next year, exactly as this plan was presented to the Executive Committee. Dr. Gravett voted for this policy. It means putting AOA business management permanently on an efficiency basis.

Dr. Chiles was elected secretary-treasurer to serve until Los Angeles convention, June 1, 1922, the office, as stated, will be moved to Chicago. At Los Angeles a new Professional Secretary will be elected, it is expected, who will

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their entire time to the school work.

New Class Opened Monday, Sept. 12, 1921

For Catalog and Literature, address

The American School of Osteopathy
Kirksville, Missouri

direct the policy of the AOA and visit all Divisional Societies.

Dr. W. A. Gravett has been authorized by the Executive Committee to ship all the belongings of the secretary's office to Dr. Chiles by Nov. 15th. This is not a "dismissal" of Dr. Gravett but a resignation. When he saw that the sentiment was not favorable to moving the society's offices to Dayton, he requested to be released not later than January 1, 1922, and sooner, if possible. Dr. Chiles will be released at the next convention, which is not a dismissal but is done at his own insistent request also. It is said that the trustees could hardly get Dr. Chiles to agree to serve until the next convention, June 1st. Dr. Chiles was made Secretary-Treasurer because the AOA cannot afford to keep both officers, employ a layman and bring about centralization, all at once. The business office remains at Orange for the time being and Dr. Chiles has served as Secretary for a very long time in the past and knows all the ropes. Besides he knows all the advertisers and exhibitors, and can put the work over, if he will, until next convention. He and not the Layman Manager will serve on the Executive Committee.

November 15th was named in preference to November 1st because it will not be best to load so much on the new man all at once. Besides, Dr. Gravett is doing some very valuable work at present on membership, directory and student auxiliary work and it will give him more time to have everything ready.



The OP approves of all these developments very fully and believes the differentiation between purely business and executive work on the one hand, and professional problems, on the other, is a wise move and should have been made long ago. The thing to prove is whether Mr. McClure is the right man to put it over.

No one can prove that but McClure. We have great faith in the judgment of the committee who selected him, and take for granted that he is not a has-been or a will-be but an "izzer" and will give good account of his trust. We give him our best wishes for a smooth and successful voyage and pledge him any help or advice we can give him at any time to help put it over.

The selection of a professional secretary at Los Angeles to succeed Dr. Chiles is the next really big problem. Everything for the future of osteopathy depends on making a wise selection. Everybody should be thinking about it. Whoever is selected OP will support heart and soul. Get out your long range binoculars, leaders, and be looking the field over. Have we a real man of destiny among us who has been preparing himself silently for this Big Man's Work?

Make Sure as to Diagnosis

Make sure of your diagnosis, not only from a purely osteopathic standpoint, but also from the medical. If you don't know what it is, how can you treat it—unless you use the old shotgun system? The osteopath can come nearer to getting away with such treatment than the other fellow, but even he can not do it for long.—F. C. Wirt, San Antonio, Fla.

Results Before Pay

I attended our convention at Cleveland and in almost every session of specialists I attended each lecturer seemed more interested in getting the money than most anything else. I have referred patients to some of them and it seems they were more interested in getting the money than getting good results for the patient. If we use the graft of the other fellow we are no better than he. I would suggest get results first.—J. E. Baker, D.O., Brazil, Ind.

A Paying Publicity Scheme

I just recently heard of a novel scheme to help the small town osteopaths get before the public to wit: Take eight inches from the current issue of "Osteopathic Health"—or any issue, for that matter—without regard to whether it begins a sentence or ends a sentence, and have it published in your local newspaper. The party who told me of this said it was surprising how many people came into his office, or wrote him, for the rest of the article. Each week he would do the same thing, running eight inches at random each week from any issue of "OH." It struck me as being a splendid idea for the small town folks. Even some sizable cities would take it most kindly. Think it over. You might call attention to it and help Feathers or somebody.—Orion S. Miller, D.O., St. Louis, Mo.

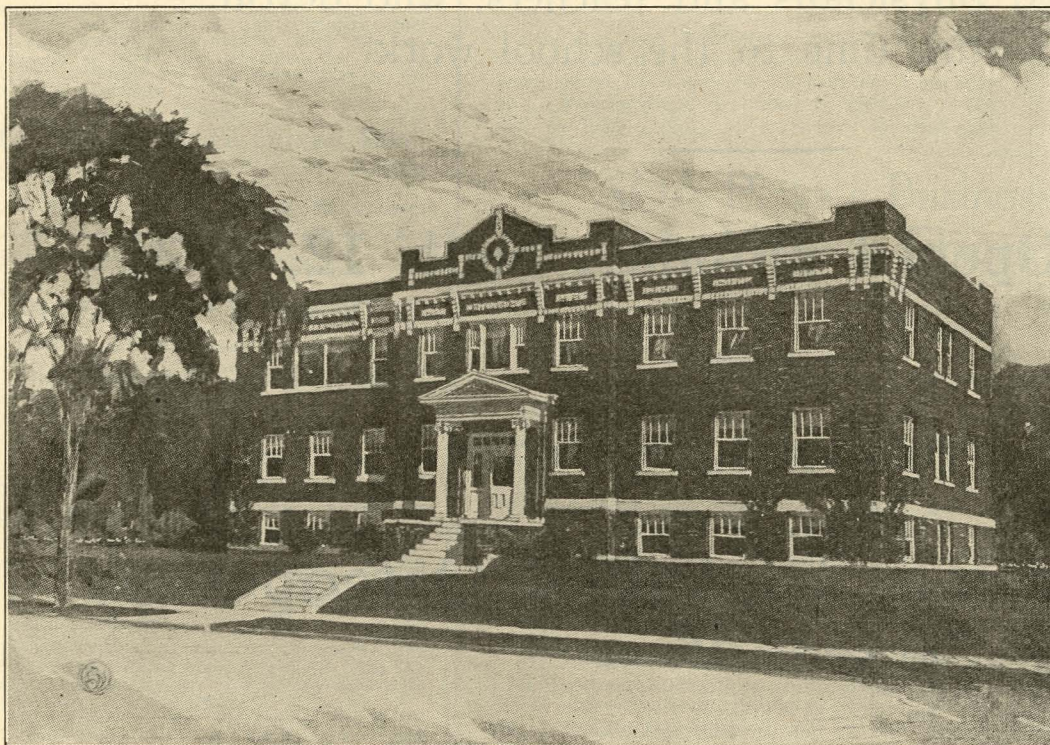
Forbes' Last Act

I was interested in Dr. Taliaferro's story of Dr. Forbes' duck hunting, but I think he left out a very important item as you may gather from the following incident which happened during the fall term of 1914. Dr. Emery had vacated the lecture room and Dr. Forbes was warming up to his subject when Dr. Emery came back, apparently looking for something he had lost. It proved to be his glasses. When he had left the room Dr. Forbes remarked that such a thing could never happen to him for next to the last thing he did at night, before retiring, was to remove his glasses. The last thing was to remove his pipe.—E. J. Hanes, D.O., Cumberland Mills, Maine.

Our Three Objectives

We are going ahead with legislation, professional education and public education—the big 3—and are not going to be misled or gotten off on false issues again.—Wm. E. Waldo, D.O., Seattle, Wash.

Laughlin Hospital and Training School for Nurses



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

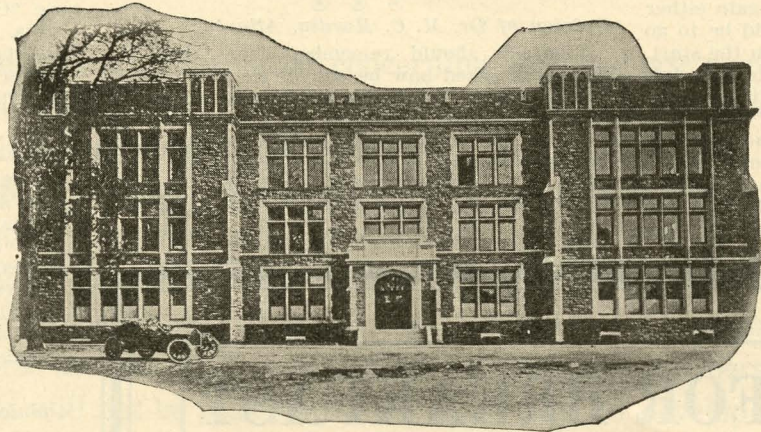
Kirksville, Missouri

HOSPITAL STAFF

- DR. GEO. M. LAUGHLIN
General Surgery and Orthopedics
- DR. C. E. STILL
Osteopathy
- DR. F. L. BIGSBY, Obstetrics
Genito-Urinary and Rectal Surgery
- DR. E. H. LAUGHLIN
Supt. of Laboratories and Specialist in Heart and Lung Diseases
- DR. A. C. HARDY
Eye, Ear, Nose and Throat
- MISS RUTH STOREY, R.N.
Directress of Nurses Training School
- DR. JOHN HALLADAY
House Physician and X-Ray Laboratory
- DR. J. H. POPPLEWELL, Interne
- DR. L. W. MILLS, Interne
- DR. J. G. BOUSUM, Interne
- DR. J. F. KEATING, Interne

Our hospital has enjoyed a very prosperous, satisfactory second year, with about 40 percent increase of patronage over the previous year. Dr. Hardy has proven to be very capable in the Ear, Nose, Throat and Eye Department. This institution does not claim to cure or relieve 75% of hay fever or catarrhal deafness cases; we know better; it can't be done. Dr. Earl Laughlin and Dr. Bigsby have both proved very valuable in their departments also.

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



"I have examined liquid petrolatum that has come away and find that the oil does possess some affinity for certain toxic bodies of an alkaloidal and colloidal nature."

*Anthony Bassler, M. D., Prof. Gastroenterology,
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NUJOL is peculiarly adapted to the task of freeing the body of these toxins. Its viscosity, physiologically correct, enables it to hold many such poisons in suspension, preventing absorption by tissues, and assisting their speedy removal.

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Please send booklets marked:

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|---|--|
| <input type="checkbox"/> "An Osteopathic Aid" | <input type="checkbox"/> "In Women and Children" |
| <input type="checkbox"/> "A Surgical Assistant" | <input type="checkbox"/> Also Sample |

Name.....

Address.....

The Carberry-Feathers Controversy

Opinion of Dr. S. B. Miller, Cedar Rapids, Ia.:

"The Carberry-Feathers Controversy" is fine. I think since Feathers does not own a home which he might have to sacrifice, and is so situated that he can practically begin again either there or elsewhere, my decision would be to go to a new place and build "right" from the start. It will be very difficult for him to get full benefit of the results of his educational campaign where he is now, as much of it will go to the chiros through personal influence of present chiro patients. The same amount of advertising will be far more effective in a new field and, incidentally, Feathers will start off on a new pace in social and other lines not

easily opened to him now at his home, since his more or less seclusion from certain popular associations due to the absence of the "price." *OP* is fine—keep it up.

◎ ◎ ◎

Opinion of Dr. M. C. Hardin, Atlanta:

Feathers should remember that when the dude was asked how he got his tie tied so well, he answered, "I put my whole mind upon it." The fact that four chiros are in his town speaks well for the territory. He that works a good soil gets the harvest. Sow the soil with the seeds of knowledge of osteopathy, put his mind on his own affairs and let others alone and push his own cause.

Opinion of Dr. Geo. A. Aupperle, Idaho Falls, Idaho:

Go into a new field and start over again taking his friend's advice about advertising, etc., would be the easy way. What he should do is the "fourth" thing, namely, stay right there, make the raise somehow of \$2,000, fix up his office modern from waiting room to the farthest corner of his treatment room. Keep himself just as modern and advertise osteopathy in the local papers, have an up to date mailing list, use "OH" booklets, "Harvest Leaflets," health hints, etc., and keep at it morning, noon and evening. Follow up the advertising. With good honest work in one year he will have some of the chiros on the run.

◎ ◎ ◎

Opinion of Dr. H. M. Walker, Ft. Worth, Texas:

I herewith submit a program for Feathers. I hope he has the necessary "innards" to put it across. He should select a darn good mailing list. He should then plan a mail advertising campaign for one year. He should order an assortment of Harvest Leaflets or "OH." He should enclose "H.L." with a personal letter and shoot this list each month under 2 cent postage. *Keep 'er up!*

◎ ◎ ◎

Opinion of Dr. Henry Tate, New Orleans:

"Feathers" should go over his list of old patients—pick out 1,000 names of representative people and send them "OH" for one year. He should also use 12,000 "Harvest Leaflets"—sending a leaflet monthly for 12 months midway between "OH" mailings, at the end of that time he would be too busy to do anything else but repeat the dose.

◎ ◎ ◎

Opinion of Dr. Percy H. Woodall, Birmingham:

First subscribe to the Saturday Evening Post fund. Second, secure names of 1,000 best people in his city. Third, get samples of best magazines and literature and mail it regularly to these names. After six months secure a new list and keep this up until all of the best people know, first, of osteopathy, and then of Feathers.

◎ ◎ ◎

Opinion of Dr. W. B. Farris, Ft. Smith, Ark.:

Feathers should brighten up his office and add one or two new diagnostic instruments. Then write a nicely gotten up circular letter to each of his former patients apprising them of his acquisitions and of his ability to be of greater service than he had even been before. And add:

"To make you better acquainted with the merits of osteopathy, the child of Dr. A. T. Still's brain, I am sending you a copy of the "Science of Healing by Adjustment" by Woodall, a 32-page booklet giving an authentic and correct brief of our science.

Enclosed also find a card which, if you will kindly fill out and return, I will cause to be sent to your address for the next twelve months "Osteopathic Health" to further inform you of the progress of osteopathy and the endless variety of troubles for which osteopathy is the best and surest method of relief. No charges and no obligations.

Sincerely yours, for what is best for health.
Feathers.

◎ ◎ ◎

Opinion of Dr. F. P. Millard, Toronto:

Dr. Carberry will say to Feathers in the morning: "Old Top, go back to your home town and send in an order for 500 "OH" magazines and keep that up for a year and next convention time you will say to me, "What a d—d fool I was not to have done that long ago!"

"Vigorous, comprehensive, intelligent, ethical advertising backed up with characteristic good professional service" is the keynote in any locality.

[Continued to Page 19]

POISON FOR BREAKFAST or FORTY-EIGHT HOURS LATE

A Brief Account of the Cause and Cure of Constipation and of Autotoxemia or Self-Poisoning

Written by Dr. C. J. Muttart, Philadelphia

Making De Luxe Booklet No. 14 of the Williams' Series

FIRST EDITION Practically Sold Before Publication **50,000 Copies**

For \$1.25—Postage Paid—For \$1.25

10 Less Expensive Booklets (a full set).

14 De Luxe Booklets (a full set).

Founding a Five-Figure Practice.

Eight articles on osteopathic publicity

by R. H. Williams.

The Osteopath for eighteen months, including Edwards' series on Finger Surgery (one reprint, three back numbers) for \$4.50.

THE OSTEOPATH

**Williams Pub. Co.,
Publishers**

Kansas City, Mo.

**R. H. Williams
Editor**

An Announcement

Every mail brings requests for information concerning our graduate work. These requests indicate that the members of the Osteopathic Profession are looking to the *colleges* for graduate work with which to refresh and strengthen their professional work. It is the definite purpose of the College of Osteopathic Physicians and Surgeons to meet this need by offering at an early date, strong, attractive graduate courses. At the present time, however, this institution is devoting itself to the task of re-organizing its *undergraduate work* and of moving the College to a new location where new college and clinic buildings are to be erected. This work requires the time and energy of the officers and members of the faculty to such an extent that it will not be possible for us, this year, to develop the new graduate courses which it is our purpose to offer as soon as possible. During the present year we are prepared to offer the following courses which have been established for some time and which we believe will be of interest to those members of the profession who plan to spend all or part of the next year in California.

Graduate Courses

1. Eye, Ear, Nose and Throat. A year course open to D. O's who have had two or more years of general practice. September 12th to June 10th. Tuition \$300.00.
2. General Osteopathy. Short graduate courses. January 16th to February 11th. Tuition \$50.00.
3. Obstetrics. January 16th to February 11th. Tuition \$50.00.
4. Surgical Technique. January 16th to February 11th. Tuition \$50.00. Cost of materials to be divided among members of the class.
5. Graduate summer courses. Announcements will be made later.

Undergraduate Courses

In addition to the foregoing, members of the profession are cordially invited to take advantage at any time of the undergraduate courses of the institution. Those who wish to enroll in these courses and to receive credit for the work will be charged a registration fee. There will be no charge to members of the profession who attend as "auditors."

College of Osteopathic Physicians and Surgeons

4th and Main Streets, Los Angeles, California

The Osteopathic Physician

The Organ of News and Opinion for the Profession

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EDITORIAL

Fairness, Freedom, Fearlessness

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

Vol. XL November, 1921 No. 5

THE WILL TO WIN HAS COME INTO OSTEOPATHIC CONSCIOUSNESS

That's a wonderful change in the *Journal* of the AOA. It is an almost unbelievable improvement. This journal now is dignified, professional, satisfactory, adequate. Fact is, *OP* is willing to say, this is really the first time when the *AOA Journal* exactly suited us. It is such a journal now as we always said it should be. It is meeting the profession's needs, and does the science and profession proud as an official journal.

It's fine to be able to say this candidly, instead of registering or stifling a complaint because one might believe the official organ wasn't making good on its opportunity. It's fine for the association and journal, its editor, Dr. Carl P. McConnell and his assistants but it's really finer for the whole round of osteopathic activities for it is only an index of the efficiency, achievement, permanency and success that is creeping into and penetrating everything osteopathic. We are on the way, fellow workers! Actually we never were before.

OP has been a hard critic in the past. Perhaps, too hard. Possibly—if the full truth were known—not consistently, persistently hard enough! At any rate, we knew full well when we had ocular demonstration that the whole profession was "milling," as used to be said on the plains of the stampeded herd that finally got blocked by a turning movement of the cowboys which resulted in the whole mass spinning on its axis without moving anywhere.

There was a day in our professional affairs—not so anciently either friends—when everybody and everything spun in circles like wobbly tops rotating on the spent force of passing-the-buck. Everybody was doing his best in his own independent, incoordinated and more or less antagonistic way; but the collective result was rotten. The profession had not as yet evolved any collective consciousness. It had not acquired inherited discipline or manifested any type of genius but the will to scrap. The profession for a long time betrayed all the weaknesses of an unorganized, undisciplined, unmanaged and unmanageable "democracy" which for all good and successful works always spells utter waste of time and opportunity. It was pathetic—wasn't it, really?

Then the turning point came. God knows exactly when it was—we don't. Perhaps the marvel took place invisibly in a few score of human hearts. We don't know who inaugurated it. Of course Big Bill Waldo was on the job and had the association in leash when we began to notice the sudden and strong change of sentiment and method. May be "Bill" did it. May be it was on the way and Waldo only helped it on and hastened it. Fryette and Conklin had been building wisely before him. May be

Gravett had much to do with it, too. We rather think he did. So, we believe, did Carl McConnell at the head of the *AOA Journal*. The centralization of AOA offices in Chicago in the near future with the putting of all association work on a basis of business efficiency is another aspect of this new reality.

There were other valiants all working toward the same goal—notably that Texas bunch, Scothorn, Walker & Co. Down in Alabama Percy Woodall came through with a real vision that he made stick. Whitehouse engineered a big work in the West. Spencer, Ruddy, Gaddis & Co. put it over. Atzen has clarified legal issues and is going to unify our standards and laws. R. K. Smith has been running a publicity dynamo that never slept except with both eyes open. Titans are even falling out of the sky, as it were with help for us in more ways than one—witness Philip S. Gray, and others, some as yet under cover. Volunteer workers, not attached to the big machine, but full of the seer-spirit and strong in individual initiative to do-it-now-while-there's-a-chance got into harness and attempted big things "on their own recognizance," like Philip S. Spence. We cannot particularize all. But we recognize how much the work, concessions and spirit of amalgamation of all have contributed to the general result.

Whether right or wrong in policy, the spirit of all this work, both official and personal, has been right; it has made for harmony and solidarity; its resultant has been growing unity of purpose and co-operation; it has been done unselfishly, at great personal sacrifice, not for self-seeking but for the advancement of the cause. Good initiative has developed all up and down the line, everywhere. The sum of this all has spelled a rapidly dawning professional consciousness, a discipline that means everything for unifying and simplifying our policies, and that fact is now really making future big achievement possible.

The many have seen the vision. We are beginning to realize the fruits of it.

The net of it is that we all now seem to be standing behind and supporting our association's officers, policies and programs. We are rapidly getting in the same position that the Allies took when they adopted a uniform policy for conducting the war, put the supreme command in the hands of one man, and told him to go ahead and win. The big offensive followed.

President Scothorn is our Generalissimo of the hour, and with this will to win now so evident the profession, we believe, will follow his policies and support him in whatever his administration undertakes. That is the only way for osteopathy to prevail.

As long as we have leaders like Waldo and Scothorn who are willing to assume full responsibility for their organizational policies being right and who show such good ability of leadership, we will follow wherever they lead. It's easy to follow real leadership. It's a pleasure too. For we know what it will produce.

OP will follow and support such AOA administrations to the last ditch, even if we should think sometimes they were wrong in particulars—which we don't in any particular at present—because we have come to realize that to get anywhere it is necessary to have a policy and follow it; and it is necessary to have unity and focus in all our efforts. It is far better, for results, to follow a wrong or a mistaken policy, even, than to have no policy at all, or to adopt a different policy every morning after breakfast.

Business men all know that big success can usually be built on a weak or inferior policy if it is only applied persistently. It's system that wins. Really it doesn't matter so much whose ideas are adopted and applied, providing we as a profession adopt somebody's ideas and go through with them. We repeat, the particular policy selected is often a matter of supreme indifference. It's team work going straight for

a goal that wins. Most any policy will do if the bunch can only be lined up behind it. The wisest battle plans on earth cannot win if not supported.

Thank God The *OP* for its own part has passed out of that phase of individual development where it seemed to us absolutely necessary to the success of the general cause to lead the crowds in just the one and only right direction—which, of course, was the way we happened to see it! We may even have been right in our vision. We don't think less of our own visions than we ever did. Possibly ours may have been the one shortest, surest, most economical way to the goal. No matter. There are literally a thousand ways to do anything, or go anywhere.

