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DIPHTHERIA.

E. C. LINK, D. O., KIRKSVILLE, MO.

Paper read before the Missouri Osteopathic Association at Springfield, June 8th.

There is the prevailing opinion among medical men which has been instilled in the minds of the people, that diphtheria is best managed by the use of antitoxin. This opinion is undoubtedly correct if the osteopathic treatment of this disease is not considered. Without discussing the merits or demerits of antitoxin treatment, I would call the attention of our practitioners to the osteopathic treatment of this much dreaded disease.

In cases of moderate severity, even in cases where laryngeal stenosis does not exist, the patient is profoundly prostrated, and death may result from the toxæmia or acute cardiac dilatation owing to degenerative changes in the myocardium. This degenerative process may affect other viscera. An acute nephritis more or less severe in character usually develops during the active period of the disease and may become chronic and add to the burdens of an already weakened heart. A toxic neuritis develops in many cases resulting in the various paralyses. The ocular muscles are sometimes involved causing strabismus and diplopia. The involvement of the pharynx may lead to a serious complication, that of aspiration pneumonia which may terminate fatally. The cardiac nerves may become involved causing paralysis of the heart. Paralysis of the facial muscles sometimes occurs from inflammation of the seventh cranial nerve.

The prognosis is grave, especially in cases where the temperature is high, prostration profound, great enlargement of the cervical lymphatic glands, a great amount of exudation involving the nasal passages, the pharynx, larynx, trachea and bronchi causing stenosis of the respiratory passages; also when there are marked evidences of parenchymatous degeneration of the kidneys.

With as gloomy a prognosis as is usually given, is it any wonder that people embrace any drug that will apparently cause the disease to pursue a milder course, even though the remedy may in some cases influence the system in a harmful manner?

We Osteopaths believe, we know, that the unobstructed flow of blood through the arterial and venous channels by which all tissues are bathed in this life giving stream will prevent the invasion of pathogenic micro-organisms, and, by

the re-establishment of a normal circulation, disease is dispelled by the anti-toxic, germicidal properties of pure blood.

The cause, then, of nasal, pharyngeal or laryngeal diphtheria is obstruction to the circulation of the blood and lymph through the neck and the obstruction occurs as a result of lesions in the cervical region affecting the cervical sympathetics or lesions in the upper thoracic region whence the vaso-motor fibers arise. A derangement of the vertebral articulation of the first rib is usually found. These lesions cause a condition of lowered vitality of the mucosa of the nose and throat—the abnormal secretion favoring the rapid multiplication of the Klebs-Löffler bacillus—the exciting cause of the disease.

The diagnosis is made from the clinical symptoms and microscopic examination of the exudate. The diphtheritic membrane is firmly attached to the mucosa and an attempt to remove it causes a slight hemorrhage. The exudate occurring in follicular tonsillitis is within the crypts and upon the surface of the tonsils (usually on one side), shows no tendency to spread to surrounding structures, and may be removed without leaving a bleeding surface. There are many cases of diphtheria of mild type that are diagnosed as tonsillitis, and I believe it to be the duty of the practitioner to isolate every case of sore throat until the real nature of the disease can be determined. If the disease is found to be diphtheria the osteopathic practitioner should conform to the laws in regard to isolation, quarantine and disinfection, that others may not be exposed to the infection. Hygienic measures should be adopted and osteopathic therapeutics instituted. The patient should be put to bed under the care of a competent nurse. The room should be stripped of unnecessary furnishing, should be light and easily ventilated, and visitors should be excluded. The physician himself should be very careful lest he become the means of spreading the infection. The diet should be nutritious in liquid or semi-solid form, and in cases where deglutition is difficult or impossible nutrient enemata should be given. The patient should be given plenty of pure water to drink to dilute the toxins circulating in the blood, thereby reducing the danger of toxæmia and toxic nephritis. Rectal injections of about one pint of normal salt solution at body temperature should be given at stated intervals to patients who can not swallow.

The osteopathic treatment should be given at least twice each day, and, since no two cases are exactly alike, the frequency of giving the treatments should depend upon the character of the case, and it would be well for the practitioner to remain with his patient in some cases administering frequent relaxing treatments to overcome laryngeal stenosis.