It is not really important to follow any given policy, or go by any one route, in the sense that any one man's plans are more inspired than another; but it is absolutely imperative that all osteopathy's fighting force should march together, under one program and one discipline. It is the automaticity of thousands acting as one that wins. And as it was not reasonable to suppose that the chief executive of the AOA and his official cabinet could always see our policies and plans as we saw them, or follow our initiative to the exclusion of their own policies, so it was only reasonable then that they, being the duly appointed leaders, should lead, and that their policies should be espoused by all the rest of us.

As soon as *OP* observed that there actually were clear-cut, concise, constructive policies outlined and being pushed by AOA it was a pleasure to "kick in" and contribute our support to the main objectives. We feel good all over that things official nowadays are so we can support them in this whole-hearted manner.

We infer that almost all the old-time "individualists" and "recalcitrants" must have come to somewhat similar views of things, for everybody almost seems to be pulling in the same direction now. That is lucky, too. If an osteopath can't pull with the bunch at this juncture he would far better not be active at all. Osteopathy is on its way now and if let alone and, if supported, it will win. It will pick up speed and momentum as it goes along. But urging radically different personal policies upon the national association will not now accomplish anything beyond stopping the procession—and we have had far too many halts already.

Lead on, then, Scothorn, as President of the AOA, McConnell as editor-in-chief, and all the rest of you hard workers in official capacity, and we, the Bunch, will follow you.

We are going to put osteopathy over in a big way in these next ten years or know the reason why.

Tell us what it is necessary to do to be saved and we'll do it if we have to double our national association dues and work ten times as hard as ever to vindicate osteopathy before the world.—HSB.

THAT PROJECT TO REACH A MILLION HOMES AT ONE MAILING

A fine quality of individual approval and enthusiasm has been shown for our proposed 20th Year Jubilee Campaign of direct-by-mail advertising to reach 1,000,000 homes of this land at one mailing with a brochure entitled "The Method and Cures of Osteopathy." From several score osteopaths we have received letters endorsing the enterprise in the highest terms.

Many prominent men and women of osteopathy express the hope that the scheme will carry so big it can be made a regular monthly feature of osteopathy's educative campaigning.

Of course, friends, nothing could happen that would suit us any better than to see osteopathy's propaganda going ahead in just such a vast and effective fashion. We are ready to serve the profession in that sort of grand manner. We would rather be doing something astonishingly big for the science and profession than some-

The First Osteopathic Sanitarium to Be Founded in Virginia

Twenty-one years ago two pioneer osteopathic physicians received their parchments as "Diplomates of Osteopathy" from the hands of Dr. Andrew Taylor Still, founder of osteopathy, and, quitting the parent college at Kirksville, Mo., to carry the new gospel of healing into the big world beyond, journeyed to Richmond, Virginia, the first Capital of the Confederacy. There courageously they put up their sign as exponents of the then new and unheard of practice

of treating disease without drugs. That was in the day when jail sentence and fines were as likely to be the osteopath's portion for healing the sick as gratitude, plaudits and financial reward.

What would the future bring for osteopathy in the heart of the Old Dominion?

That was the question that these stout-hearted pioneers kept pondering.

In a sense these pioneers were not going to a

new country with their capacities for human service but were only "going home," for was not Dr. A. T. Still a son of the Old Dominion? Yea, verily. But nobody else in Virginia knew that fact, for Dr. Still and his system of therapeutics both were equally unknown in that day in the state of his birth.

Yet realization of the fact pleased and sustained these primitive missionary osteopaths—they had the comfortable inspiring feeling that it was to be their good fortune to acquaint the "Mother State of Presidents" with the fact that she had also borne genius of another sort, giving as great cause for pride as her long line of statesmen, warriors and patriots. So, no doubt, the realization that in a peculiar way their personal lives and professional bearing were going to set the measure of value placed upon Dr. A. T. Still by his home state, inspired these veteran osteopaths; and from the day of their arrival in Richmond they wrought to build a foundation under osteopathy that would carry all its future development and reflect only honor upon the new science and profession.

How well these pioneers wrought and how proudly they have carried the banner of osteopathy in the "Old Dominion" are indissolubly bound up with the history of osteopathic achievement in Virginia in the past two decades, and it is evidenced more particularly by the confidence and respect entertained for osteopathy's practitioners in the cultured city of Richmond.

Who, then, were these two pioneer osteopathic physicians who brought the new practice to Virginia? And, concretely, what have they accomplished by more than twenty years of practice?

Let the proud story of Spring Terrace Sanitarium, the splendid new osteopathic health home of Richmond, tell the story. The two following announcements by the press of Richmond last April recite the first launching of the idea of this new institution, which is the first to be started by the osteopathic profession in Virginia.

Buy "Restabit" to Convert It Into Hospital

Palmatary Home in Barton Heights to Become Osteopathic Sanitarium
Purchase Price \$90,000

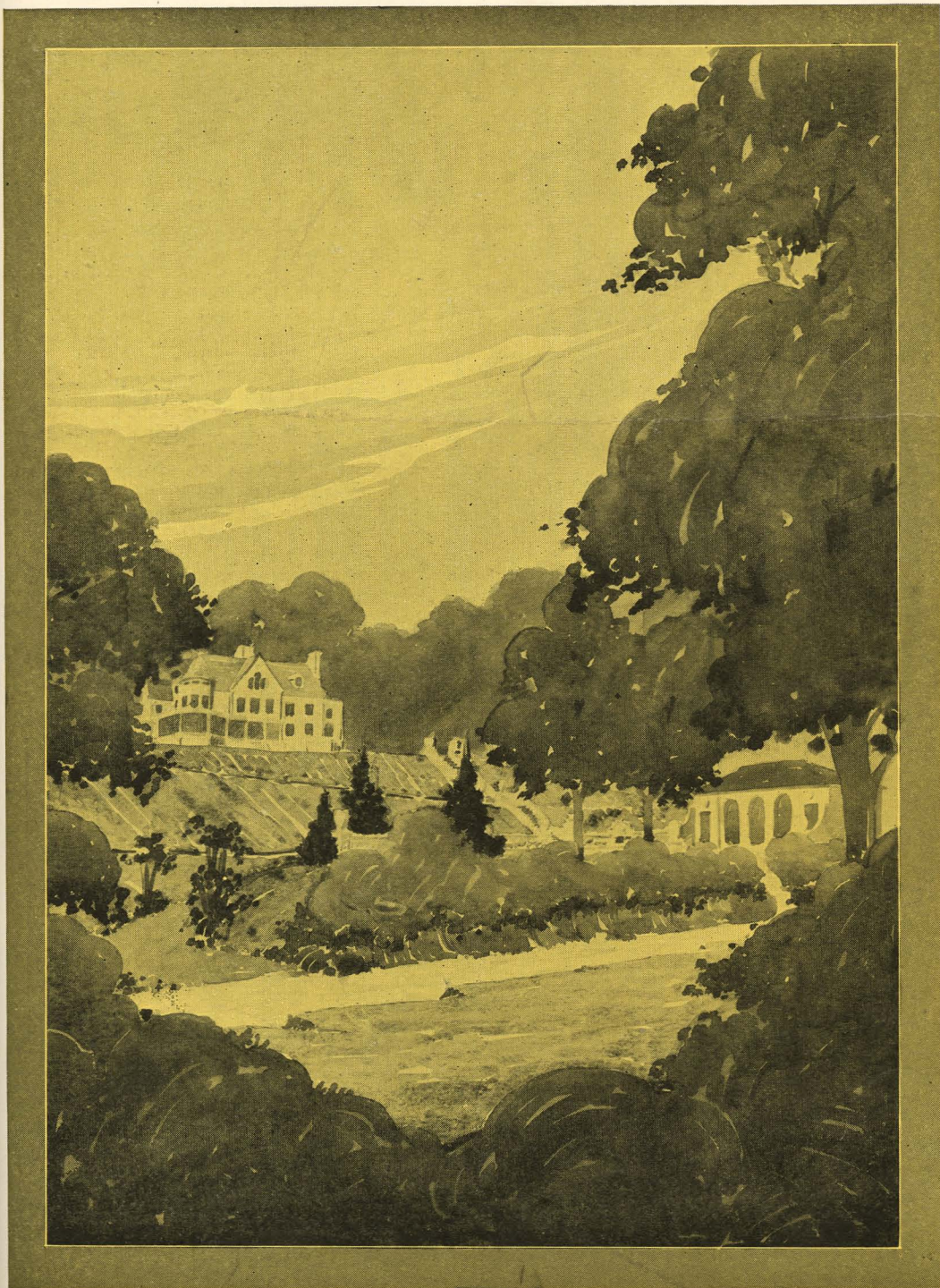
[From the Richmond Times-Dispatch]

Plans for an osteopathic sanitarium in Richmond were announced this morning, "Restabit," the country home of John T. Palmatary, in Barton Heights, having been purchased at a cost of \$90,000. It is expected that the institution, which will have space for about twenty-five patients, will open about June 1.

The new hospital is to be operated by Dr. Edwin H. Shackelford and Dr. George E. Fout, of this city, and Dr. A. R. Tucker, who has been connected with the staff of Mary Elizabeth hospital in Raleigh, will remove to Richmond and engage in practice here as a nose and throat specialist. Drs. Shackelford and Fout are the oldest osteopathic physicians in Richmond, having established their offices here in 1900, and have been in practice in Richmond for twenty-one years. Dr. Shackelford is a member of the state board of examiners, and both men are widely known in their profession.

"Our plans are a little premature as yet," said Dr. Shackelford this morning, "as the deeds have not been signed. We have agreed, however, to purchase "Restabit" from Mr. Palmatary for \$90,000, and will convert it at once into an up-to-date sanitarium."

"Restabit" was formerly the home of James H. Barton, founder of Barton Heights. It was



TERRACE SPRING SANITARIUM, RICHMOND, VA.
Reproduction from Architect's Original Water Color Sketch

THE OSTEOPATHIC PHYSICIAN

purchased two years ago by Mr. Palmatary, and has been completely rebuilt on modern lines, only the foundations of the former house remaining. The tract consists of six acres of land in the heart of Barton Heights, fronting on Monteiro avenue, and the house is known as 712 Monteiro avenue. It is two blocks from the car line and while accessible, is quiet and retired, with fine shade trees and ample grounds. Dr. Shackelford explained this morning that

it was planned to operate an institution on somewhat similar lines to those at Clifton Springs and Battle Creek, though, of course, much smaller in size. No major surgery will

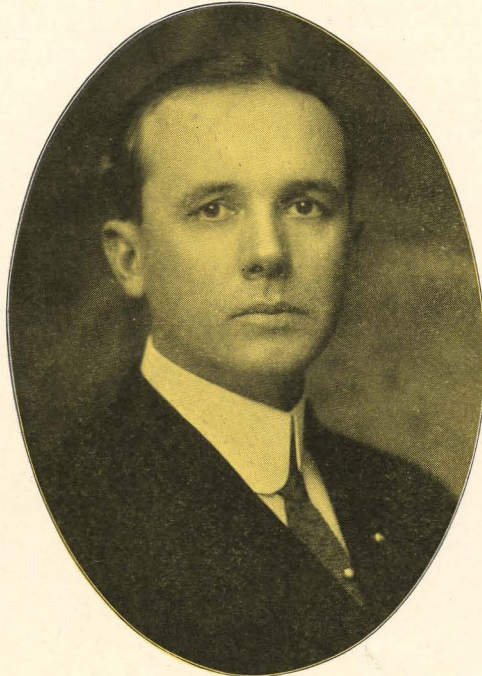
pecially designed for the treatment of convalescents.

A COMMUNITY ASSET

"No undesirable nervous or tubercular patients will be received," said Dr. Shackelford, "and there will be no objectionable feature connected with the institution, which will be an asset rather than a detriment to the community. We will start with a capacity of twenty-five patients and there is ample room for enlargement



Dr. G. E. Fout



Dr. E. H. Shackelford

be attempted and only minor operations will be performed. A complete hydropathic outfit will be installed and the institution will be of a character that it can be patronized by people of all schools of medicine and will be es-



Dr. A. R. Tucker



THE SPRING HOUSE OF TERRACE SPRING
Reproduction from Architect's Original Water Color Sketch

THE OSTEOPATHIC PHYSICIAN

from time to time. We have not yet selected the resident staff or completed other of the necessary arrangements, all of which will be announced before the institution is opened."

It was explained that there are now more than forty osteopathic institutions in this country. Although there are two at Asheville, N. C., there is none in Virginia. Nor is there any sanitarium in Richmond especially designed for convalescent cases.

Buys \$90,000 Home for New Hospital Here

Residence of Tom Palmatary in Barton Heights Purchased for Sanitarium

[From the Richmond News-Leader]

Negotiations leading to the establishment of a high class osteopathic sanitarium in Barton Heights were nearing completion this morning and will be concluded within the next few days. Agreement has been reached for the sale of the handsome residence built by J. T. Palmatary at 712 Monteiro Avenue, the price for the home and six acres of land being \$90,000.

Dr. E. H. Shackelford, head of the group of practitioners who will convert this residence into a model sanitarium, announced this morning that the plans were for an institution smaller, but on the same plan as Battle Creek and Clifton Springs. Patients will be accepted for the general treatment of all diseases with the exception of tuberculosis and certain types of nervous disorders.

Associated with Dr. Shackelford will be Dr. George E. Fout and Dr. A. R. Tucker, who for seven years has been connected with the Mary Elizabeth Hospital in Raleigh, N. C. Dr. Fout came to this city with Dr. Shackelford in 1900, they being the first osteopaths to locate in Richmond.

The price which will be paid for the property is close to the highest ever recorded here for the transfer of a residence. The site is a beautiful one and no expense has been spared by Mr. Palmatary in making the house as complete and attractive as possible. On the property is a spring which formerly supplied citizens with water.

The sanitarium will be opened about June 1 with complete hydropathic equipment in connection with the osteopathic treatment. It is the first sanitarium of its kind to be opened in Virginia and is one of three in the South, the other two being located at Asheville, N. C.



So much for the prospectus of what was going to be when the newspapers made this important announcement to Richmond's people last spring. The lapse of half a year has brought these golden dreams all true. The new osteopathic institution is now a fortunate reality for Richmond and the osteopathic profession. The story of what exists today is told in the following interesting manner in the booklet issued by the management.

Terrace Spring Sanitarium An Osteopathic Institution

INTRODUCING TERRACE SPRING

Within sight of the spires of Richmond there is an institution dedicated to the cause of better health.

It is Terrace Spring Sanitarium, situated in a beautiful suburb of the historic capital of the

Old Dominion. The chimes of the city are wafted out to the quiet country-side but the noise and tumult are absent, although the sanitarium is only six minutes from the State Capitol.

Here there are majestic trees, with terraced lawns, wide verandas, quiet resting places and a wonderful, full-flowing mineral spring from which the institution takes its name. The estate is six acres in extent.

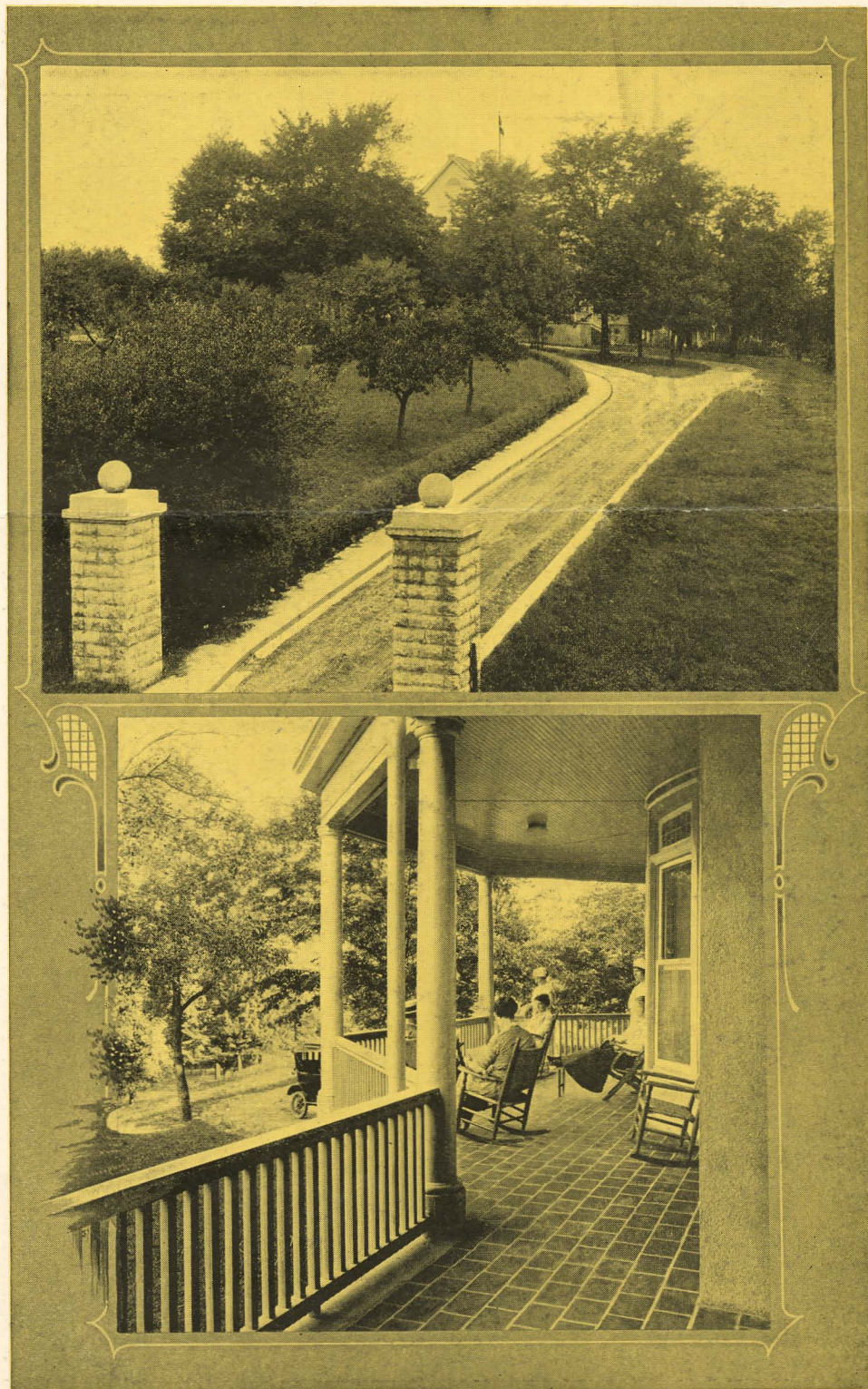
Terrace Spring Sanitarium, with its natural endowments, seems a place set apart by the Great Architect of the Universe for the restoration of impaired health and the creation of happiness.

THE INSTITUTION'S HISTORY

Terrace Spring Sanitarium came into being through the vision of Drs. E. H. Shackelford and George E. Fout, of Richmond, and Dr. A. R. Tucker, of Raleigh, North Carolina.

These three men had realized for years that there was no institution in the Southeast with complete departments of osteopathy, surgery, obstetrics, hydro-therapy, electro-therapy and physical training. This lack of facilities in the face of the extensive and rapid growth of osteopathy imposed a hardship on osteopathic practitioners and patients alike.

The want has been filled in the establishment of Terrace Spring Sanitarium. The house and



Upper Picture: Entrance to the Sanitarium
Lower Picture: One of the Verandas

THE OSTEOPATHIC PHYSICIAN

large estate were purchased and equipped for institutional purposes. Nothing has been spared to make the sanitarium one of the most complete and modern in the country.

PROFESSIONAL DIRECTION

Dr. Shackelford and Dr. Fout have been practicing osteopathy in Richmond for more than twenty years. They were among the first osteopathic physicians to establish their offices in Virginia. They now number among their patients many of the most prominent and influential people of the city and state. Dr. Shackelford has been a member of the State Board of Medical Examiners for a number of years.

Dr. Tucker, who comes to Richmond from Raleigh, North Carolina, to be associated with Drs. Shackelford and Fout at the sanitarium, is a graduate in both osteopathy and regular medicine. He is licensed to practice osteopathy, medicine and surgery in Virginia and North Carolina. He practiced in North Carolina for sixteen years, having been at one time connected with the Mary Elizabeth Hospital at Raleigh, and has taken post-graduate work in the great medical centers of the country.

WHAT PATIENTS WILL FIND

Patients at Terrace Spring will find the most modern equipment known to medical science

for the treatment of their cases. Every appliance that will aid in securing structural perfection through adjustment has been included. Only those which have proved of value are used. Nowhere will one find better mechanical aids for the restoration of health.

Drs. R. A. Bagley, C. W. Irvin and Margaret Bowen of Richmond, will be associated with Drs. Shackelford, Fout and Tucker as staff physicians. These three practitioners are widely and favorably known. There will also be four consulting physicians—Dr. H. H. Bell, of Petersburg; Dr. Charles Carter, of Richmond; Dr. Charles R. Shumate, of Lynchburg, and Dr. S. W. Tucker, of Durham, N. C. By aid of the diversified equipment, these ten physicians will be enabled to give the most thorough treatment, more extensive than the general practitioner is able to render.

SEARCHING DIAGNOSIS

Before treatment is instituted all patients are examined with great care by the different members of the staff and an accurate diagnosis made. No modern aid in diagnosis is overlooked. The physicians believe in the old proverb, "A disease diagnosed is half cured."

After a satisfactory diagnosis is made, treatment suited to the case is outlined. Then the patient is assigned to the different departments equipped to give the treatment indicated. The X-ray and clinical laboratories are fitted with the finest apparatus available for diagnostic work and are under the direction of experts in their special lines.

An individual diet is prescribed for each case. All meals are served on trays to the patients. Fresh vegetables are furnished in season from the garden on the estate. A specialty is made of the "Porter Milk Diet."

CONCERNING DR. STILL

One of the world's greatest benefactors was Dr. Andrew Taylor Still, whose genius evolved the fundamental conception of health—the integrity of the body's mechanical adjustment and the sufficiency of the internal secretions to resist infection and disease, provided the bodily adjustment is such as to insure uninterrupted nerve force and blood supply to every tissue and organ.

Osteopathy has spread throughout the civilized world. No discoverer probably in the history of medicine lived to see a greater development of his thought than Dr. Still.

More ideal conditions under which to apply the osteopathic principles which he first developed cannot be found than at Terrace Spring Sanitarium.

OSTEOPATHIC DEPARTMENT

The osteopathic department is found to the left as one enters the south door of the sanitarium. Adjoining it is the physio-therapy department, which embraces the departments of hydro-therapy and electro-therapy. It is fitted with the best appliances and apparatus, including the de luxe McMannis treatment tables, the violet ray deep therapy lamps, the Burdick mercury quartz light, high-frequency electrical machines and the Daylight Sun-therapy.

So great have been the achievements with the ultra-violet rays from the Burdick quartz lamps that the entire scientific world, as well as the different medical professions, is watching with keen interest the development of these invisible rays of the higher spectral octaves. The importance of the quartz lamp of today is scarcely less than that of the X-ray tube. For the treatment of all skin diseases, in addition to other conditions, the quartz lamp is unsurpassed. It is part of the equipment at the sanitarium.

HYDRO-THERAPY DEPARTMENT

The Terrace Spring system of hydro-therapy—or the use of water as a means of cure—is chiefly relied upon to stimulate the vital activities necessary to the curative process. By cold applications properly applied every bodily function may be stimulated. By hot applications



Upper Picture: A View from the East Porch
Lower Picture: The Reception Room

THE OSTEOPATHIC PHYSICIAN

intelligently applied excessive action may be controlled, pain relieved and blood diverted from congested parts of the body. Powerful sedative, alterative and restorative effects may be produced by various other applications which will be given in this department.

Scientific hydro-therapy affords the most direct and rapid means of influencing the great functions of life—the circulation of the blood, the process of respiration, the action of the brain and nerves and the functions of the liver, kidneys, stomach and intestines. There is no means by which the various bodily functions

may be so quickly and perfectly controlled as by hydiatic measures.

ELECTRO-THERAPY DEPARTMENT

The electric light bath possesses all the virtues of the Turkish bath with none of the dangers and inconveniences. It adds the marvelous virtue of light. The luminous heat rays do not stop at the skin, as does ordinary heat, but permeate the soft parts of the body in every direction. They search out painful and sluggish parts and impart to them their powerful vital stimulus.

The value of the treatment in chronic mala-

dies of all sorts can scarcely be overestimated. The superior efficiency and luxurious attractiveness are attested by the extensive imitation? The sanitarium electric light bath is without doubt the most important improvement in bath appliances in modern times.

PROPER PHYSICAL CULTURE

Body training at Terrace Spring embraces the best feature of our modern schools. Most chronic invalids have badly depreciated bodies. The muscles are weak and flabby, the breathing is shallow, the heart is weak, and flat chests, stooped shoulders and impaired endurance are almost always found. These conditions are the natural results of malnutrition, and chronic toxemia is almost invariably found. This state of physical inefficiency must be combatted not only by the removal of the cause but by scientific training of the heart and muscles by proper physical exercise.

The departments of hydro-therapy, electro-therapy and physical training are under the direction of Mr. and Mrs. Belzer, late of Collins Institute of Physical Culture, Philadelphia. Mr. and Mrs. Belzer have had years of experience in this important field of therapy.

OBSTETRICAL DEPARTMENT

The utmost consideration for the welfare of the mother and child has resulted in the establishment of an obstetrical department to care for every type of case. There, as in the other departments, the most modern appliances are found. In the quiet atmosphere of the sanitarium the expectant mother and the young child will have the most excellent care it is possible to provide.

SURGICAL DEPARTMENT

The surgical department is equipped with the most modern apparatus for surgical work. The operating room is on the second floor, and is well planned and lighted, and is situated at one end of the hall, away from the patients' rooms. The sterilizing and anaesthetic equipment is most modern and complete.

SELECTED NURSES

Unusual care has been exercised in the choice of the corps of nurses for the sanitarium. All are intelligent, cultured young women who take pride in rendering the best service to their patients. They are under the constant direction of the Superintendent.

THE GUEST ROOMS

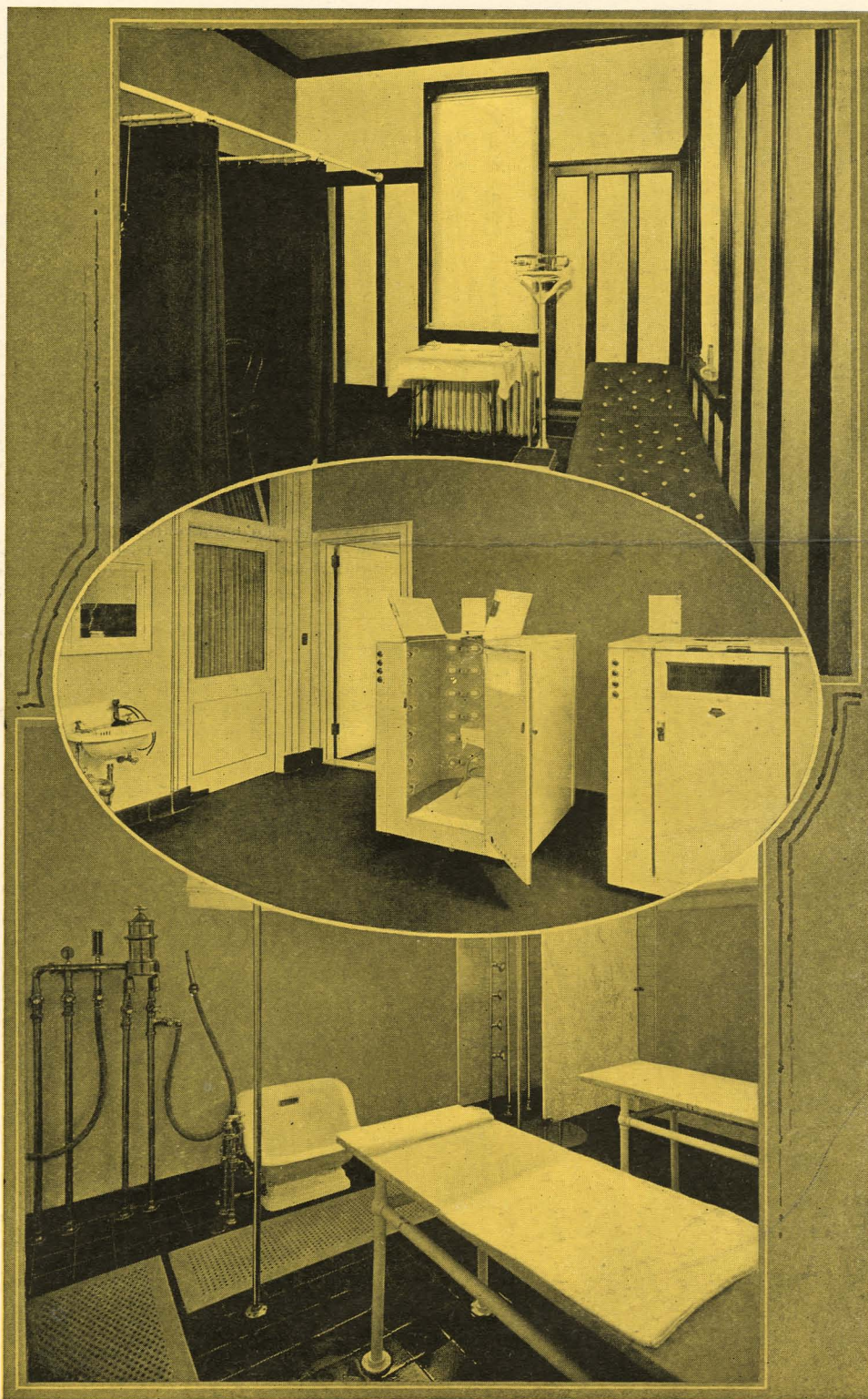
One of the attractive features of the institution is the beauty of the guest rooms. Every window opens out upon a lovely view. Each room is tastily furnished. The walls are done in soft tones restful to the eye and the hardwood floors are dotted here and there with small rugs of pleasing pattern. These make the rooms both sanitary and comfortable. Absolute cleanliness in the rooms and throughout the building is maintained by the institution attendants.

Some of the rooms are provided with a private bath. Others have a connecting bath and there are some without baths but within easy reach of a bath on the same floor. The rooms are intended to be pleasing places of abode for people of refinement and good taste who come to the sanitarium. There is a wide veranda and sun porch on the second floor easily reached from all the rooms.

RICHMOND'S ADVANTAGES

Probably no better place in the South could have been selected for an institution of the nature of Terrace Spring Sanitarium than Richmond. It is a city to which tourists from all corners of the country come every year because of its historical associations and charm and beauty. Beautiful homes and cultured people make it a city of distinction.

Six trunk line railroads serve the city and make it accessible from all parts of the South Atlantic section. Good highways enter from many directions. It has long been recognized as a hospital center, having more hospitals and



Top: Dressing Rooms of Bath Department
Center: A Corner of the Physical Training Department
Bottom: The Hydropathic Department

THE OSTEOPATHIC PHYSICIAN

SYNOPSIS OF THE VIRGINIA LAW REGULATING OSTEOPATHIC PRACTICE

Applicants for license to practice osteopathy take the regular medical examination, the subjects materia medica and practice only being excepted; they must have the equivalent of a high school diploma as evidence of preliminary education; and after April 1, 1914, must show pursuit of a four years' professional course. Secretary of the board—Dr. Barney, Fredericksburg. Osteopathic Member of the board—Dr. E. H. Shackelford, Richmond.

distinguished practitioners in the different branches of medicine than any other city of its size in the country.

The climate is delightful throughout the year. It is not subject to the bitter cold of the North nor the oppressive heat of the South. The excesses of climatic conditions are practically unknown, making it possible for patients to be outdoors a great deal and aiding in recuperation and rapid recovery.

INSTITUTION RATES

Rates for rooms range from \$30 to \$75 a week, depending on the size, location, use of private or connecting bath and care and attention required. The rates include board, room, nursing, baths, physical culture as indicated and all routine treatment given in the sanitarium. They do not, however, include examination fee, special treatment and physician's visits. For these a moderate charge is made. No contagious or mental cases are admitted.

Upon receipt of notice, patients will be met at railroad stations with private ambulance or automobile.

Correspondence is invited and urged. All possible information will be promptly and gladly furnished. Address:

THE SECRETARY,
Terrace Spring Sanitarium,
712 Monteiro Ave., Richmond, Va.

Biographical

Dr. Shackelford

Dr. E. H. Shackelford was born in Missouri in 1875. He was graduated from the American School of Osteopathy in 1897 as one of the pioneer practitioners whom Dr. A. T. Still, founder of the science, gathered about him within the first two years after organizing the parent college. He first practiced in Tennessee for three years and located in Richmond in 1900.

Dr. Shackelford served as a trustee of the American Osteopathic Association three years, 1917-18-19. He has been a member of the State Board of Medical Examiners in Virginia from 1914 to the present time. In 1898 he served as president of the Tennessee Osteopathic Association; in 1902 he was elected president of the Virginia Osteopathic Society; and in 1907 he was made vice president of the American Osteopathic Association.

Dr. Tucker

Dr. A. R. Tucker was born in Kentucky in 1878. He graduated from the American School of Osteopathy in 1903. Nine years later he was graduated from the Southern College of Medicine and Surgery. He completed post graduate work at the University of Louisville in 1915, at the Illinois Post Graduate School in 1919, at Mayo's Clinic in 1919, and at the New York Eye and Ear Infirmary in 1920.

Until his connection formed with Spring Terrace Sanitarium Dr. Tucker has been a resident of North Carolina where he engaged in practice. He has the unique record of serving twice as president of the North Carolina Osteopathic Society, first in 1908 and again in 1914. He also was elected president of the Middle Atlantic States Osteopathic Society in 1921. For six years from 1914 to 1920 Dr. Tucker served on the staff of the Mary Elizabeth Hospital at Raleigh, North Carolina.

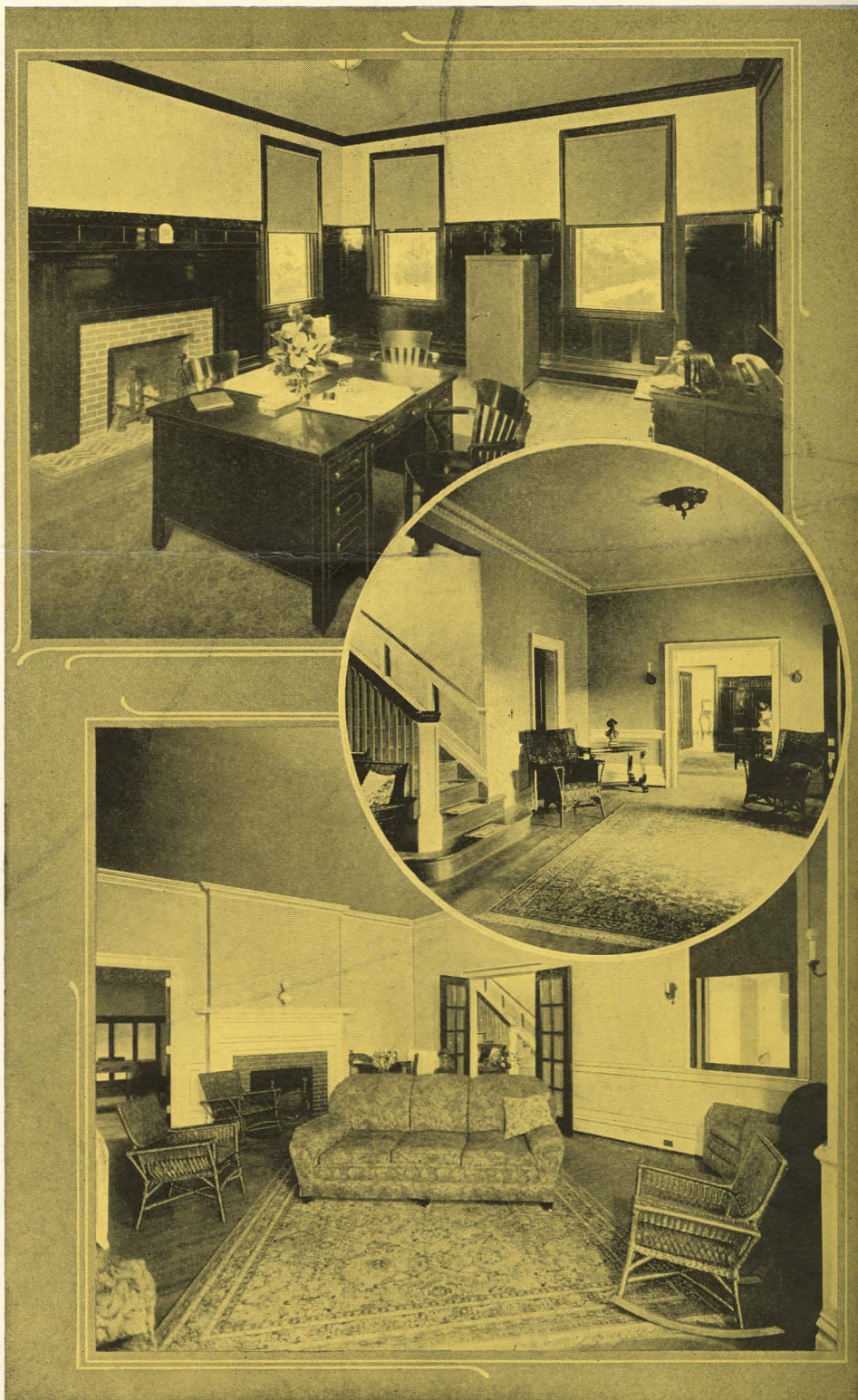
Dr. Fout

Dr. G. E. Fout was born in Missouri in 1877. He graduated from the Kirksville State Normal School in 1895 and pursued his studies in osteopathy under the founder of the science, graduating from the American School of Osteopathy in 1898.

Dr. Fout was elected president of the Virginia Osteopathic Society in 1912. He has practiced his profession in Richmond for 21 years.

Osteopathic Hospitals and Sanitariums

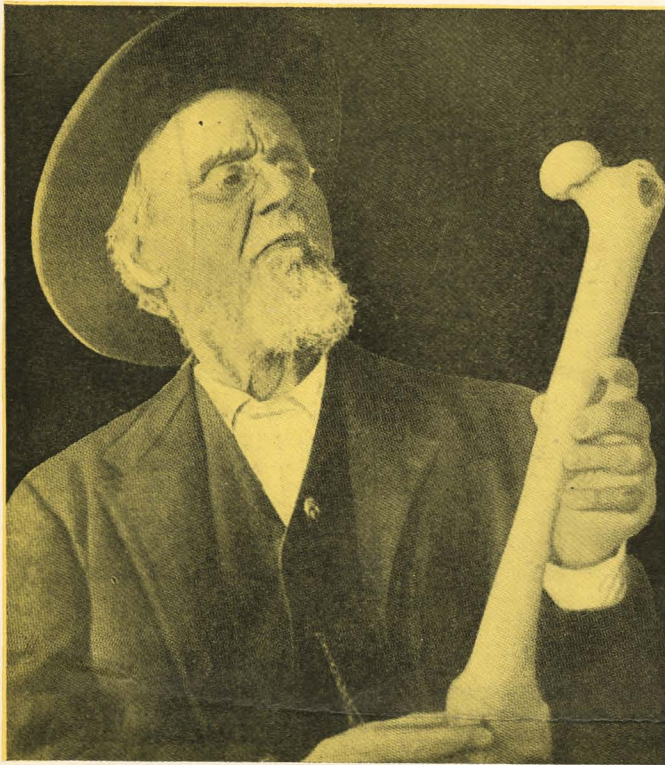
1. Terrace Spring Sanitarium, Richmond, Virginia.
2. Detroit Osteopathic Hospital, Detroit, Michigan.
3. Des Moines General Hospital, Des Moines, Iowa.



Top: Office of Sanitarium
Center: Reception Hall
Bottom: Another View of Reception Room

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4. Chico Hot Springs Sanitarium and Hospital, Emigrant, Mont.
5. Wayne-Leonard Osteopathic Sanitarium, Atlantic City, N. J.
6. Hospital, Kirksville, Mo.
7. Bush Sanitarium, Louisville, Ky.
8. Dufur Osteopathic Hospital, Philadelphia, Pennsylvania.



Photograph of Dr. Andrew Taylor Still in Typical Study

9. Chicago Osteopathic Hospital, Chicago, Illinois.
10. Delaware Springs Sanitarium, Delaware, Ohio.
11. Southwestern Osteopathic Sanitarium, Blackwell, Okla.
12. Still-Hildreth Sanitarium (for mental and nervous diseases) Macon, Mo.
13. Osteopathic Hospital of Philadelphia, Philadelphia, Pa.
14. Asheville Osteopathic Sanitarium, Asheville, N. C.
15. Laughlin Hospital, Kirksville, Mo.
16. Northern Osteopathic Hospital, Minneapolis, Minn.
17. Gamble Osteopathic Sanitarium, Salt Lake City, Utah.
18. Crane Osteopathic Hospital, Richmond, Indiana.
19. Ferguson Osteopathic Sanitarium, Terre Haute, Ind.
20. Jacobs Osteopathic Hospital, Montgomery, Mo.
21. North Platte Osteopathic Sanitarium, North Platte, Nebraska.
22. Osteopathic Infirmary, Ottawa, Canada.
23. Pauly Osteopathic Hospital, Kahoka, Mo.
24. Pennsylvania Osteopathic Sanitarium, York, Pa.
25. Robertson Sanitarium, Atlanta, Ga.
26. Soap Lake Sanitarium, Soap Lake, Wash.
27. Sprague Institute, New York City.
28. Twin Falls Hospital, Twin Falls, Idaho.
29. Yowell Osteopathic Sanitarium, Chattanooga, Tenn.
30. Kaw-Nah-Yeag-A-Mah Sanitarium, Dr. George M. Wade, Minneapolis, Minn.
31. Moore Sanitarium, Portland, Oregon.
32. Ottari, Asheville, N. C.
33. Dr. Pike's Osteopathic Health Resort, Long Beach, Calif.

34. St. Joseph Osteopathic Hospital, St. Joseph, Mo.
35. Liberty Osteopathic Hospital, St. Louis, Missouri.
36. Osteopathic Clinic of New York City, New York, N. Y.
39. Dr. Florence Gair's Child Reclamation Sanitarium, Brooklyn, N. Y.
38. Dr. Fectig Rest Home, Lakewood, N. J.
39. St. George's Sanitarium, De Land, Fla.
40. London Osteopathic Clinic, London, England.

Osteopathic Hospitals are now being organized at: Los Angeles, Denver, Springfield, Mo., Kansas City, Mo., and elsewhere.

The Philosophy of Osteopathy

[Reprinted by Permission from *Osteopathic Health*]

The human body is a perfect machine, complete with itself for all work imposed upon it to live; it is automatic, self-adjusting, self-regulative and even self-restorative to a wonderful degree when it undergoes damage from excessive usage, violence or disease. It is designed by its all-wise Creator to work in comfort and efficiency, without friction, inharmony of parts or disease, and—like a machine of wood or iron, so long as its separate parts are kept in proper form and adjustment—the whole machine may be expected to work in good order. Normally it requires no medicine but suitable food, fresh air, proper exercise, rest, cleanliness and wholesome mental habit in order to keep going in comfort and strength as a general proposition for about an eighty years' journey from the cradle to the grave.

But the body, like all machines does get out of repair.

How? Why?

Osteopathy has discovered some new and very important reasons for sickness that physicians of other schools hitherto have overlooked, namely, that the body often, if not usually, gets out of *mechanical* repair before disease as a result is tolerated in the tissues; that disease, or sickness, in the main represents a state of faulty adjustment and inharmonious balance of the different working parts of this machine; that disease, pain, friction of parts, partial stoppage of proper organic work in the body is due specifically to some mechanical obstruction to the nerve supply or blood supply of the body; and, consequently, that disease, when so caused, is only to be cured by removing such unnatural pressure or blockades from blood and nerve channels, to the end that circulating currents of nerve-force and blood life may speed, with undiminished flow, through all parts thus starved and renew their depleted vitality and energy.