The muscles of the neck should be gently manipulated, beginning at the level of the clavicles and gradually relaxing the contracted muscles, thence upward releasing the tense hyoid system. Especial care should be taken lest the enlarged and inflamed cervical lymphatics be broken down by injudicious treatment.

The practitioner should endeavor to remove the lesion which is primarily

responsible for the diminished tissue resistance. The first rib should not be forgotten for this lesion will affect the stellate ganglion and fibres of the sympathetic chain.

Further treatment should be given in the upper dorsal region to fortify the heart and lungs and to the splanchnic and lumbar areas to increase the activity of the bowels and kidneys.

That the osteopathic treatment of diphtheria is the treatment, "par excellence," is attested by those who have had the widest experience.

During an epidemic of diphtheria in a northern state several years ago, Dr. C. E. Still was called in to treat a child suffering from this disease. His success was phenomenal and his fame spread throughout that region. In a few days he was treating more cases than all the doctors of the old school combined. While his patients were convalescing, many being treated by the best medical skill were dying. It is unreasonable to suppose that all of his cases were of mild type, but we must conclude that the character of the disease was changed by removing obstructions to the circulation throughout the neck.

The writer has quite recently observed in his own family a case of diphtheria of severe type, in which the uvula, post nasal region, the pharynx and tonsils were covered with the exudate. The bacteriological examination was made by Dr. Chas. H. Hoffman, a member of the A. S. O. faculty, whose ability as a pathologist and bacteriologist is recognized by the medical society of the State of Iowa and other organizations.

There can be no question as to the diagnosis in this case. The treatment was purely osteopathic, no distressing sequels have presented themselves as yet and the patient is gaining in health rapidly.

The complications and sequels of this disease are dependent upon the influence of the toxins upon the nervous system or upon the action of these toxins causing degenerative changes in the viscera or muscles.

The most serious of the complications are pneumonia, nephritis and cardiac dilatation.

Owing to paralysis and anaesthesia of the palate and pharyngeal structures, food and septic material may be inspired causing broncho-pneumonia or capillary bronchitis which may prove fatal.

The development of nephritis may be explained as the effect of the toxins upon the renal epithelium or its effect upon the renal nervous mechanism. In some cases the development of thrombi in the renal arterioles causes abscess or an interstitial nephritis. Acute cardiac dilatation or paralysis of the heart may occur during the active period of the disease or may not occur until convalescence is well established when upon some sudden exertion the patient may suddenly collapse. When there are evidences of myocardial weakness the patient must not be allowed to get up until the danger of collapse is past.

A peripheral neuritis develops in some cases in which such symptoms as ataxia and loss of reflexes are present. There is wasting of certain groups of muscles.

The various sequelæ and complications are best relieved or prevented by—
1st—limiting the production of toxins by a most thorough relaxation of the muscles of the neck thereby favoring the unobstructed circulation of the blood and lymph;

2nd—by the correction of lesions which affect the vaso-motors to the head and neck.

3d—by spinal treatment affecting the vaso-motors to the areas involved.

4th—by increasing the activity of the excretory organs, by treatment in the splanchnic and lumbar areas, that the toxins may be more rapidly eliminated.

In cases where laryngeal stenosis is marked and suffocation is imminent, intubation should not be delayed.

Fortunately the complications and sequels under osteopathic treatment are rare and on account of this fact we may say that the prognosis is good in most cases and guardedly favorable in laryngeal cases if the treatment is begun early.

A CASE OF THREATENED INSANITY.

DR. J. L. HOLLOWAY, DALLAS, TEXAS.

The patient, a lady of sixty, was brought to my office and told the following story: During her climacteric, ten or twelve years previous to this time, she had all the aggravating symptoms attending this period,—radical vaso-motor disturbances, hot and cold flashes, marked nervous irritation bordering on hysteria, numbness of extremities, neuralgic pains, insomnia, indigestion, melancholia, profuse hemorrhages followed by anemia and its numerous sequelæ. Recovery never seemed perfect. Some three years ago, without any known cause, mental disturbances occurred, being made particularly manifest by exhibitions of uncontrolled fits of passion, following which were great nervous depression and violent occipital headaches with retraction of head and rigid cervical musculature. The local physician advised sending her to a St. Louis sanitarium for treatment and here she remained nine months. From her statements, I inferred she had been subjected to the bromide treatment, at any rate she claimed she was in a constant stupor and her digestion thoroughly impaired from the drugs taken. Upon her return, she improved gradually, but these exhibitions of passion would occasionally recur. Finally she had what she called a "strange spell," in which there were profuse cold sweats confined mainly to face and hands, a feeling as if the brain were surcharged with and actually submerged in blood, a settled conviction on her part that loss of mind was impending and the former symptoms of head retraction and excruciations of occipital pains. The action of the kidneys on these occasions