How then, do we get sick?

In a great variety of ways. The catalog of disease factors, both predisposing and exciting is really a long and complex one. Some of these may be grouped as follows: Draughts, exposures, infection and vitiated air—that is, faulty environment; strains, wrenches, twists, etc., as from over-lifting—force exerted within the body; functional exhaustion, as in over-eating, excessive fatigue and worry; shocks and jars incident to falls, blows, etc.—forms of force exerted against the body. From such varied experiences we find either bony lesions or that the ligaments and muscles of the spinal joints contract hard and tight, causing soreness or pain with reflex organic disorder—conditions which, if neglected, are fairly apt to develop into various diseases. Another form of sickness results from poisoning in the course of drug-taking, the fruit of the delusion that drugs contain life-giving qualities—which now is scientifically disproved.

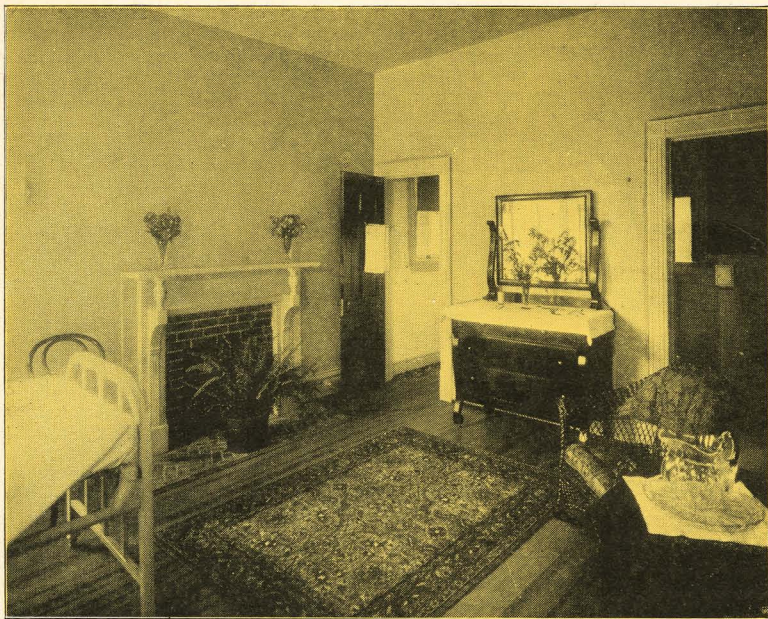
Any muscle or ligament that contracts will get shorter, thicker and denser in its substance. There is no waste room in the body—every bit of space is exactly filled by some structure. Each little muscle and ligament which, subjected to pressure-irritation, becomes thickened, must encroach then upon the softer structures of the circulatory channels, such as lymph spaces and bloodvessels, and will limit or stop their circulatory work; while in a nerve fibre that is crowded or pinched such pressure-irritation at first will exaggerate its action but if the pressure be severe and be continuously applied it may at length deaden its currents. You know that if a hose is stepped upon water will not flow freely through it; or if a telegraph wire is "grounded" it will scarcely transmit a message; it is much the same with the nerves and bloodvessels when they become abnormally compressed by contracted, hardened, sore ligaments and muscles, and especially so within the snug quarters of the little foramina, or tunnels, between vertebrae, at spinal joints, since these spaces are closely filled up with nerves, bloodvessels, fat, muscle fibres and ligaments in the closest kind of relationship.

Osteopathy endeavors in each disease to search out where these mechanical troubles have developed in the body—particularly along the spinal column—and the number and varieties



A View of a Double Bed Room

THE OSTEOPATHIC PHYSICIAN



A Single Bed Room

of different diseases found to be due to such mechanical causes are legion. Practically speaking, almost any kind of disease may be largely caused or much aggravated by such mechanical disturbance.

By removing such abnormal conditions when found—lesions, as we call them—osteopathy enables the body to recover from its diseases. We take the ground that these known and verifiable obstructions to natural body fluids and forces, these retarders of natural body processes, need to be removed to restore health, rather than drugging the body in the old way which only sets up counter troubles.

Unfortunately merely drugging symptoms (the effects of disease) has been the most popular practice in the past. Osteopathy, by contrast, removes the tissue-causes of disease, goes to the root of the matter and corrects and normalizes the fundamental mechanical basis of life by adjusting the working parts of the human machine. Cure naturally follows when this is successfully done. So long as it is possible to cure under such favoring circumstances.

Osteopathy as a Science

[Reprinted by Permission from *Osteopathic Health*]

We are living in an age that is keenly analytical of every statement which lays claim to being scientific. The past twenty-five years has seen the growth of an imposing array of related biologic sciences, and the discarding of unnumbered superstitions and fetiches. Practices and beliefs which could not demonstrate their right to survival through their inherent truth or social usefulness have gone the way of the pterodactyl and the dinosaur.

This same span of years has seen the birth and growth of a new therapeutic school, and the acceptance of its tenets by many of the keenest minds of the day. One generation has witnessed the steady growth of the osteopathic system, from the establishment of the first school in 1894 by Dr. Andrew Taylor Still, up to the present, with seven strong institutions making up the membership of the Associated Colleges of Osteopathy, and with thousands of osteopathic physicians practicing throughout the world.

One has only to analyze the osteopathic tenets in the light of modern science to realize the reason for this phenomenal growth and virility.

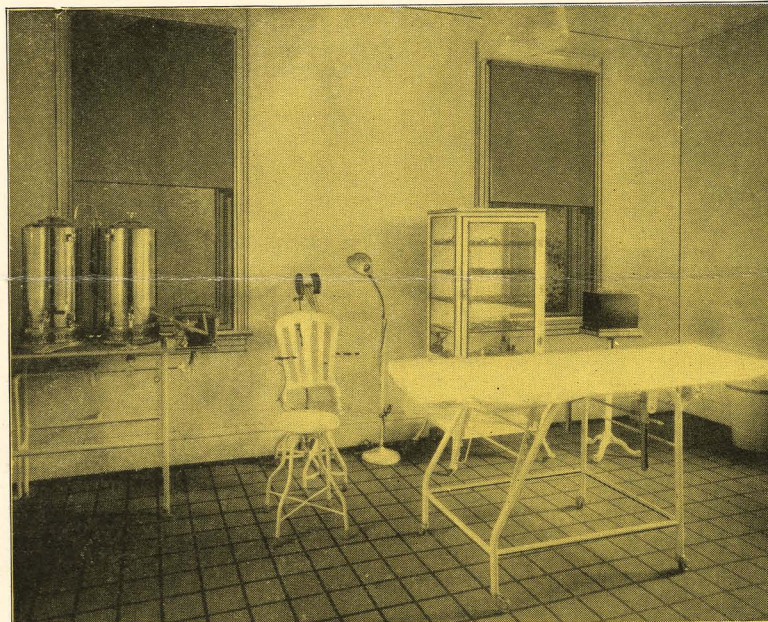
The osteopathic therapy rests upon two great generalizations, that are essentially biologic in character. The first of these is that "*organisms contain within themselves the inherent power to cure disease.*" The second is that "*integrity of structure is essential to normality of function.*"

Examining the first statement, the modern biologist sees in it only another way of stating that all forms of life extant today have survived as a result of a relatively perfect adaptation to their environment or in other words that the entire ancestry of every living individual has successfully conquered all conditions inimical to life, including disease, up to the period of reproduction. The statement is in no sense revolutionary—it is in fact entirely in keeping with the known laws of heredity and evolution. It becomes remarkable only when one considers that in substance it was voiced by Dr. Still, founder of osteopathy, nearly fifty years ago, and that he made a direct application of it in his treatment of disease, at a time when the so-called medical sciences were little more than a mosaic of superstition.

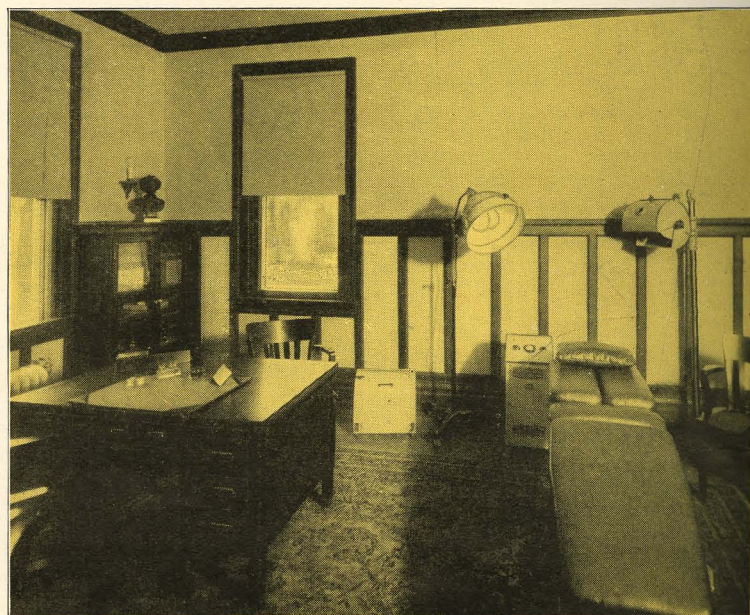
We can not herein give time to a consideration of the great mass of facts which group themselves under this first generalization. Sufficient to say that they make up a part of the technical knowledge attained by the modern osteopathic physician, under the general subheadings of immunology, antibody reaction, endocrinology, et cetera.

When we say that "*integrity of structure is essential to normality of function*" we have voiced a principle that may be applied to all organisms. When directly applied to the human, it can be restated in greater detail by saying that every part of the body must be in harmonious and normal relation with every other part, if it is to function properly. As the body is an aggregation of cells, we can on last analysis say that every cell must have its normal environment and its proper relationship to the aggregate, if the body is to function at its highest efficiency. This is the ideal toward which the truly scientific physician must work, and it may be said to constitute the general ground plan of the Osteopathic System.

The higher vertebrates, of which man is the particular example under consideration, are so constructed that, when subjected to physical injury, the immediate contacts are made on soft tissue, which has the inherent power of quick recuperation and repair. Transmitted force is however often carried to the skeletal structures (bone and cartilage) and because of their lesser power of recovery this type of injury is long lived and chronic in character. It results in what osteopaths call "lesions," the adjustment of which restores health.



Surgical Operating Room



An Osteopathic Treatment Room

[Editorial department on page following is continued from Page 16.]

thing more ordinary, as specialty advertising campaigns of today go. We would rather be in a position to quote the profession the lowest possible wholesale rates, based upon *million runs* and *absolute uniformity of service*, than do business for them in smaller editions and necessarily much more costly fashion.

That has long been our dream. We have put ourselves in position at last to carry it through for the profession. We are ready.

But the questions we are now anxious to solve and solve quickly are:

Is the profession ready?

Are you ready?

Has the individual genius for osteopathic promotion awakened to the point where upwards of a thousand of our people will *act promptly* and *act together, act in entire unison*, and *act on one program* of such magnitude?

In other words, has a Collective Consciousness evolved in osteopathy whereby the profession, or any considerable part of it, thinks and acts as one man, and thereby makes possible the advantage of a strategy and offensive such as unity of command, if capable, is able to perfect and consummate? Has the profession arrived at the very point of achieving its manifest destiny in a big way, or is it only on the way?

We believe the profession has arrived. We believe the hour has struck for going after the final and the big achievements. Many signs indicate it.

Unity of counsels indicate it.

Singleness of purpose in going after but three fundamental things in AOA work indicate it, these being (1) the education of the public by printed propaganda—in other words, advertising osteopathy—in which the building of clinics, hospitals and sanitariums as texts or "talking points" hold a first importance; (2) unifying our laws to obtain equality of privilege for our practitioners with the present equality of preparation; and (3) building up our colleges by filling them to capacity with students.

Subscribing that *Saturday Evening Post* fund of \$50,000 for advertising osteopathy is a great indication that osteopathy has arrived and at last is just about to demand of fate a present and a future achievement proportionate to the worthiness of its cause.

All these things, fellow osteopaths, and many more persuade us that osteopathy is now ready to campaign in million lots monthly with direct-mail pamphlet and booklet literature, instead of continuing the very substantial but still very inadequate achievement of our publishing house up to this time, which has been a bare tenth or less the magnitude of this bigger vision. We are proud of the fact that for twenty years we have been able to put out upwards of 100,000 magazines a month for osteopathy—in round numbers, a million a year. That has been our steady job, friends, for twenty years; and it has been accomplished, of course, only through your loyal cooperation.

But we are all getting the bigger vision today—progress and large magnitudes are in the air—and the question now is, shall we move osteopathy up ten times faster by mailing a million a month instead of a hundred thousand or some fraction of it?

It is your privilege to make answer.

We are ready.

And to give the project a quick test we have offered to engineer the first deal of a million for demonstration purposes on a basis of actual productive cost.

At a cost to you (and to us) of but \$31.79 we have offered (for this once, at least) to furnish complete and mail out a *special edition for you* of 1,000 copies of this fine new brochure "The Method and Cures of Osteopathy" to 1,000 homes in your own community, each bearing your professional card. You may order as many of these units of 1,000 as you like at the same price—it's the million-run price, you understand. Groups of osteopaths may unite in any field in a really big campaign so as to reach

Some Patients I Have Known

II

The Symptom Complex

John Barr, D.O.

Many an embryo physician, as he studied the practice of medicine, became lost in the mazes of symptomatology. Early in his would-be career, he learned to respect the fine art of differential diagnosis and wondered if he too would some day be able to apply this refined method of discrimination to the ills of his to-be-hoped-for patients.

Now, as he looks back from the heights of a busy practice, he realizes with a smile that he did become able to recognize a case of measles when he saw it and that the realm of cardio-vascular-renal diseases became in time something more than an utter mystery to him. Still, in the early days, there were two classes of patients that puzzled him. There were those that had definite symptoms yet whom he was unable to classify. And there were those that had such various and multitudinous signs and symptoms that it seemed on first glance they must have all the diseases in the catalogue.

The first of these two classes he still has with him. In spite of a ripened experience, there are cases that remain as they came to him, mysteries. But the second class, he has long, long ago solved. Two or three minutes at the outside suffice to place the ear-marks on the patient whom he has gotten in the habit of calling a "symptom complex." They fit into no category and if he places them at all, it is in that diagnostic waste-basket, *neurasthenia*.

All too readily does he recall the first of these patients. Anxious to make a clever diagnosis to be followed by a masterly course of treatment capped with a striking cure, he seriously indited the list of symptoms and studiously delved into the complexity of their possible meaning. He even tried grouping the presenting symptoms as Cabot had taught him, but when he got to the end, the answer was not there—as it invariably was in Cabot's case-reports. Rather the whole thing looked more like the old bugbear of his high-school days, a quadratic equation. And its ultimate outcome was very much

the same as was that of many of those high-school problems—the solution was not found.

Perhaps that first patient became one of his main-stays. As soon as he got one set of symptoms cleared up, there was another more persistent in its manifestations. So it may have gone from month to month. But don't ever make the mistake of asking this doctor what was the matter with that patient. He never knew.

The passing time brought to him its clarifying vision. Now he knows them. Knows them from afar off. Knows of the many things of which they complain although in any particular case he may be unable to give the order in which the complaints will be poured forth. If his is what is known as a "chronic" practice, he accepts the case, does what he can for it while he may, for eventually he knows that he will be discharged when his armamentarium becomes exhausted—and the symptoms continue to roll on. The patient will go on to the next doctor who will start in where he left off, and so on ad nauseam.

If he happens to practice a specialty and sees in all mankind fit subjects for his operations, then he will promise a cure when his ministrations are over. And it would not be well to call him dishonest, but rather, the more or less innocent victim of his enthusiasm. Conceivably, he may belong to a rather rare group of physicians whose honesty of opinion often places their talents under a bushel in so far as this particular class of patient is concerned. This being the case, he gravely listens to their history, painstakingly examines them just to be certain he is not wrong and then as they expectantly wait for his opinion, he delivers it, straight from the shoulder: "Madam, (or Sir, as the case may be), there is nothing the matter with you and there is nothing I can do for you."

That of course, is the end of the matter, except for the written record which he wearily completes as another case of "symptom complex."

practically everybody in a given town or city. We will even supply the names and addresses for your own mailing in your own field if you do not prefer to supply them yourself. The brochure is to be printed in two colors. Our only restrictions are that all orders must be uniform, in units of 1,000; your check for the full amount must accompany your order; and the whole million run must be ordered and paid for in advance by the profession or, naturally, the scheme isn't possible to engineer at all. Any change or variation from the plan as proposed in our circular adds complexities that cost money.—Only by the uniform plan proposed can the job be done for \$31.79 per thousand.

This enterprise will cost us \$31,790 to engineer for the profession. Every one will appreciate that we can't do such a job of such magnitude, or any part of it, on our own capital, especially since we plan at this price to do it this once without profit. After a deal of such magnitude is thus done once *at cost* we will be able to

figure how low we could price it in the future for regular monthly runs with a fair living profit to ourselves added in.

The appeal of this direct-advertising Big Deal should be very strong to every osteopath in practice, for the dissemination of every single unit of 1,000 of these messengers of osteopathic advancement will be sure to be a paying investment to every one who puts his or her money into it. It is a bona fide *get-your-money-back-with-profit proposition*. We will risk our advertising reputation on the prophecy that you can't co-operate with us in this big deal without making money on your investment. Some will be sure to get hundreds of dollars back from this single mailing at a cost of but \$31.79, ten dollars of which goes into postage.

Are you in for it?

Do you want it, friends?

From our first appeal about 100,000 of the million edition were ordered. That is just about what we expected. We figured that the

first announcement would bring forth subscriptions anywhere from 100,000 to 250,000. So we are not disappointed. It indicates that the Big Deal in direct-by-mail advertising is wanted by the profession.

The question is now will leaders in the profession get behind the Big Deal and help us put it over?

Will societies and groups of osteopaths help organize the Big Deal and put it over?

Will you place your order for distributing one or more units of 1,000 of "The Method and

Cures of Osteopathy?" Individuals at this low cost can well afford to mail out 5,000 or 10,000 pamphlets. Why not actually cover your field for once and see what it does for you?

This one achievement of mailing a million copies must be one big co-operative deal, friends of the profession, if it is anything at all. It must be carried through by the profession or it won't go through otherwise. But we believe it's going through. Will you get behind it? Please let us know what to expect from you. We are ready. Speak up.—*HSB.*

Let Us Set Our House In Order

Mark C. Carpenter, D.O., Lansing, Mich.

I have read with a great deal of interest the discussions on the resolution introduced by Dr. Woodall at Cleveland aiming towards settling our relation to chiropractic.

I do not favor the resolution. Our colleges should aim to make and graduate real osteopathic physicians—men and women who are able to alleviate all kinds of human suffering and disease. Right now we are suffering because our profession is composed of a conglomerate mass of individuals, and should our colleges turn out one-year osteopaths as chiropractors it would add a most lurid hue to the already variegated osteopathic landscape. The public would be more than ever confused.

Soon after starting practice about ten years ago I lost an obstetrical case because two or three osteopaths located elsewhere in the state told the husband of the patient that a pregnant woman should not be given treatment. Those osteopaths had more or less long reputations, and I was just a young practitioner, so I lost.

I feel that chiropractic is a parody of osteopathy, and say so to those who ask, but I do not feel as bitter towards chiropractors, as some do. I believe that, as Dr. Woodall says, they exist because there is a demand for them, and their fee is small. I have treated many people who had been to chiropractors first and have also seen people of average common sense who have fastened their affections to chiropractic after having tried osteopathy.

However two experiences that I have had this past year make me feel very sorrowful. Two men came into my office several months apart and said nearly the same words. They had been advised to come to me as they could not get an appointment with their chiropractor (he does not work on Saturday afternoons any more), but told me frankly that they would not have come if they had known that I was an osteopathic physician which they learned by reading the sign on our door. They said "rubbing" could do them no good. I did not become angry, but told them that I could adjust their spines as well as anybody if that was what they wished. They told me to go ahead, were pleased with the results, and paid me the regular fee for osteopathic treatment, which is a little more than twice as much as chiropractors here charge. I also tried to do it better than the chiro does.

In conversation with these men I found that one had suffered from lumbago and the other from spinal derangement and neuritis as result of heavy lifting. Both had given a certain osteopathic a fair trial, it is claimed, with no benefit and then tried chiropractors who helped them from the start. I do not blame any osteopathic physician for having failed to help either of those cases; we all have done so at times; but I was amazed when both of them said that osteopaths did not even try to adjust their spine. No wonder they thought "rubbing" would be no good for their conditions!

Now I am reminded of one of the last things that I heard while in college. Dr. Emery said that the time is fast approaching when the word OSTEOPATHY in large letters over your office door will not be all that is necessary to fill your office with patients; for you will need.

besides that, an individual reputation in the community. I wonder if that time has not already come. If so perhaps that principle will apply to chiropractors as well.

I was glad to witness the fine demonstration of adjustive therapeutics at the Cleveland convention and only wish that our colleges could be more sure that every graduate is well grounded in that subject. I glory in the fact that our colleges have higher educational standards than chiropractic schools and a curriculum equal to the colleges conferring M.D. degrees excepting drug therapeutics. Let us keep our standards high and try to influence others to do likewise. I think Dr. Waldo spoke the truth when he said no one branch can control the healing art.

The chiropractor is here and we cannot oust him, so let's try to uplift him. If our colleges should graduate chiropractors it would not harm the others but would belittle ourselves. Present conditions cannot be changed readily. Time is the great equalizing agent. We have some in our own profession who charge chiropractic rates. When the members of our profession in one community cannot agree on any subject such as fees how can the profession present a solid front to the enemy? Organization and comradeship should be our aim.

Let us set our own house in order and let chiropractors survive or perish on their own reputation.

A "Con" Man Trying to Borrow Money from D.O's.

I would be obliged if you would give the following publicity in *OP*. Some one in Brooklyn is trying to use my name to get money out of persons in that city known to be acquainted with me. Last summer a man posing as my brother called on Dr. Minton in Brooklyn. Dr. Minton is a member of the New York State Board of Medical examiners. This person must have known who I was well enough to know that I was a member of this board. He told a story of being on his way to Rochester with his family and running out of money. Fortunately Dr. Minton did not give him any money. Again early in October the same man evidently called on Dr. Bean. Gave the same kind of a story and wanted money. When Dr. Bean tried to phone Dr. Bandel the man made the excuse that he had left his machine for a moment and had forgotten to lock it. He claimed to be touring and had expected money to reach him in Albany. He went out ostensibly to his machine and did not return.

This is just to tip off the profession. If any person claims to be a relative of mine try to turn him over to the police. Fortunately no one has been stung, so far as I know, and I don't want any one to get caught.

If such a person calls on any members of the profession I would be glad if they will let me hear from them if they can assist in identifying him. Hastily yours—*Ralph H. Williams, D.O., Rochester, N. Y.*

That Lame Shoulder

Wm. A. Settle, D.O., Peterborough, Ontario

DO YOU remember Dad. * * *
 THE TIME we sat. * * *
 IN THAT old. * * *
 KANSAS CITY depot. * * *
 AND I asked you. * * *
 ABOUT THE lame arm. * * *
 AND THE shoulder. * * *
 THAT HAD been stiff. * * *
 FOR SO long. * * *
 AND YOU told me. * * *
 HOW DISCOURAGED you were. * * *
 HOW YOU had doctored. * * *
 FIRST WITH one. * * *
 THEN WITH another. * * *
 AND THAT now. * * *
 YOU WERE going to go. * * *
 CONSULT WITH the osteopath. * * *
 AND DO you remember Dad. * * *
 THAT I had never heard. * * *
 OF ANY such doctor. * * *
 AND WHEN you told me. * * *
 ALL ABOUT them. * * *
 HOW I laughed at you. * * *
 AND CALLED you. * * *
 A COME-on, a fall guy. * * *
 AND GOODNESS knows what. * * *
 REMEMBER YOU told me. * * *
 THAT I was a bright lad. * * *
 BUT THERE were a lot. * * *
 OF THINGS I didn't know. * * *
 THEN YOU went. * * *
 TO SEE the osteopath. * * *
 AND YOUR arm was cured. * * *
 AND DO you know Dad. * * *
 NOW-A-DAYS when some one. * * *
 COMES ALONG and says. * * *
 HE DOES not believe. * * *
 IN THIS osteopathy stuff. * * *
 I TRY to pity. * * *
 HIS IGNORANCE. * * *
 JUST AS you did mine. * * *
 AND TRUST that he. * * *
 MAY HAVE the sense. * * *
 TO GO to an osteopath. * * *
 IF HE ever has. * * *
 A LAME stiff shoulder. * * *
 AND GET it cured. * * *
 JUST AS you did. * * *

"Waldoettes"

"You may have a medical friend but don't expect him to work for you."

"Aping the other fellow is not the goal we want to reach."

"Eleven hundred Medics gave \$250.00 each in Washington to pay a D. O. goat-getter."

"Elevator men and plumbers are mighty scarce in Seattle since Palmer's last visit."

Carberry-Feathers Controversy

[Continued from Page 14]

That is a darned clever dialogue between "Dr. Feathers and Dr. Carberry." It presents a dilemma that is all too true and ever-existent. I would like to write a thoughtful article for *OP* on just that very subject. Some of our boys have the idea that it is a poor investment to spend a certain amount in ethical publicity.

If a practitioner has a small practice he needs most of all good propaganda.

If he has a tremendous practice, he should use all the more literature pertaining to his science, because he can reach a greater number of people and thereby help to put our science before the public.

This will help, not only his own practice, but it will make out of his patients a more intelligent class of people. They will be easier to treat because they will have learned more about the human body and the various ailments.

We should ever be on the alert to plant the true principles of osteopathy in every home in our vicinity, at least.

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Opinion of Dr. Ralph H. Williams, Rochester, New York:

In this Carberry-Feathers argument about resuscitating "dead ones" I will reply to the questions individually.

"What did Feathers do?" Nothing. That type of mind is all too common in the osteopathic profession. But they lack the courage of convictions which may be forced upon them, or they lack the real enthusiasm to carry them out.

"What *could* Feathers do?"

He could do nothing unless he adopted a specific plan for publicity covering not less than one year and pay for it in advance, for the reason that unless he paid for it in advance he would get cold feet before his program began to bear fruit and abandon it.

"What *should* he do?"

If he has not sufficient vision of his own to outline a plan of campaign of publicity, he should follow competent advice on the subject as far as he could stretch his finances and his credit to fulfill.

"What would *you* do in his situation?"

I would make a list of every family in which I had ever been employed and who still resided in my community.

I would pay in advance for a year's subscription for each of these names for "Osteopathic Health."

I would order a set of Williams' booklets (best quality) to be sent to each of these names in such a way that they would reach them, one each month, in the middle of the interval between the arrival of "OH's."

I would get a supply of Webster's "Concerning Osteopathy" and personally put it in the hands of every new patient and every "new old" patient who came into the office.

In Feathers situation I would do all of these things or none of them. Half measures will not do.

At the end of one year Feathers' business would be all he could reasonably take care of and he could modify the plan somewhat, but under no circumstances should publicity be abandoned.

◎ ◎ ◎

Opinion of Dr. R. S. Shepherd, Seattle, Wash.:

Feathers will stay on the job for these reasons:

1. He is tenacious or he would not have held on as long as he has.

2. Feathers certainly is known as a successful osteopath; now he must prove the latter. Carberry has at last sent home a dart with effect.

3. He determines to persistently and freely advertise with a view to controvert chiropractic and establish osteopathy as a superior and scientific procedure.

Chiropractic with its crude methods in many cases will have met with numerous failures. Osteopathic advertising will call the public's attention to the osteopath. They will try the osteopath when they know more about him and his therapeutic science.

4. A defection from the chiro ranks will begin and Feathers may have his chance with his superior knowledge and methods. The tide is beginning to turn from the ranks of his enemies with increasing volume as time goes on.

5. Advertising puts enthusiasm into his former patients and they begin to pull for him.

6. Feathers decides that if there is room for four chiros to get along, and an osteopath to live without the osteopath making any efforts worth while to live, that by judicious and persistent advertising the osteopath should abundantly succeed.

7. He reasons that he may be able to turn his losses, somewhat at least, into assets and that Carberry may have exaggerated the handicap put over him by the chiros.

8. Feathers sees now where he has failed and not being a coward, but rather lacking in foresight, when once aroused and latent energy put into action, he decides the tables are not unalterably against him. That if the chiros with a cheaper article can succeed, he will beat them to it by using their own methods of warfare and carrying the war into their own territory.

9. He argues that he might have to do a little more advertising than at first hand, but the field is advertised to manipulative treatment and all that is needed is the several superior methods of osteopathy.

10. Then, too, he is ashamed to be known as a failure and quitter. His personal pride forbids it.

11. Feathers is not one of the roving kind. He has his friends there, his home and office located, and doesn't want to undergo the expense and labor of moving and beginning all over again.

These are some of the reasons why I believe Feathers, upon careful consideration, decides to stay with his old location and launch a scientific campaign of publicity.

◎ ◎ ◎

Opinion of Dr. C. C. Reid, Denver:

I have read the Carberry-Feathers controversy in October *OP*. Feathers should loosen up on his publicity campaign if he has to go and borrow the money. Of course he should have been doing that all the way along. An osteopath should set aside at least 10% of his income for publicity, and if necessary to make it go, he should make it 1/3.

Then get so busy thinking out his own plans and taking care of his own work that he forgets there are any chiros in town.

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Opinion of Dr. Harry W. Gamble, Missouri Valley, Iowa:

Feathers should become thoroughly convinced he has been a slacker, repent and reform. Hire the best secretary possible; launch an active campaign and prove to his community these things. He should take a vacation to place his health in the best of condition, while taking a post graduate course during his moulting season, and to shed nine years of feathers and moss all at moulting!

Draft the best man available within a thousand miles to give a lecture to all invited friends, in the best hall available, telling them of the return of their local osteopath, and impress upon them his earnest desire to do a worthy service and establish a free clinic by enlisting the support of all charitable and benevolent bodies in the community. Provide osteopathic books and magazines for the public libraries of his community and launch prize essay contests with rewards for the best ones written upon osteopathy.

Have his secretary phone or mail all interesting news to the local press and make as much effort to give them news outside the selfish side as possible. Volunteer talks to the different clubs and societies which might appreciate such efforts.

Make a special effort to find new students and nurses for the colleges and pay the press for assisting.

Impress upon the entire community that he is proud of his science and profession, and his determination to do his utmost to be a worthy representative thereof, for their sake, for his sake, for the science and for posterity.

By a thorough publicity and educational campaign he should impress the fact that he is unselfish in it and by his activity for free clinics, more students and nurses they may note its genuineness.

With the extent of the campaign gauged by Feathers' admitted nine years neglect, the amount done by the "counterfeiters" and the superiority of osteopathy over all other methods, his first year of honest promotion work must needs be strenuous to prove his reform and remorse.

His nine years of punctuality has established sufficient credit to launch the first few months of these activities, and a slight discount for cash in advance for a month's treatment from the generous harvest of new converts, as well as a renewal of patronage from the backsliders, will finance the balance of his campaign.

The new atmosphere, service and increased patronage will justify the raise in rates, with no protest from the public, and after raising the salary of the secretary and remembering the courtesies of the press by other courtesies Dr. Feathers will really begin to live; conscious of doing a worthy service in a worthy manner to the utmost of his capacity. Henceforth osteopathy will occupy the front seat it deserves in his town and county, and no more apologies will be necessary from Feathers for he has learned that all good things cost the price—even practice—and he has at last become willing to pay it, so is entitled to his generous reward.

FOOTNOTE TO EDITOR

Say, *OP*, how the hec can I tell you the half that Feathers should do on the back of a penny postal—as you requested me—to redeem nine years of his "sins of omission, commission and permission" as the colored preacher put it! I have done my best to abbreviate the above but, heavens, Harry, abbreviation on such a theme is as reasonable as to expect Feathers to put osteopathy on the map in the first lap of the race. Even to begin telling what all he certainly should do, just as a starter, to regain his self-respect, let alone to change the situation of the whole county which has been so nastily neglected all these years, is a big task.

We've got too many Featherers who need moulting before nine years, and too many mossbacks who let the counterfeiters steal their bacon; but it's their own fault and funeral—although locally, unfortunately, osteopathy dies with them; and when they all prove their conversion by reforming and getting busy, they may yet redeem themselves and their science.

I'm disgusted to find D.O.'s who acknowledge that "chiros own their town"—men who are too rotten lazy and indifferent to earn it back from them!—*Harry W. Gamble.*

◎ ◎ ◎

Opinion of Dr. Walter J. Novinger, Trenton, N. J.

Each succeeding year that Feathers has been in practice, in his present location, has added a larger millstone which he himself has chained to his neck, until now it is well nigh impossible for him to succeed in his present location, just as it is for a farmer with a mortgage, who, instead of paying his interest annually, adds

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it to the principal and in lean years borrows more.

Therefore, I would say, have him quit for a time, travel around and see how other osteopaths have made a success, then pick out a good likely city and start in as all beginners do. Use plenty of good field literature, regularly and persistently, among the best people of the community—this would be the easiest way to forget his past mistakes and make a quick success in a new location.

On the other hand, if he is a *real man* and has all the good qualities and ability that his friend Dr. Carberry says he has, why does he not frankly admit failure and start anew, in his present location, using the same methods of publicity that the beginner has always recognized as a stepping stone to bring people in his community to a realization of his worth. He should be even *more persistent* and aggressive than a new beginner in the distribution regularly of from one to three copies monthly of osteopathic propagandic literature.

Not only should he use the literature in this manner until he has established a lucrative practice, but he should then continue sending this literature to make certain that his own practice does not slump! In this way he will keep on instructing his community so that osteopathy will grow, so that students will be recruited, because of his good work in curing the sick, and so that the way to success for future beginners, in his community, will be smoothed of some of the obstructions which Feathers himself had to contend with.

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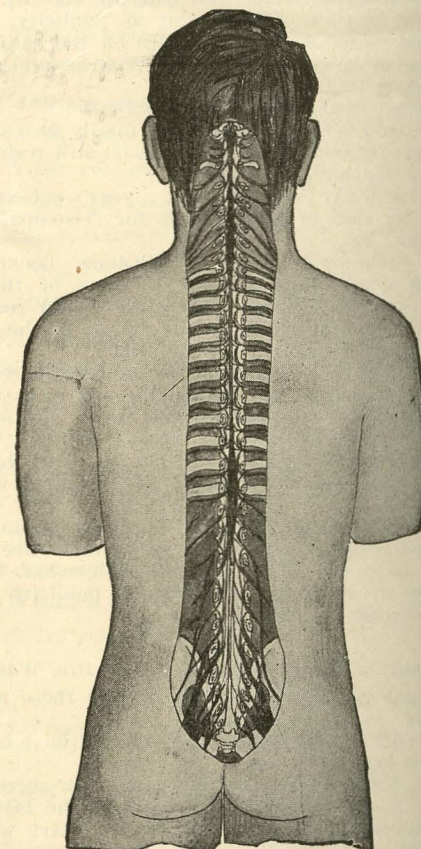
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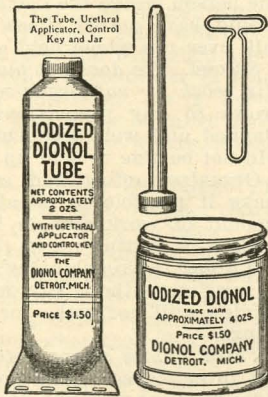
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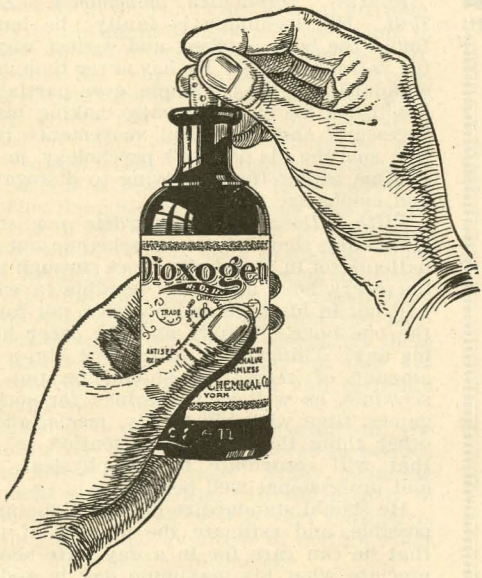
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(Continued)
Management

We have discussed the office, the personal appearance of the occupants, the help, the equipment and the publicity. Now, we are going to put all this machinery into action in osteopathic practice, or rather from the angle which we were discussing, from the standpoint of inef-

ficiency and its effect upon income, the deficiencies of management.

First. The inefficient doctor has no conferences with his help in planning his work. I have talked with many physicians who had secretaries. With many, it never seems to have

occurred to them that the secretaries would be personally interested in the business outside of putting in so much time and receiving their salary. No physician should have help except that of the right kind, and no help is of the right kind unless they have some interest in the business outside of drawing their salary. Interest in the business will only come by knowing about the business. Regular conferences should be had with the help even though there is only one person beside the doctor in the office. They should have stated times to get together and talk over the whole field of practice.

Second. He does not plan carefully, if at all. His work is not organized. A practice that grows to any proportions must be carefully planned and well organized or else the doctor will not be able to hold up under the burden.

Organized effort and careful planning will make it possible to do about three times the amount of work and do it easier. A regular routine of getting up in the morning, going to and doing the regular day's work as it happens to turn up, without any definitely planned idea in view will not make for progress and bigger things.

Third. Does minor details which should be left to employees. The inefficient physician divides his time with non essentials or side issues, fads, hobbies, and adventitious things. For example: the hobby of trying to be a farmer while one is trying also to be a physician; doing one's own shopping; taking care of the furnace; mowing and cleaning the yard; oiling and washing the automobile; dusting and mopping and doing other house work; bookkeeping; appointments; collections; and long hand correspondence. There are lots of people who are trained for these very things, making them specialties. They do them far better, much easier, and quicker than the doctor himself.

The doctor's time, if it is scheduled and properly spent in taking care of patients, should be valued at from six to ten dollars an hour. If he is going to take that valuable time to put it in on these various details that belong to every busy man's life, he is not only very expensive with his time, but he will make conditions both psychologically and physically that will largely curtail his growth in practice. Economy is on the side of giving someone else a good job with these things.

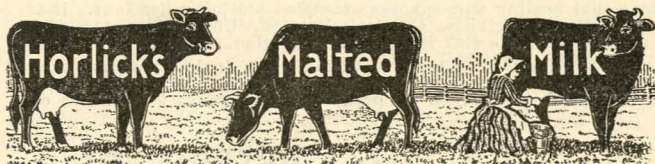
Fourth. Duplicates movements. Lack of skill. His technique is faulty; he has never found the best, quickest and easiest way to set the various lesions. He has never thought about standardizing his technique, even partially. He duplicates many movements, making many unnecessary and unskillful movements in practice, spoiling his patient's psychology, in putting in time rather than studying to disregard time and emphasize skill.

Fifth. Does not standardize nor schedule. Every day should have its schedule not only of patients set in at definite times through the day, but every hour as far as possible in which he will put in his time and practice, not forgetting the one hour of study and the other hours of his day. Things that will afford him a certain amount of recreation should be put in his schedule, as well as gatherings for sociability, games, time with his family, meals, and every other thing that requires attention in his life that will contribute to his physical, mental, and professional well being.

He should standardize his technique as far as possible, and estimate the number of patients that he can care for in a day. He should appreciate what his maximum day is and standardize it on that basis, scheduling his work accordingly.

Sixth. The inefficient doctor does not charge for his examination. It is almost an axiom in efficiency as applied to osteopathic practice that has been said over and over, "He who does not charge for examination, his examination is worth nothing or soon will be worth nothing." It will also be regarded by patients in general

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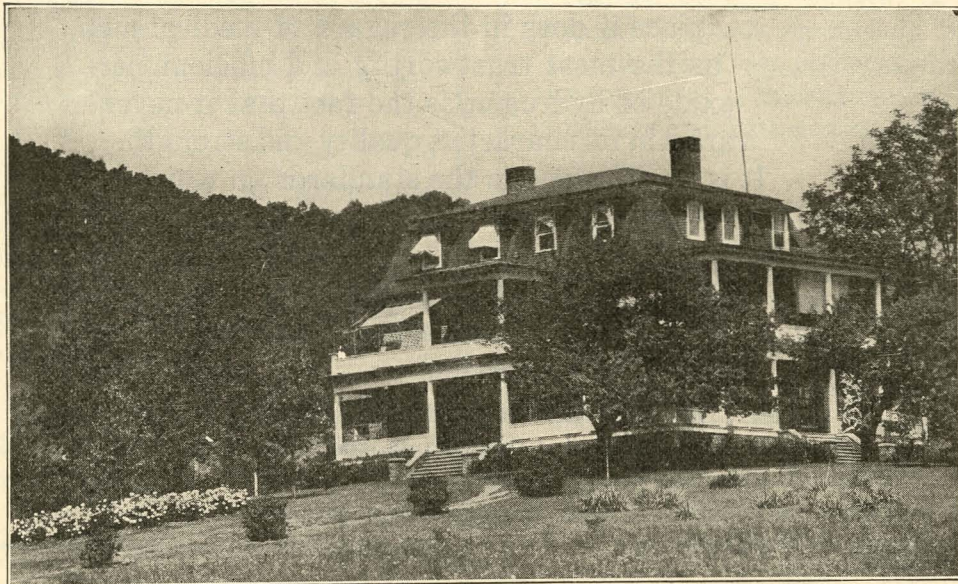
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if the doctor cheapens his valuable time, skill, using the knowledge that he has spent thousands of dollars and years of time to acquire and giving expert advice for nothing. The whole psychology of it is wrong, both with the doctor and with the patient and any crossing of right relations bears its fruit accordingly. This condition existing with many doctors works to their belittling, if not to their undoing and forever keeps them mediocre or unsuccessful.

It follows naturally that if no charge is made for examination, the treatment price will fall in the lower class of charges, and with such a procedure up to this point, a condition is made which will make it impossible for a doctor to ever get any prices that would be called above the average, which as every one knows, is very low.

Seventh. Does not diagnose carefully. The inefficient man, as has been said, does not charge for examination, and there being no money connected with the procedure, naturally his diagnosis is not a careful and studied one, but a procedure over which he must glide and get through as quickly as possible since he is not paid for it. If he does other than this, he will have to continually force himself to it.

Without the encouragement of having people pay him properly for his diagnosis, after a while habits of neglect will become fastened upon him in his diagnosis and very frequently is carried over into treatment.

Eighth. Fails to use common business principles. The inefficient man, naturally being careless and slovenly, fails to learn and observe ordinary business principles. He is not careful in keeping his books, getting out bills, making his collections, and he becomes more or less of a "pussy foot" all around.

Ninth. Unwise on economy, stingy and parsimonious. In his efforts to save and be economical, his economy goes into extremes. Since he is trying to save as much of the expense of his business as possible, when he is asked to give to benevolent movements of his church, Y. M. C. A., professional, civic affairs, or any altruistic movement, he is very liable to exercise his bump of economy to the extent that it will be called, and really is, stinginess. I have seen many doctors of this kind and also many citizens other than physicians.

Tenth. Does not adapt treatment wisely. Being slovenly in his habits and mental attitude, naturally in his adaptation of his treatments to the variety of conditions which he has to treat, he falls into the "engine wiping habit," treating some patients too hard, others too easy, some too long, others too short, and in general is controlled by his moods. Sometimes he may give a treatment that will cripple a patient, as I have seen in a few cases. I have known of joints being damaged by physicians who sprung the articles of the cervical region to the extent that they would be sore long periods of time, starting antritis. I have known of ligaments of the hip joint that have been damaged from giving internal and external rotation and jerking the leg down too strongly. Fortunately these conditions are seldom permanent, but they are very inconvenient to the patient and certainly give the doctor a black eye.

Management is of extreme importance in the efficiency of the doctor if he is ever to become anything above the average. Study, planning and thought along this line will add greatly to one's income. The lack of it is very expensive, costing hundreds and hundreds of dollars every month to the ordinary physician.

(To be Continued.)