was greatly deranged, the urinary discharge being of a pronounced chocolate color and consistency.

When her daughter brought her to me, she had the appearance of one under the influence of morphine though she was not addicted to the use of the drug. Hers was the worst case of mental depression I have ever seen. Hope had vanished and she was apparently waiting stolidly for the inevitable hour when her reason would be dethroned.

Examination disclosed the characteristic neurasthenic spine,—tender to the touch at almost every point. There were marked lesions at third and fourth cervicals and upper lumbar. It was evident there existed grave vaso-motor neurosis, the vascular equilibrium of both cord and brain being affected, while the lumbar condition accounted for the kidney disturbance. I began with a general spinal treatment to relax tissues in order to free up circulation to cord, followed by specific work on discovered lesions.

Owing to the fact that she and her family knew nothing about osteopathy, and she had many misgivings as to any one's ability to help her, assurances, stronger than ordinarily given the average patient, were made to awaken interest and secure proper mental attitude.

For, I am sure, in certain neuropathic conditions the confidence of the patient must be secured at all hazards. Suggestion has its legitimate place in every system of therapy, as much so in osteopathy as in any other. My advice to the patient was, to take drives into the country, see her congenial friends, find the bright side of things, cultivate optimism, when irritated suppress by sheer will-power the rising tide of anger or else get away from the cause—any, and everything to keep her mind off of herself. The members of her family were instructed not to extend over much sympathy, to prevent, by digression, talk about her ailments, to discuss bright, entertaining and agreeable topics in her presence, to note and express to her any observed improvement, however small. My own manner toward the patient was one of absolute confidence in her ultimate recovery—and in two weeks she had caught the desired contagion. She looked at life from a different view-point, became happy, hopeful and almost radiant with prospects of perfect health. At the end of the month she was apparently a well woman, though I insisted that she take another month's treatment. I felt sure she needed it, but she thought otherwise, and the sequel may prove that the patient was wiser than her doctor.

I have spoken in detail to emphasize the necessity of studying every case just as you would an intricate problem in sections. The structural lesions must be attended to, but no less must the practitioner strive to correct the mental lesions, if such exist. In this he must learn to exercise due caution, talk little, but incisively. Over doing a thing of this kind smacks of the braggart who should have no standing among ethical physicians.

I took this case after learning its history, believing that osteopathy, while it might not restore to perfect health, offered greater hope than anything the patient had hitherto tried. Like Dr. Hildreth, I am not sure that it is right to turn down any case that offers a shadow of hope to work on.

SOME REMARKS ON TYPHOID.

BY DR. PAUL M. PECK.

Space will not permit of an exhaustive article on so broad a subject as typhoid, but with your permission, I will pass a few remarks touching on my observation of the disease as met in the south.

When our much revered "Father of Osteopathy" published in his school journal the statement that no such disease as typhoid exists and defied his readers to disprove his statement, your writer, one of many, doubtless, was much puzzled to know just what Dr. Still meant. Most patients who have been kept flat on their back for four to eight weeks suffering with typhoid fever would be inclined to doubt Dr. Still's statement. After meeting the condition as we encounter it in the south and seeing what an irregular form it takes, we were better able to grasp Dr. Still's idea, possibly, that typhoid is a succession of symptoms and not of sufficient dignity to be called a disease.

Old practitioners have told me they had not seen a "regular" case of typhoid in San Antonio in a score of years. The attack is usually less vicious but is inclined to be more prolonged. Six or seven weeks of fever averaging below 104 degrees and seldom making the patient delirious might be said to be the more frequent type encountered and is called "slow fever." The rash is frequently entirely missing. The onset varies from an entire absence of pulmonic symptoms to so pronounced an attack that the practitioner will be much troubled during the first week to diagnose between pneumonia or typhoid. An early diagnosis can be made by noting whether the most persistent muscular contractions are reflected back along the spine over the splanchnic area or in the upper dorsal.