Why Not Give "D.C." to Graduates Who Want It?

It seems to me that by giving a chiro degree after the completion of the first year's work at an osteopathic institution we would be making rather a bad mess of things. They would do

extensive damage both to the public and to our profession. It would be letting loose a pack of ignorant money-mad hounds to prey upon an unsuspecting public. Those students who at the start intended to take the full four-year course and become worthwhile D.O.'s would drop out after the first year if they found that they could make just as much money with less effort and less education as the full four-year graduate, regardless of the little good they were doing to humanity, and also regardless of the actual damage inflicted by them in not a few cases.

Undoubtedly the chiropractors constitute a problem which must be dealt with in the near future but I do not believe this is the solution.

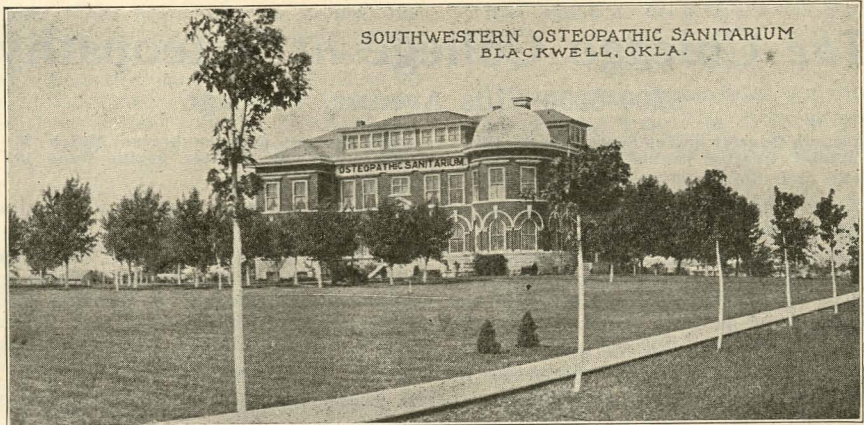
We might however give a chiropractic degree

gratis, together with the D.O., to those who want one at the end of the regular course. By doing it this way there would be no danger to the public from overzealous pickpockets and ignor-amuses. Then if a patient asked anything about chiropractic you could inform him that you possessed a chiropractic degree but considered it of relatively little importance.

I make the above merely as a suggestion and not as a motion.

Believe me, they'd have to give 'em away before I'd get one. I wouldn't give twobits for a dozen of them.—*Winslow M. Kingman, D.O., Arlington, Mass.*

The whale gets into trouble only when he starts to blow.



If the Profession does not support its Institutions who will?

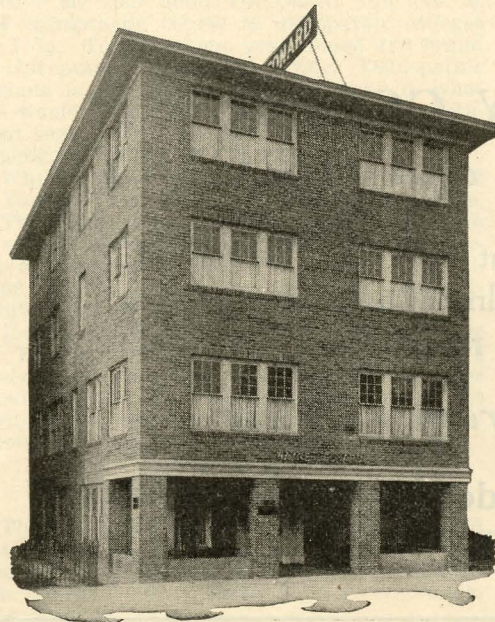
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ATLANTIC CITY

N. J.

Dr. Hugh L. Russell Exonerated After Investigation by His Colleagues

To the N. Y. Osteopathic Society:

Your committee appointed pursuant to the following request of Dr. Hugh L. Russell:

Buffalo, N. Y., October 14, 1921

Dr. Carl D. Clapp

President of N. Y. O. Society
Utica, New York.

Dear Sir:

At a meeting of the Osteopathic Association in Cleveland, a question arose as to the propriety of my conduct as a witness in the Stillman case.

In my absence, my attorney indicated to the

Association that I would welcome an investigation on the subject.

I understand that the matter was referred to your Society by the Association.

As the Society is about to meet in Syracuse, may I not ask that a committee be appointed to hold such an investigation during the Syracuse meeting?

I will appear personally, before such a Committee, and submit all of the facts for its consideration.

Fraternally yours,

(Signed)

Hugh L. Russell.

Beg to report as follows:

In accordance with your instructions, the committee met in the City of Syracuse on October 21 and 22, 1921, and heard the oral testimony of Dr. Russell and his attorney, Mr. Morey, and received from them a transcript of the court records embodying all of the testimony of Dr. Russell in the case of Stillman vs. Stillman.

Also extracts from the judiciary laws, code of civil procedure and case citations of judicial interpretations relating thereto.

From the evidence submitted, we find that Dr. Russell appeared in this case under subpoena from the Supreme Court of the State of New York in secret proceedings held before a referee.

The code of civil procedure, Sec. 834, defines privileged communications between physician and patient as follows:

"Sec. 834. Physicians or professional nurses not to disclose professional information.

"A person duly authorized to practice physic or surgery, or a professional or registered nurse, shall not be allowed to disclose any information which he acquired in attending a patient, in a professional capacity; unless, where the patient is a child under age of sixteen, the information so acquired indicates that the patient has been the victim or subject of a crime, in which case the physician or nurse may be required to testify fully in relation thereto upon any examination, trial, or other proceedings in which the commission of such crime is a subject of inquiry. (Am. by L. 1904, ch. 331; L. 1905 ch. 331.)"

We find that the testimony given by Dr. Russell in this case was at every point by order of the court.

From the evidence it would appear that Dr. Russell vacillated in his testimony as to whether or not the information received from his patient was necessary to enable him to act in the capacity of a physician, where a positive attitude might have saved the divulgence of this information which the court ruled was not privileged and later ruled to be privileged.

But notwithstanding that there were repeated objections by the attorneys, the court did order Dr. Russell to answer the questions propounded, and therefore upon the court, and not upon Dr. Russell, rests the responsibility for divulging this information.

The code of civil procedure seems to define a privileged communication in such a way as to throw a barrier of secrecy around the communications between patient and physician. There is a general belief upon the part of the public and the profession that the communications of a patient to a physician are as inviolate as those to a lawyer or to a priest. It appears,

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The Winter Quarter begins January 3, 1922

The Spring Quarter begins March 25, 1922
The Summer Quarter begins June 19, 1922

Each quarter is twelve weeks in length.

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This College is registered with the New York State Board of Regents. This means that it maintains the high standard required by that Board. It also means that graduates of this College are admitted to the examination for license to practice in New York State and all other states which maintain the New York standard.

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The clinical opportunities of Chicago are unsurpassed.

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The College maintains an excellent Osteopathic Hospital.

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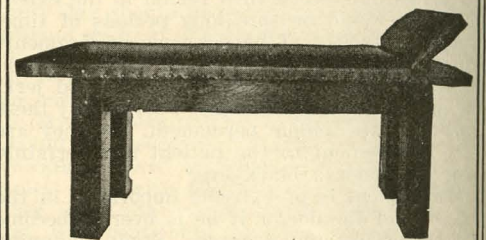
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 DR. JOHN P. SCHWARTZ *Urology & Proctology*
 DR. C. R. BEAN *Staff Physician*
 DR. JOS. L. SCHWARTZ *Staff Physician*
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however, that such is not the case. By court rulings the law has been so interpreted as to give to the court and not to the physician the right to decide whether information he received is privileged. These rulings hold that the court and not the trained physician is the competent judge as to whether communications he received from a patient are necessary to the treatment of the case. In this manner, the barrier of secrecy which the statute seems to throw around such professional communications may be destroyed, and, as in the case under consideration, a privileged communication was given wide publicity, which was later decided to have been a communication which should have not been divulged.

By the very nature of the relation of the physician to patient, it is impossible for the physician or patient to know in advance what portion of the information which is received or given is going to be necessary in the treatment of the case. That which may be deemed important by the patient may be of no consequence, and vice versa. That being true, we feel that the barrier of secrecy should properly cover all communication between physician and patient, to the end that a patient feels free to convey any information to his or her physician with the perfect assurance that no court may be empowered to compel him to divulge any portion thereof.

It would seem therefore advisable to secure such changes in the law which would place the same barrier of secrecy around the communications of a patient and physician as there is in relation to a client and lawyer.

We therefore find the evidence does not justify us in making a recommendation that charges for violating the code of ethics of the N. Y. Osteopathic Society be made against Dr. Russell.

We recommend that this report be spread upon the minutes of the N. Y. Osteopathic Society and that copies of the same be given to Dr. Russell, and be sent to the secretary of the American Osteopathic Association.

Signed by members of the committee:

Geo. W. Riley, Chairman
 Ralph H. Williams
 Grant E. Phillips
 Allen Z. Prescott
 John F. Krill
 Carl D. Clapp, Pres. N. Y. O. S.
 Edwin R. Larter, Sec.
 G. V. Webster, Treas.
 A. B. Clark, Director N. Y. O. S.
 Cecil R. Rogers, Director N. Y. O. S.
 Ralph M. Crane, Director N. Y. O. S.

That Chiropractic Course

Give me your hand, Dr. Gaard, you look at the chiropractic course in osteopathic colleges as I do. To give a one year course and brand it chiropractic is entirely wrong. Osteopathic technic is osteopathy, and osteopathy is what we would expect the colleges to teach the student sent there for a one-year course in chiropractic.

Why teach osteopathy and call it chiropractic?

You can't fool the public by such a procedure.

Think how embarrassing it would be to teach a specific osteopathic adjustment as chiropractic and then be compelled to admit the truth that Dr. Still originated and used that particular adjustive process in the early '70s.

It would be just as logical to give a printer of Bagdad credit for one of Dr. Bunting's articles on osteopathy providing said printer would issue it from his own press and in his own name circulate thousands of copies.—George O. Shoemaker, D.O., Wichita, Kansas.

Publicity Without Qualms

The time is here and passing when we should cut loose from a "thread-bare" code of ethics and go in for publicity of all kinds, so long as it is "honest."—W. A. Settle, D.O., Peterborough, Ont., Canada.

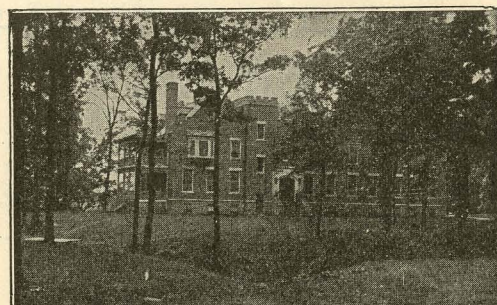
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Under the laws of some States osteopaths are prohibited from using anything of a drug nature.

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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.

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Bashline Trial Determines Osteopathy's Status in Pennsylvania

[From the *Shar on (Pa.) Herald*]

Mercer, Pa., Nov. 1—With the ruling by Judge Jefferson Prather admitting in evidence what is taught at osteopathic colleges at the present time, instead of confining it to what was taught in 1909, the year the defendant was graduated, Dr. O. O. Bashline of Grove City, who is on trial here on the charge of practicing medicine and surgery without a certificate scored heavily.

It was brought out by experts and leading osteopaths of the country who are here as witnesses for the defense, that the practice of Dr. Bashline has been along the lines taught by the leading osteopathic colleges.

Dr. C. C. Teall, dean of the American School of Osteopathy since 1917, from which he was graduated in 1899, formerly president of the American Osteopathic Association and co-author of an osteopathic textbook was called.

At this point came the court's ruling which, it is believed, will prove vital to the defense. This was in effect that evidence would be admitted showing what is taught at the present time in osteopathic colleges, the prosecution holding that only what was taught in 1909, when Dr. Bashline was graduated should be admitted.

It was also brought out at this time that the Pennsylvania Act of 1909 relating to the practice of osteopathy, was amended in 1917 removing the word minor before surgery. The amended act of 1917 under which the State Board of Osteopathy makes its examinations permits examination on all subjects taught in reputable, incorporated colleges of osteopathy. The evidence showed that these subjects cover surgery,

anaesthesia, morphine and obstetrics, which were taught in the various colleges during the years 1919-20 and '21, the period in which the alleged offenses of Dr. Bashline were performed.

Dr. F. L. Taylor, of Des Moines, Iowa, president of the Des Moines Still College of Osteopathy and Hospital, testified along the same lines as Dr. Teall regarding the inclusion in the college course of surgery, obstetrics, morphine and anaesthesia. He said there was no limitation to the practice of osteopathy and that he teaches and preaches this to students. He said there never was a time that certain medicines were not used and that diagnosis and the administering of remedies were also taught. He said he did not regard the general practitioner as being capable of practicing the manipulations of osteopathy, nor would he regard the osteopath as competent to practice general medicine in the accepted sense, but that the latter was competent to administer certain remedies.

Today's session of court attracted another capacity crowd and the keenest interest was shown throughout the proceedings. There was evident sentiment in favor of the accused, although there was no demonstration on the part of the big audience. On the outcome of this case will largely depend action on the other like cases listed.

It is expected that the case will go to the jury this afternoon, as when noon was reached the attorneys for the defense retired for a consultation and it is believed they will rest their case.

Technical evidence by osteopaths was given. Dr. Bashline's diploma from the Philadelphia College of Osteopathy, certificates of membership in various osteopathic organizations and other routine details were presented.

Dr. F. H. Rossman, associated with Dr. Bashline since 1915, a graduate of the Osteopathic College at Kirksville, Mo., founded by Dr. Still, founder of osteopathy, was the first witness. Handwriting on prescriptions said to have been written by Bashline was identified by the witness with the comment, "I would say it was."

Dr. Ed C. McGregor of Chicago, who is also a graduate M.D. of the surgical faculty of the Chicago College of Osteopathy, and Dr. Arthur M. Flack, dean of the Philadelphia College of Osteopathy since 1911, both testified along similar lines. Dr. Flack said that Dr. Bashline had been connected with the Philadelphia College of Osteopathy for several years as a teacher in surgery and obstetrics.

The Commonwealth rested its case a few minutes before the adjournment of Court after a half day spent in the examination of witnesses, some of whom had been patients of Dr. Bashline, others of whom had relatives who had been treated by him, and nurses employed by the defendant.

Miss Cunningham, a trained nurse, said that she had been serving as a nurse since 1906, and that she had been employed at different times on cases treated by Dr. Bashline. On cross-examination it was brought out that, as an experienced nurse, Miss Cunningham had chosen Dr. Bashline, with whose work she was familiar, to operate on her own mother. When the witness answered these questions in the affirmative there was a ripple of applause and a general giggle among the audience which, obviously throughout the trial was sympathetic to the defense.

Miss Beth Thompson of Grove City, employed as a substitute nurse by Dr. Bashline, in her eagerness to give testimony favorable to the defendant, caused the defense some embarrassment. She was turned over to the defense for cross-examination.

"Is it not a fact that you have witnessed several hundred operations performed by Dr. Bashline?"

"I don't recall the number, but they were all successful and none of them went to the morgue," she responded.

Jury Finds Dr. Bashline Guilty

Mercer, Pa., Nov. 3.—Jury in case against Dr. O. O. Bashline yesterday brought in a verdict finding him guilty of illegally practicing medicine and surgery. Case will be appealed.

Ohio's Attorney General Gives Status to Osteopathy

Columbus, O., Nov. 8.—The Attorney General of Ohio has rendered an opinion settling a long and bitter controversy in Ohio, which will have a far-reaching effect as a precedent in many other states. He rules that an osteopath is a physician without limitation as to what diseases he may treat and that he may sign death certificates and all other such documents.

The opinion was requested because of the refusal of the State Registrar of Vital Statistics to accept a death certificate signed by an osteopathic physician. This decision is overruled by the opinion of the Attorney General who says in part:

"The osteopathic physician who complies with the educational qualifications of the General Code which requires of an osteopath a preliminary education as is required by law of applicants for examination to practice medicine and surgery, and which enumerates the subjects in which he is examined by the State Medical Board, and who passes such examination, receives a certificate from such board. Such certificates shall authorize the holder thereof to practice osteopathy and surgery in the state, but shall not permit him to prescribe or administer drugs, except anesthetics and antiseptics.

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Ready—New “Winter Disease Number” of “OH” for December !!!

It's a fine presentation of osteopathy for the prevention and cure of the whole round of winter's diseases that we give in December “Osteopathic Health.” This is in harmony with our new policy of making the contents of the patient's little magazine as full of news interest and timeliness as regards its subject matter as possible. We will feature diseases of the season all through the year from now on in this monthly magazine. Anybody who reads this crisp and sparkling article will not have any doubt about what to do for any winter ills, if he or she admits osteopathy at all to a place in the firmament of healing. This article comprises half the December issue. Look at what follows for the other half.

“Postural and Spinal Defects in Children, and Their Treatment by Osteopathy” also in December “OH”

This charmingly lucid and well written article by Dr. B. P. Mansfield, of De Kalb, Ill., occupies half of the December issue of “Osteopathic Health.” We combine it with the excellent lead article of this month's magazine on the acute ills of winter in order to carry the news at one and the same time that osteopathy is just as wonderful a treatment for structural diseases and chronic diseases as for acute infections.

Both sides of your work can be presented successfully under one cover just as well as to

teach first one phase of osteopathy, and then another. The same reader's eyes may never fall upon the “other” explanation: so here we give you a double-barrelled issue and teach that we do acute and chronic work both, and with equal ability.

You will admire Dr. Mansfield's article very much and we know you'll want to use it if you but read it. It has the advertising merit of dealing with the welfare of school children and hooking up well with the present work of the Society for the Prevention of Spinal Curvature and its movement to establish child clinics and to award \$1,000 for the most perfect spine found in all America.

Make your list out at once to include every former patient on your list and all others who should be educated and let us send them this “double-barrelled number” at once.

“What Constitutes an Osteopathic Treatment” for January

We take pleasure in announcing that the January issue of “Osteopathic Health” will contain a very comprehensive explanation of “What Constitutes an Osteopathic Treatment.” This entire number is given over to the elucidation of this practical and important subject and it is done in such a way as to convince the reader that osteopathic treatment includes very much more than a few manipulations.

Dr. John A. Van Brakle is the author of this splendid educative number and it is in his best vein. John A. makes it plain how important a part of treatment diagnosis is before any treatment is really given, and all that the proper and exhaustive scientific diagnosis for various kinds of cases may involve under osteopathic care. He makes it clear that regulation or

habit and diet are often important parts of cure, too. And it tells all the various things osteopathic care may involve in a case.

You will like this January “OH.” Every former patient and present patient of yours should have it. Watch for it.

“Most Diseases Are of Spinal Origin” for February!!

This parent of all osteopathic campaign documents and chief educative pamphlet of the profession for twenty years will be repeated for the last time as an issue of Osteopathic Health next February.

After this reappearance as a current issue of the magazine—which has been arranged for at the urgent request of many contractors who want to use it in quantities now—this peerless campaigner, which has converted hundreds of thousands to the sanity of osteopathic treatment, will take its place at the head of the list of our new series of “Brochures” and will never appear again within the covers of “Osteopathic Health.”

This is in accordance with our new policy announced to present only new and original articles every month in future issues of “Osteopathic Health,” and thus give your patients and public who read it always something novel and interesting, which they may never, by any sort of chance, have seen anywhere else before. It is a fine way to keep them interested—this policy of newness and human interest articles, and “Osteopathic Health,” thus conducted as the patient's magazine, will prove of even greater benefit to your practice than ever before.

Meanwhile be revising that mailing list of yours, friend Wide Awake, and put on all the live names you have got in your files to get the benediction of this great message for osteopathy—a historic document surely which was first issued by HSB twenty years ago, at the time that he dedicated his pen and brain to osteopathic propaganda.

This article, with its historical preface explaining its age, is the best piece of campaign literature possessed by osteopathy today to establish the easy priority of osteopathy in the field of adjunctive healing, and to show the chiro claims to be untrue and a fabric of appropriation and imitation. Give this classic preaching of osteopathy a good send off when it appears, friends, and use it as it deserves for the good of the cause.

[All Ready to Run in Your Home Newspaper]

How to Prevent and Cure Winter's Ills Without Drugging

Osteopathy's remarkable success in the prevention and cure of winter's diseases is the timely leading article in December's issue of “Osteopathic Health,” the lay magazine which presents so many up-to-date ideas for warding off sickness and rebuilding health. This article is entitled “How Modern Science Applies New Methods to Rout the Diseases of Winter.” In a word, these new methods are the substitution of manipulative adjustments to normalize body structures instead of giving drugs, the old-time way of healing that is now passing into swift decline.

This article recounts in brief summary, based upon statistics, the wonderful human salvage work of the osteopathic physicians all over this land from metropolitan city to hamlet and remote countryside during the terrible flu-pneumonia epidemic of 1918-19. It is evident from this now historic record of life saving that the osteopaths saved many thousands of human lives that would have been sacrificed if their patients had gone untreated or had been under drug treatment. This cannot be a matter of opinion only, for the statistics are authoritative and were collected by the medical profession and government officials on the one hand and

Ready for Use in your home town newspaper. The “copy” below is for display space. Have your printer follow style of composition.

“Osteopathic Health” for December

How Modern Science Applies New Methods to Rout the Diseases of Winter

Its Victory Over Flu and Pneumonia; It Is Good for All Ordinary Ills; It Is a Broad System of Therapy; How Osteopathy Works with Nature; Secures Nervous Integrity; It Increases Resistance to Germs; It Helps the Body Make Antitoxins.

Postural and Spinal Defects in Children, and Their Treatment by Osteopathy

Great Field for Osteopathic Usefulness; Fitted as Specialists in This Field; Mechanical Distress Upsets Tissue Chemistry; Two Main Causes of Spinal Curvature; Infantile Paralysis and Pott's Disease; Many Incipient Defects Go Unnoticed; Lost Motion Between Vertebrae Constitutes Disease; Many Troubles Start in the Pelvic Joints; Osteopaths the Best Specialists in Spinal Troubles; Human Efficiency Depends on the Back.

The above is the title contents of “Osteopathic Health” for December. A copy of this little magazine will be mailed free of charge on request. Address:

DR. _____, _____

by the American Osteopathic Association on the other. Here is what the figures show.

While medical physicians lost a general average of not less than 5 or 6 percent of their epidemic flu cases and in some cities deaths ran as high as 27 percent, the osteopathic profession for the whole country averaged a loss of but one-fourth of 1 percent in over 110,000 reported cases.

In epidemic pneumonia medical physicians had a mortality follow their best efforts of 33 percent by their own figures. In some places, as New York City, the mortality reached 60 percent. The osteopathic losses were but 10 percent in 6,258 cases. Surely these figures indicate an immense superiority for osteopathic therapy over the old and new drug therapies.

Such successful work by the osteopaths during this epidemic brought this younger science of healing prominently to the front for the first time in many cities. Indeed, it is scarcely too much to say that this epidemic really put osteopathy on the map as never before.

It is not strange, therefore, that the general public learned in that epidemic to look to osteopathy for care and cure in all the diseases of the winter season—such as coughs, colds, sore throats, grip, bronchitis, pleurisy, pneumonia, ear-ache, neuralgia, lumbago, sciatica, "rheumatism," poor circulation, etc. This article in the December number of "Osteopathic Health" explains a great deal about the prevention and cure of all these evils of winter by this modern and successful osteopathic method of adjustive healing—a sort of cure that treats the body, itself, not the disease that afflicts the body.

Another notable article in this month's magazine is on the subject of "Postural and Spinal Defects in Children, and Their Treatment by Osteopathy." This is a very modern presentation of this whole subject which is of such vital concern to school children. Pain and stiffness in the spine, spinal curvature, infantile paralysis, Pott's disease, slipped or subluxated vertebrae and ribs and incorrect positions of the pelvis are all explained. Lost motion between vertebrae is explained as a disease producer. The osteopathic lesion is defined and its cure by adjustment is explained. This is a very illuminating article for the non-professional reader.

You may have this December copy of "Osteopathic Health" free for the asking, and if it interests you it may be received by you complimentary for a year without any obligation on your part by merely requesting it of Dr. _____ of _____ A telephone or a postal request will bring the little journal to you.

Lane Brochures Still in Print

"Osteopathy in the Inflammatory Diseases," by the late Professor Michael A. Lane, Brochure No. 8, Undated. Price 100 copies, \$5.50.

"Osteopathy Potent Where Serums and Vaccines Fail," by the late Professor Michael A. Lane, Brochure No. 16, Undated. Price 100 copies, \$5.50.

SHALL WE TAKE YOU INTO THE FAMILY?

Nothing succeeds like success. Identify yourself with the Bunting publishing business as a stockholder. It's easy for you and gives you fine rewards. See our \$10 per month per share Acquisition Plan outlined on page 3.

WANT A PIECE OF BUNTING STOCK?

Have you ever thought you would like a piece of the Bunting publishing concern's stock? Well, attainment is not impossible. We are inviting the profession to take \$30,000 of it. About \$25,000 is as yet unspoken for. It's on Page 3.

Current Issues of "Osteopathic Health" on Sale

"How Modern Science Applies New Methods to Rout the Diseases of Winter." Also "Postural and Spinal Defects in Children and Their Treatment by Osteopathy." December issue. Price 100 copies, contract, \$6.50; single order, \$7.50.

"Somebody's Everyday Ills—Perhaps Yours Is Here!"—November issue. Price 100 copies, contract, \$6.50; single order, \$7.50.

Lower prices on larger quantities. Write for complete price list and information sheet.

THE BUNTING PUBLICITY SERVICE

for
OSTEOPATHS
Waukegan, Illinois

Standard Undated Laity Brochures Available

"The Human Body Runs Like an Automobile."—Brochure No. 60. Price 100 copies, \$5.50.

"The Body's Four Grand Systems of Elimination."—Brochure No. 59. Price 100 copies, \$5.50.

"The Osteopathic Specialist in Diseases of Ear, Nose, Throat and Eye." Brochure No. 58, undated. Price, 100 copies, \$6.50.

"Mechanical Causes of Woman's Ills and How Osteopathic Adjustment Cures Them." Brochure No. 57, undated. Price, 100 copies, \$5.50.

"Why Diseases of Stomach and Digestive Organs Develop"—Brochure No. 56, undated. Price, 100 copies, \$5.50.

"An Osteopath's Explanation to a Health Seeker." Brochure No. 54, undated. Price, 100 copies, \$5.50.

"Questions Often Asked About Osteopathy and Their Answers." Brochure No. 53, undated. Price, 100 copies, \$5.50.

"Osteopathy in the Inflammatory Diseases." By the late Professor Lane. Brochure No. 8, undated. Price, 100 copies, \$5.50.

"A General Sketch of Osteopathy." Brochure No. 51, undated. Price, 100 copies, \$5.50.

"Osteopathy Potent Where Serums and Vaccines Fail," by Michael A. Lane. Brochure No. 16, undated. Price, 100 copies, \$5.50.

"Most Diseases Are of Spinal Origin." Brochure No. 36, undated. Price, 100 copies, \$5.50.

"Osteopathy as a Science," by John Comstock, D.O. Brochure No. 37, undated. Price, 100 copies, \$5.50.

Price in 500 or 1,000 lots \$5.00 per hundred.

THE BUNTING PUBLICITY SERVICE
for
OSTEOPATHS

The Lane Book on Osteopathy

"A. T. Still, Founder of Osteopathy." Includes the Whole Ten Original Brochures on osteopathy by the late Professor Michael A. Lane; bound substantially in cloth covers; 217 pages; with comprehensive Table of Contents and Index. Price \$3.00, postage prepaid, to any address. Edition is nearly sold out. Got your copy yet?

No osteopath's home bookshelf or office center table can be complete or up-to-date without this book. It is invaluable as a standard explanation of osteopathic science for all public libraries, as well as for the information of fairly educated patients. What price wouldn't osteopaths have paid for such a book, had it been available to them ten years ago!

THE BUNTING PUBLICITY SERVICE
for
OSTEOPATHS

"Harvest Leaflets" Have a Potency All Their Own

It is the supreme merit of our line of 28 different "Harvest Leaflets," ranging from one to eight pages each, that they are the easiest, quickest and cheapest advertising media of high quality that one can put out to special mailing lists. The cost per thousand persons reached is so low that any practitioner really interested in building up practice or osteopathic prestige in his own field can afford to mail these out in series every week or ten days. The results from using them are found to be so good that any vigorous campaign of this sort, entered into for a period of three to six months, ordinarily pays for itself from new patients obtained before the campaign has entered well into the second month.

The proper strategy involved in the use of "Harvest Leaflets" is to regard them as the low-cost, wide-distribution, quickly-repeating medium for attracting first attention and producing inquiries. All inquiries so produced should at once be put on one's regular mailing list for education by *Osteopathic Health* and selected numbers of our "Standard Laity Brochures." It is usually an easy matter to find out what an inquirer's special interest in osteopathy may be—that is, what and whose disease it is hoped to cure—and then it is only common-sense follow-up science to select and supply such brochures as most nearly cover that subject.

Any one who wants quick and extensive results will be pleased at the productiveness of this system of advertising. And the charm of it is that it benefits osteopathy as a whole by *benefitting most the osteopath who puts this evangelization machinery in motion*. In other words, *the fellow who spends the money gets it back with a profit besides*. That proves quite satisfactory, as a rule, to the one who shows the enterprise.

HELP MAKE THE WHEELS GO ROUND

Would you like to own some Bunting Preferred Stock that will pay you 8 percent and give you a definite part in making the wheels go 'round? It's easy. See Page 3.

Laity Brochures a Separate Line from "Osteopathic Health"

Now we are in possession of our own fine new printing plant we take pleasure in announcing an important change of policy as regards the issuance of our "Standard Brochures for the Laity." These are to be printed separately from "Osteopathic Health" in future, and will be republished as fast and as far as the profession may require them for its purposes. Such Brochures (with possibly but one or two further repetitions, already scheduled) will not find reissuance again within the covers of "Osteopathic Health."

When such classics as "Most Diseases Are of Spinal Origin," "The Osteopathic Catechism," "The Body's Four Grand Systems of Elimination," "Doctor Still as a Medical Thinker," etc., are to be printed they will be published in separate form under distinctive covers as Standard Laity Brochures. Ultimately we should be able to supply all our classic brochures in this form—at least, all of them for which there exists perennial demand. We cannot get to this all at once, of course, but we shall approach it little by little as we find time.

This means that we shall now be able to realize our dream of years (which production costs hitherto have made impossible), namely, to make of "Osteopathic Health" truly a live journal of current interest, full of seasonal disease discussion and editorials on timely health topics—the organ par excellence with which to educate one's patients, as well as interest and

convert the lay public—and to leave the reprinting of articles of merit to go into a separate Brochure series.

About every third issue of "Osteopathic Health" will contain a *brand new brochure*, each of which will be as fine and strong as any that have ever been put out by us. These will all be fresh and new. As the best of these new brochures develop permanent demand for themselves they will be reissued if, at all, only as numbers of the "Laity Brochures" Series.

CASH PAID FOR ACCEPTABLE MANUSCRIPTS

We are in the market for contributions that explain osteopathy, its theory and practice, its diagnosis and cures, in simple plain English suitable for converting the lay reader and educating osteopathic patients. Such manuscripts must be suited for the purposes either of "Osteopathic Health" or "Harvest Leaflets" must be typewritten on one side of the paper only and be either single or double spaced between lines. The total number of words by actual count must be given on each article and the number of words on each separate page.

FOR "OSTEOPATHIC HEALTH"

Brochures or other manuscripts offered as suitable material for making up one entire number of this magazine must contain approximately from 3,600 to 4,000 words. We supply the subheads for long articles.

The preference is for short articles explaining a variety of diseases rather than for one long manuscript. Long articles have to possess some definite theme, show artistic unity and logical construction. But any practitioner who is interested in his practice, even though without possessing literary gifts may write the most acceptable sort of simple short articles containing one or more good ideas or dealing with particular diseases, diagnoses and cures. We are able to supply the literary revision, if it be needed, to polish good plain recitals of fact.

FOR "HARVEST LEAFLETS"

Manuscripts offered for "Harvest Leaflets" should conform to one or another of these sizes:

- 1 page "Harvest Leaflets" average from 100 to 125 words.
- 2 page "Harvest Leaflets" from 250 to 300 words.
- 4 page "Harvest Leaflets" from 660 to 750 words.
- 8 page "Harvest Leaflets" from 1,700 to 1,750 words.

So-called "fine writing" is not wanted. Good plain simple English and truth telling, based upon an underlying understanding of the psychology of "selling" osteopathy to the public is what we are after. What have you to offer Doctor? Have you ever tried your hand?

HAVE YOU A MATURING LOAN TO REINVEST?

If you are fortunate enough to have money out at interest on first-mortgage real estate loan, or otherwise, about to mature, we would like to bring to your attention the attractive features of our limited offering of 8 percent Preferred Stock, Cumulative, in The Bunting Publications, Inc.

This stock issue of \$30,000 is preferred as to earnings as well as assets, so that no dividends can be paid on Common until the Preferred dividend payments of 2 percent quarterly are all met. Bunting Preferred Shares sell at \$100 par and are redeemable at 105, so that they certainly pay you in excess of 8 percent per annum and will probably pay you about 9 percent. See our advertisement giving fuller information on Page 3 of this issue.

Remember, too, that if you put your money in Bunting Preferred Shares it is reinvested by us in the printing machinery that is grinding out national publicity for osteopathy: so that you and your profession alike get a direct bene-

fit from the use made of your money in addition to the good interest rate that you receive.

Furthermore, you are helping us, your professional boosters—helping us very much, in fact—by such a course, for we've got to pay the balance due on our new machinery equipment and, having gone our limit to get as far along as we have, we are now compelled to sell our Preferred Shares to raise the necessary money.

Can you help us finish up this good enterprise in fine style?

We invite correspondence with osteopaths who are of the investment class and will be glad

to give any additional information or assurances you may desire.

WE REGARD IT AS A PRIVILEGE

For the first time in its 20 years history the Bunting publishing business is inviting its customers to become Preferred Share holders. Page 3 shows the way.

Tested for 16 Years

I firmly believe "Osteopathic Health" to be the most efficient means for assuring success in practice. I have used the magazine effectively since 1905.—Dr. J. L. Callahan, South Bend, Ind.

"HARVEST LEAFLETS"

to Reach the Multitude and Arouse the Disinterested

Our new line of introductory and supplementary printed leaflets is designed to enable osteopaths to do wider and more systematic campaigning at unprecedentedly low rates per thousand (or per hundred) of names covered. These informal messages make easy and economical the undertaking of broadcast distributions and engineering systematic rapid-fire follow-ups where the cost of using a magazine would be felt as a deterrent factor. You can economically and speedily cover entire lists of any size by this medium and command instant attention. The harvest will be proportional to the sowing. Let us tell you how to plan and conduct such campaigns. Here is the splendid assortment of subjects offered you:

4-Page Harvest Leaflets

- | | | |
|--|---|---|
| <p>No.
1. What Doctor Shall I Employ?
2. Disease Caused by Mechanical Pressure.
3. How Osteopathic Patients are Treated.
4. Getting Well All Over at the Same Time.
5. Building Up Weak Throats.
6. A Chiropractor at Work.
28. The Best Spring Tonic.</p> | } | <p>Price \$10.00 per thousand, with or without your professional card.

\$1.25 per hundred.</p> |
|--|---|---|

6-Page Harvest Leaflets

- | | | |
|--|---|---|
| <p>No.
7. What Is Osteopathy?
8. A Word to Former Patients.
9. What Osteopathic Fingers Will Do.
10. Neuritis From a Slipped Rib.
13. Chiropractic Kleptomania.
24. Neuralgia and Headaches.</p> | } | <p>Price \$12.50 per thousand, with or without your professional card.

\$1.50 per hundred.</p> |
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8-Page Harvest Leaflets

- | | | |
|---|---|---|
| <p>No.
14. An Explanation of Osteopathy.
(As stated by the London Times).
15. Why the Spine Is the Basis of Health.
16. What Osteopathy Does for Women.
17. Osteopathic Aid in Pregnancy and Confinement.
25. Osteopathy in Obstetrics.</p> | } | <p>Price \$18.00 per thousand, with or without your professional card.

\$2.00 per hundred.</p> |
|---|---|---|

1-Page Harvest Leaflets

- | | | |
|--|---|--|
| <p>No.
18. Habit in Suffering.
19. The Osteopath's Point of View.
20. An Osteopath.
21. The Nine Modern Wonders.
22. Osteopathy Is Not a Remedy.
23. Dr. Atzen's Definition of Osteopathy.
26. Pain.
27. Insomnia.
29. Sciatica.</p> | } | <p>Price \$5.00 per thousand, with or without your professional card.

\$0.75 per hundred.</p> |
|--|---|--|

Imprinting your professional card is FREE on all orders bought in thousand lots. On any number (or assortment) from 100 to 900 it costs \$1.00 extra. These folders are sized to go in an ordinary letter envelope.

These osteopathic "Harvest Leaflets" do not take the place of campaigning by Osteopathic Health, but supplement it. They are scaled for easy, economical, wide distribution in units of thousands instead of hundreds, and are adequate to supply your want of something effective that will stir up quickly numerous inquiries about osteopathy. You should use them as "attention-getters". As each new inquirer is heard from you should automatically put him on your mailing list to receive Osteopathic Health, the magazine, monthly for a year's period. That is campaigning as scientific propagandists of any worthy cause would do it. We have only begun to fight for Osteopathy!

The BUNTING PUBLICATIONS, Inc. - Waukegan, Ill.

Osteopathic Specialists

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Central 3715
Chicago

Dr. Glenn S. Moore
Eye, Ear, Nose and Throat

Dr. Nettie M. Hurd
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Detailed diagnostic report and complete instructions as to advisable treatment returned by mail to physicians.

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Specializing in
Diseases of Gastro-Intestinal
Tract

Consultation and Referred Cases
given special attention

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PHILADELPHIA, PA.

"Wonderfully Well Pleased" with "A. T. Still; Founder of Osteopathy"

Dr. O. R. Meredith,
Nampa, Idaho

April 9, 1921

Your book, "A. T. Still, Founder of Osteopathy" by M. A. Lane, came this morning and I am wonderfully well pleased with the appearance of the same.

Your "Foreword" speaks well for the volume. The contents, so well paged, as well as your "Index" are very commendable. A person should be able to get at any subject that he wishes from this. The book is handsomely printed and aptly bound.

For one, I pledge myself to buy more osteopathic books than ever in the past.

Yours for an osteopathic literature,

O. R. MEREDITH, D.O.,
President of W.O.A.

Get your copy before it is too late!

Price \$3.00

The Bunting Publications, Inc.
Waukegan Illinois

Likes the Woodall Proposal

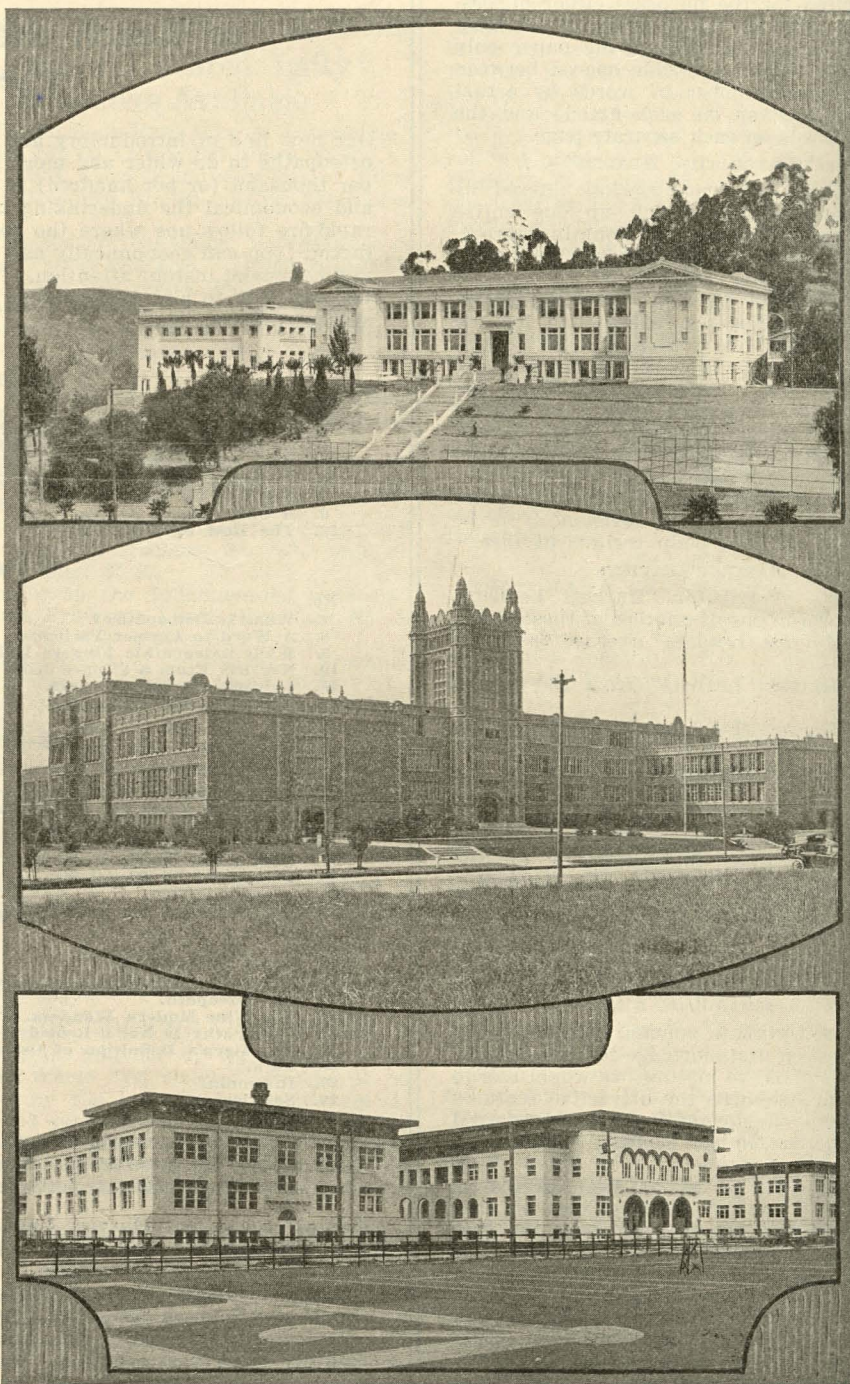
I think Dr. Woodall has hit on the right idea in solving the *chiro* menace, and I would only add this to that plan: If it is right to teach chiropractic in our standard schools, then it would be all right for practitioners in the field to hook up with some of the *chiro*s who are giving folks osteopathy, pure and simple, and telling them that it is taught in their schools (which we know is not true.) Look at this from all angles and see if I am not right. I am sorry to add I had to resort to *chiro* adjustment after taking treatments from some of our profession." Now, doctor, don't think I am knocking.

I don't even own a hammer! Such things as I have been telling you in confidence are what is keeping osteopathy from the fore-front. Perhaps the same thing has happened in your experience, and with many of us, but if we have the "vision" of Father Andrew we will set the mark a little farther on and "hop to it"—Roy B. Ferguson, D.O., Redfield, S. D.

INVESTING SAVINGS WISELY

Any osteopath who can save ten dollars a month can own a share of Preferred Stock in The Bunting Publications, Inc. Wouldn't you like to be one of us? See Page 3.

Views in the Next Convention City



"Los Angeles has, perhaps, the best school system of any city in the world and its buildings are a work of art and efficiency. Its public schools number eight hundred and its private schools and colleges number one hundred and fourteen.

The picture in the center is the Administration Building in one of the High Schools and is located a few blocks from the \$5,000,000 Ambassador Hotel, our headquarters July 3 to 8, 1922."

T. J. Ruddy, D.O., Chairman Publicity Organization

IN D.O. LAND

Dr. Fechtig Back on the Job

Dr. Louis R. Fechtig of Jamaica, New York City, is back in his office after spending two and a half months with his family touring the state of Colorado.

Southeast Missouri Osteopathic Assn. Meeting

The Southeast Mo. Osteopathic Association held its semi-annual meeting at Cape Girardeau, Mo. Oct. 12th and 13th. Dr. A. G. Hildreth of Macon, Mo. was the chief speaker. The film, "World's Greatest Factory-Man," was given for public exhibition. At least two-thirds of the osteopaths of Southeast Mo. were present, much enthusiasm being displayed. Interesting papers by the members and many good clinics constituted the program. The next meeting will be held in Poplar Bluff, April, 1922.—Anita E. Bohnsack, D.O.

Louisiana State Board Elects New Officers

The annual meeting of the Louisiana State Board of osteopaths was held October 22nd at the office of Dr. Henry Tete. Ten applicants for right to practice osteopathy in the state were examined and licensed. Officers elected were: president, Dr. Paul W. Geddes, Shreveport; secretary, Dr. Henry Tete, New Orleans; treasurer, Dr. Coyt Moore, Baton Rouge. Many matters of importance, legally and legislatively were considered and disposed of. In the afternoon of the same day the Louisiana Council of Defense and Education held a meeting and elected a set of officers interlocking with that of the State Board.

Illinois News

The second District of Illinois Osteopathic meeting was held in Dixon, October 6th at the Y. M. C. A., following a luncheon at the Nachusa Tavern. The following officers were elected: President, Dr. Deeming, Sterling; Vice-president, Dr. E. P. Wright, Belvidere; Secretary and treasurer, Dr. Elizabeth Shupert, Rockford. Program—Dr. E. P. Wright, Belvidere—Osteopathic Technique; Dr. Wise, Rockford—The Hospital Situation; Dr. Trombridge, Dixon—Synopsis of the recent course of the C.C.O. There was a large attendance and the program was very good—Elizabeth Shupert, Secretary.

Look Out For This Man

A certain individual, claiming to be Dr. D. D. Howe of El Paso, Texas, on August 4th, 1921, called at the office of Dr. Eugene Pitts of Mendota, Illinois,

asked for and obtained a loan of \$2.00, after telling a hard luck story to the effect that "he was robbed of everything on his person and \$65.00 in cash while boarding a train at Chicago on his way from the AOA convention." Dr. Hyde of El Paso in response to a letter of inquiry from Dr. Pitts states that no such party as Dr. Howe is known in El Paso and that Dr. Pitts' letter was one of many received by him from different D.O.'s, in the section of the country (Illinois and adjoining states) which the pseudo Dr. Howe seemed to be working pretty thoroughly.

Casper, Wyoming, Osteopaths Form Association

As you perhaps know, the osteopaths of Wyoming are few in number—we hope to have many more in the future. However, the three of us here in Casper, got together last night, in Dr. Davis' office and started something. We formed the Central Wyoming Osteopathic Association, electing Dr. Caroline C. Davis, president and Dr. C. A. Sanford, vice-president. I drew the "house-keeping" job. We expect to hold monthly business meetings, also to get together one evening each week to discuss problems and matters of mutual interest. One thing we want to do is get things shaped up and ready to make a determined effort to pass an osteopathic bill through the next legislature. Anything you can give us on legislation will be appreciated. Dr. Davis recently passed the Wyoming board after a good stiff examination.—L. L. Wade, D.O., secretary.

A Method for Preventing the Absorption of Intestinal Toxins

"Keep the colon toxins from being absorbed by the body," is the urgent appeal of the modern authority. This is almost tantamount to saying: "Keep the mucous membrane of the colon intact," for it is through abrasions in this membrane, hindering the outflow of mucus into the colon, that the absorption of toxins from the fecal matter takes place. To overcome such a condition, Nujol is freely used by the profession. It retards the absorption of poisons by preventing their contact with the living tissues. It also exerts a lubricating power, softening the stools to permit easy and frequent evacuation. In addition to this, an important function of Nujol is the absorption of toxins, retaining them in the fecal mass until expelled.

Nujol is readily accepted by the most "finicky" patient, because it is absolutely tasteless, odorless and of a crystal clearness.

Southwest Iowa Osteopathic Association Meeting

The Southwest Iowa Osteopathic Association meeting was held in Council Bluffs the early part of October. This was the best meeting ever held in the district. Papers were read on "Renal Tuberculosis," "Appendicitis both operative and non operative" and "Child Welfare of the present and future" by Drs. Swartz, A. E. Hook, and C. W. Johnson respectively. Films of the Des Moines College of Osteopathy were shown and kept all interested to the last minute. Dr. Gilmour, one of the National Committeemen was present and spoke along "Legislative Lines" and congratulated the members of the association on the law in force in Iowa which he termed "the best of any state in the Union." The success of the meeting depended very largely upon the efforts of Dr. L. E. Wagoner of Creston, president of the district association.

New England News

Drs. S. L. and Alice Gants, 721 Broad St., Providence, R. I., entertained a week-end party at their home on October 22nd and 23rd. Part of the time was devoted to an osteopathic conference, plans being discussed and outlined for the New England Convention which will meet in Providence next May. Rev. A. W. Connett treated the crowd with a most illuminating and inspirational address on Applied Psychology. Dr. S. L. Gants is becoming widely known for his skill in the culinary line as well as his ability as an osteopathic physician. He can prepare a salad that would make the chef in any royal house green with envy. The feast enjoyed by the guests therefore was of a three-fold character, osteopathic, psychological and gustatory, each phase being superb. Those present in addition to the host and hostess, Dr. S. L. and Dr. Alice Gants, were Dr. Geo. W. Goode, Boston Mass.; Dr. Geo. W. and Dr. Eva G. Reid, Worcester, Mass.; Dr. H. T. and Dr. Nell C. Crawford, Lexington, Mass.; Dr. Helen G. Sheehan and Miss Marie Sheehan, Boston, Mass.; Dr. and Mrs. C. G. Hatch, Lawrence, Mass.; Dr. and Mrs. W. C. Bryant, Greenfield, Mass.; Col. A. G. and Dr. Victoria Shattuck, Nashua, N. H.; Rev. and Mrs. A. W. Connett, Springfield, Mass.; Dr. and Mrs. W. B. Shepard, Wickford, R. I. Dr. Shepard is president of the N. E. O. A.—G. W. Reid, D.O., Worcester, Mass.

Washington News

In the annual October election of the King County Osteopathic Association the following officers were elected: President—Dr. Elizabeth Hull Lane; 1st Vice-president—Dr. M. D. Young; Secretary—Dr. Ida Rosencrans; Treasurer—Dr. Leonora Grant; Cor.-Secretary—Dr. Roberta Wimer-Ford. The King County Osteopathic Association held eight regular meetings during the past year, three special meet-

ings and went enmasse to Tacoma and Everett and had three special banquets. Twenty-six members in this organization. 11 women who attended 64 times, 15 men who attended 68 times. King County Osteopathic Association's secretary, Dr. Ida Rosencrans was appointed to represent this organization in the Tax Reduction Council of Seattle, which is seeking to do real things for this city. Dr. Rosencrans was elected one of five trustees of the Public School Protective League, an organization designed to "protect the public schools from political, medical and religious influences." These five trustees control and decide the activities of the league. To date, as a result of their work, the nursing force in the public school has been reduced from 23 to 12, one assistant M.D. was dropped from the school examining board and the salary of the other M.D. greatly reduced.—Robert Wimer-Ford, D.O., Cor.-Secy.

Minnesota State Osteopathic Association Meeting

The Minnesota State Osteopathic Association has closed its twenty-third annual meeting, undertaking a more progressive campaign in the interests of the profession than has ever before been launched in the state. A legal department has been established, with an able attorney in charge, for the purpose of advising on legal matters and to provide proper defense in event of prosecution. A press bureau has been organized with the idea of supplying permanent propaganda material through the state. The bureau began work by sending out news stories before and after the convention to every newspaper in Minnesota. It was voted to make all future programs as a sort of post graduate course for members, with diagnostic clinics and demonstrations of technique in charge of "men who know." The secretary's office, hereafter to be a paid institution, is to edit an osteopathic bulletin to provide news of progress to members, and also publish a membership directory. Annual dues were raised to \$20 a year, the members voting to follow the example of the successful associations of Iowa and Illinois and make dues sufficiently large to obviate the need for special assessments. Dr. R. M. King, Minneapolis, was made chairman of a Bureau of Clinics and Statistics and Dr. W. G. Sutherland, Mankato, was put in charge of the Bureau of Health and Educational Development, which department will have an interesting program of work to offer soon. A revision of the constitution, required to put over the enlarged scope of activity, will be in charge of Dr. S. H. Stover, Northfield. Mr. L. U. Miller, Winona, chairman of the membership committee, has undertaken to sell the idea of membership to every osteopath in membership and so strengthen the machinery of the organization. "For some time we have been aware that something radical must be done to preserve the profession's rights and the standing of the individual," says Dr. L. S. Keyes, Minneapolis state chairman of the examining board. "Now we have marked the beginning of a resurrection of osteopathy in Minnesota. We have at last cast aside the neighborhood way of doing things and have stepped out with a state-wide program on sound business principles. Never have we been subjected to such injustice and persecution by organized medicine as since our law passed in 1903. It is necessary to meet the issue with a determination to secure our just rights

Statement of the ownership, management, circulation, etc., required by the act of Congress of August 24, 1912, of *The Osteopathic Physician* published monthly at Waukegan, Ill., for October 1, 1921, State of Illinois, County of Lake, ss. Before me a notary public in and for the State and county aforesaid, personally appeared Ralph Arnold who having been duly sworn according to law, deposes and says that he is the Business Manager of *The Osteopathic Physician* and that the following is, to the best of his knowledge and belief, a true statement of the ownership, management 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, printed on the reverse side of this form, to-wit:

1. That the names and addresses of the Publisher, Editor, Managing Editor, and Business Managers are: Publisher, The Bunting Publications, Inc., Waukegan, Ill.; Editor, H. S. Bunting, Lake Bluff, Ill.; Business Manager, Ralph Arnold, Waukegan, Ill.; 2. That the owners are: H. S. Bunting, Lake Bluff, Ill.; H. D. C. Van Asmum, Lake Bluff, Ill.; Ralph Arnold, Waukegan, Ill.; A. M. Sick, Waukegan, Ill.; H. F. Hosley, New York City. 3. That the known bondholders, mortgages, and other security holders owning or holding 1 percent or more of total amount of bonds, mortgages, or other securities are: 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. Ralph Arnold, Business Manager. Sworn to and subscribed before me this 28th day of September, 1921, Seal W. H. Siegel. (My commission expires April 28, 1925.

Big Bargains In Office Equipment! Act Quickly!

Complete Small Office Outfit Only \$160 Cash

The equipment consists of fourteen pieces as follows:

	Cost New
1. McManis Table	\$150.00
2. Folding Table	15.00
3. Suit Case Table	20.00
4. Kimona Boxes (30).....	15.00
5. Dressing Table	20.00
6. Chair	7.50
7. Writing Desk	25.00
8. Chair	15.00
9. Rockers, leather (2).....	40.00
10. Davenport, leather	50.00
11. Waste Baskets (2)	7.00
12. Oil Stove	10.00
13. Drawing Board	1.00
14. Mirror	10.00
Total	\$385.50

This furniture is in storage in Chicago. We are authorized to permit inspection. Price is for equipment "as is" at the storage warehouse. It is a big bargain. First check takes it. Act at once to make sure you are the one to get it. For further information and inspection, address

**R. A. care
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Waukegan, Illinois**

and to do this we must have a solid, well-organized association. The revival of co-operative interest is meeting with great enthusiasm and we expect a greatly increased membership as a result."

Iowa District Associations

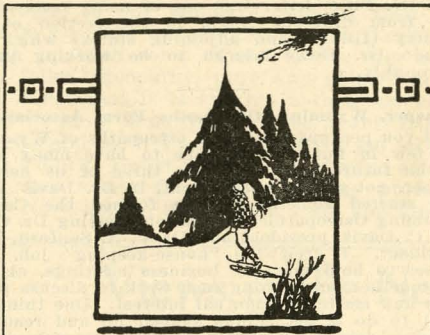
The six districts of the Iowa Osteopathic Association met during the weeks of Oct. 9th and 16th as follows: The second district met at the public library building, Council Bluffs, on Oct. 12th. Program as follows: Dr. C. W. Johnson of the DMSCO on Nervous diseases, Dr. J. P. Schwartz of Des Moines on "The Early Diagnosis of Renal T.B.," Dr. A. E. Hook of Cherokee on "Appendicitis as an Osteopath Views It," Dr. R. B. Gilmour of Sioux City on "Report of Activities of AOA." Dr. Rolla Hook was elected trustee and D. M. Kline of Malvern, secretary-treasurer. The third district met at Ottumwa the following day with about 25 members present and the following program was given: Dr. S. L. Taylor of Des Moines gave a public lecture to nearly one hundred who gathered to see the DMSCO film. Dr. H. H. Leffler of Des Moines spoke on "Laboratory Diagnosis," Dr. C. L. Wheeler of Centerville on "High Blood Pressure, significance and treatment," Dr. C. J. Chrestensen of Keokuk on, "Treatment of Arches." Dr. I. S. Lodwick of Burlington was elected vice-president, Dr. E. M. McWilliams, secretary-treasurer; Dr. C. J. Chrestensen of Keokuk, president and state trustee. The fourth district met at Mason City, Oct. 19th with about 20 present. Dr. S. L. Taylor of Des Moines spoke on "Surgery that a D.O. should know." Dr. C. C. Reid of Denver spoke on "Efficiency" and also gave demonstrations of ear, nose and throat work on several clinics. Dr. W. J. Forrest of Carroll spoke on "The Bulletin." Drs. Carolyn Barker and A. F. Waugh also were on program. E. M. VanPatten was elected trustee and president, E. M. Mitterling vice-president and J. S. Roderick, sec-treas. The fifth district met at Sioux City, Oct. 21st, 24 present. Dr. C. C. Reid on Efficiency and also clinic operations. Dr. F. J. Treney of Des Moines on Radium in Goitre, Dr. T. M. Patrick on "Alcohol Effect on System," Round Table on "Chronic Diseases." Dr. R. T. Quick, Sioux City, trustee and president, Dr. Elizabeth Mochrie Countermine, Sioux City, sec-treas. The sixth district met at Newton, Oct. 20th, 62 present. Program, Dr. C. C. Reid on Efficiency and in clinics Dr. Robert Bachman, Des Moines, on "Difficult Obstetrical Problems," Dr. D. E. Hanan, Perry, "The X-Ray in Osteopathy," Dr. C. A. Nordell of Ogden on "Building a Free Clinic." Election, Dr. D. M. Lewis, Des Moines, trustee and president, Dr. Florence Morris, Des Moines, sec-treas. The first district met at Cedar Rapids, Oct. 14th, 22 present. Program: "An Unusual Case," S. B. Miller, Cedar Rapids; Traumatic Myelitis, E. H. Beaven, Cedar Rapids; "Osteopathy First, Last and all the Time," J. H. Styles, Des Moines; Round Table on "Diagnosis," "Laboratory Diagnosis," B. L. Cash, Des Moines. Election, Dr. B. H. Rice, trustee and president, Dr. Mary Mason, Cedar Rapids, sec-treas. At each of the meetings the film of the Des Moines school was exhibited to the public in an afternoon and evening meeting. These meetings were well attended at each of the cities and were made an occasion for a popular lecture upon osteopathy and its institutions by a member of the faculty of Des Moines college. Dr. S. L. Taylor speaking at Ottumwa, Mason City and Newton, Dr. Styles at Cedar Rapids, Dr. C. W. Johnson at Council Bluffs, Dr. Patrick at Sioux City. Dr. R. B. Gilmour of Sioux City appeared on each program with an outline of the policy of the national and state association and a plea for closer co-operation of the membership with the various activities of the two associations. A fine amount of publicity was obtained in each city in which the meetings were held and the total of excellent newspaper publicity of at least fifteen columns was received. The Caesarian section portion of the film proved excellent publicity material as did Dr. Gilmour's exposition of the new Iowa law especially those sections concerning the fact that the osteopathic law requires two years more education in surgery than does the medical act in this state.

"If the college dies, the profession dies."

Can You Locate This Sick Osteopath?

Should you learn of the whereabouts of Dr. Robert P. Sallander, "Bob," kindly advise me by wire, collect. Dr. Sallander had been practicing in Henryetta, Okla., but on August 16th, withdrew his account from the First National Bank, and has since been visiting different cities, cashing checks upon the bank, which checks have been returned marked "no such account." He has operated in Kirksville, Chicago, Evanston, Detroit, Columbus, Ohio and Louisville, Ky., and his present field is unknown. "Bob" was popular while in the ASO where he graduated in 1916. He was overseas in the Tank Corps, and it is believed that injuries received at that time have unsettled him mentally and are accountable for his actions. His family and friends are anxious to learn where he can be found.—*Oliver C. Foreman, D.O., Chicago, Illinois.*

Osteopathic Health for December



How Modern Science Applies
New Methods to Rout the
Diseases of Winter

Postural and Spinal Defects in
Children and Their Treatment
by Osteopathy

A timely discussion on efficacy of osteopathy in maintaining health and saving life during assaults of the winter season. It reviews briefly osteopathy's "wonder" record in the flu-pneumonia pandemic. The article on postural and spinal defects of children will attract the earnest attention of all intelligent parents. This issue will help you greatly in getting osteopathy better understood and more widely utilized in your community. You can get your required quantity if you apply promptly.

Osteopathic Health for November

Somebody's
Everyday
Ills

—Perhaps
Yours Is
Here!

This new discussion catches the reader's interest at the jump and holds it to the end. Moreover, one can open the book anywhere, start to read any line and quickly find interest stimulated. We doubt if we have printed enough but we estimated as high as we dared. To make sure of an allotment we recommend that you make prompt estimate of your requirements and transmit order at once.

PERSONAL

Dr. George Doll of Larned, Kansas, has sold his practice and equipment to Dr. George A. Short of the 1915 class ASO. Dr. Short took possession of the practice September 1st.

Dr. Floriene A. Mauer announces that she has opened an office for the practice of osteopathy at 2624 Central Street, Evanston. Dr. Mauer was formerly located at 936 Lawrence Avenue, Chicago, Illinois.

Dr. D. D. Young of Portland, Oregon, who is associated with Dr. H. F. Leonard has been confined to the hospital for ten days with an infected leg hand caused from a stick of a tonsil snare while operating. He is considered out of danger.

Dr. F. E. Dayton, Escanaba, Michigan, Chairman of the Bureau of Clinics announces that due to the death of his father Edwin C. Dayton he could not reply to inquiries re Clinic but that said inquiries will have his attention at the earliest possible moment.

Dr. R. M. Roberts, formerly of Corvallis, Oregon, has announced that after special study in New York City he has opened offices for practice at 323 Joshua Green Building, Seattle, Washington. He will limit his practice to Diseases and Surgery of the Eye, Ear, Nose and Throat.

Dr. N. H. Cathcart, of Three Rivers, Michigan, has changed his offices from 122 Main Street to First National Bank Building. Dr. Cathcart says that he now has one of the best offices to be found in a city anywhere the size of Three Rivers or even much larger, and that he is really proud of his equipment and quarters.

Dr. Hubert F. Leonard of Portland, Oregon has returned after seven weeks of observation in the various surgical clinics, especially Dr. Crile at Cleveland, Ohio and the Mayo Brothers of Rochester, Minn. Has been making a special study of "local anesthesia" and expects to utilize it a great deal more in tonsil surgery and will give that special attention.

DIED

Mr. Edwin C. Dayton, age 81, father of Dr. F. E. Dayton of Escanaba, Michigan, October 26th, 1921. Burial took place at Binghamton, New York, October 29th.

Dr. Thomas Sellards, husband of Dr. Dorothy D. Sellards of Ann Arbor, Michigan, on the 20th of October of Brights Disease. Funeral took place from the home and burial made in Rosebank Park in charge of Commandery. Besides the members of the family the following members of the profession accompanied the body: Dr. Carrie B. Stewart of Ann Arbor and Dr. Anna Belle Hicks of Jackson.

Mrs. Eva Nelson Goehring, wife of Dr. Frank L. Goehring of Pittsburgh, October 5th. Mrs. Goehring was married to Dr. Goehring in August 1906 at Kirksville, Missouri, and was well known in osteopathic circles, as she had lived in Kirksville for many years. At one time she was associated with the ASO in the capacity of secretary of the Journal of Osteopathy. Mrs. Goehring leaves besides her husband two sisters, Miss Nora Nelson of Kirksville and Mrs. Nellie Ver Stegg of Keokuk, Iowa.

BORN

To Dr. and Mrs. E. C. Andrews, Ottawa, Illinois a son, October 19th at the Chicago Osteopathic Hospital.

EXCHANGE and MARKET

FOR SALE—6199 D.O.'s received Sample Page Osteopathic Appointment Book. 15-20-30 minute period. Price \$2.00. Send on 30 days trial. E. H. Cosner, D.O., Dayton, Ohio.

WANTED—By lady osteopath, position as assistant to osteopath or in sanitarium. Experienced. Have Iowa and Nebraska licenses—Address No. 321, care The O.P., Waukegan, Illinois.

FOR SALE—"Some differences between osteopathy and chiropractic." Brochures at \$5.00 per 100, 300 per \$10.00, 600 per \$15.00 and 1,000 for \$22.50, prepaid. Send for free samples of brochure and pamphlets.—Dr. E. F. Pellette, Liberal, Kansas.

FOR SALE—Big bargains in office equipment! Act quickly! Complete small office outfit, only \$160 cash. The equipment consists of fourteen pieces as follows: McManis Table, cost new \$150; Folding Table, \$15; Suit Case Table, \$20; Kimona Boxes (30), \$15; Dressing Table, \$20; Chair, \$7.50; Writing Desk, \$25; Chair, \$15; Rockers, leather (2), \$40; Davenport, leather, \$50; Waste Baskets (2), \$7; Oil Stove, \$10; Drawing Board \$1; Mirror \$10: Total \$385. This furniture is in storage in Chicago. We are authorized to permit inspection. Price is for equipment "as is" at the storage warehouse. It is a big bargain. First check takes it. Act at once to make sure you are the one to get it. For further information and inspection, address R. A. care The Bunting Publications, Inc., Waukegan, Illinois.