If the former, the seat of the disease will be found to be in the intestines instead of the lungs. This point, strictly osteopathic, is very valuable in diagnosis. Notwithstanding the contrary opinions of some, the writer believes in the early employment of the clinical thermometer and a very carefully kept record of each case. Few are so skilled that they are not misled as to the condition of a patient at times, if the thermometer is not employed. Many times have I been assured that all signs of the daily temperature in some tubercular case, had disappeared, but the thermometer disclosed the contrary condition, existing. A well kept temperature chart will often be the means of determining the character of the fever the physician is dealing with. This is the view of one in the field who accepted the "pig tail theory" taught at school and tried to do without a thermometer in the early days of his practice. Many typhoid cases give a history of an attack of aching teeth or ulcerated gums or roots just preceding the onset. The soreness continues often during convalescence. This condition is so frequently present that it furnishes interesting speculation as to what relation these symptoms bear to the typhoid fever. Its presence is too frequent to be called accidental.

Reports from many osteopaths clearly show the superiority of the osteopathic treatment of typhoid which the advanced minds of the "regular" school

say is a disease to be treated without drugs as far as possible. Usually under osteopathic treatment we can break a fever on the twelfth or fourteenth day and the convalescence following is rapid, comparatively speaking, so much so as to bring favorable comment even from the medical profession witnessing the case.

Gentle treatment twice or three times a day at first, usually keeps the fever down and patients always give evidence of its grateful effects. Nurses often comment upon the relieved expression shown by the patient following each treatment. Compression of the abdominal aorta and a gentle manipulation of the bowels give good results in relieving the congestion of the abdominal veins. The relaxing of the spinal musculature which always become tensed as the fever increases, tends to avoid the congestions of spinal areas and thereby prevents complications and keeps the bodily functions active. The treatment also greatly relaxes the high tension of the patient due to fever and intoxication. It precludes the call for a nerve sedative and frequently induces sleep immediately following. Typhoid makes such pronounced ravages upon the nervous system, and osteopathic treatment so essentially combats this effect, that the rapid convalescence of a case brought through under that treatment is in striking contrast to the slow recovery where other means are employed. Hospital nurses have commented upon this contrast in every case I have treated. Patients should have water and alcohol baths once or oftener daily and one or two oil rubs daily. The oil helps dissipate heat and keeps the skin active. If the fever holds long above 104 degrees, hydrotherapy may be resorted to. The "Brand" method seems too severe. We prefer the rubber sheet made to form a bath tub by use of rolled blankets or with rope and clothes pins attached to the bed irons. Water at hydrant temperature is first poured over the patient and later a cake of ice moved about in it until the temperature has been gradually much lowered and the sponge employed to dash water over the patient, who will often drop off into a restful sleep while still immersed. This bath may be employed as frequently as necessary to keep the temperature down, but usually osteopathic treatment will suffice.

If the bowels are sluggish I have found excellent results following the high irrigation of the colon by means of a hot saline solution, two quarts, injected per rectum with a bulb syringe and long colon tube. A reduction in temperature is almost always noticed following. Water should be retained 30 to 60 minutes.

An absolutely liquid diet should be employed for at least ten days after the fever has left. Sweet milk diluted with lime water if necessary, buttermilk and malted milk are staple articles but must be varied to suit particular cases. We have seen best results by the employment of orange juice freely throughout the attack. As many as a dozen may be taken daily, strained and iced. Albumen and later the entire egg may be rendered very palatable taken in this liquid. The juice has a wholesome effect upon the bowels and is very grateful to the parched tongue. Barley broth flavored with malted milk makes a healthy variation of diet.

Liquid diet every four hours at first and later every two hours, if the stomach is strong enough to stand it, is a safe rule.

The employment of whiskey is a mooted question, but personal observations have been against its employment while the fever is on, generally. Later it seems to have a value taken in egg nog or milk punches. There always seems to be a call for stimulant after fever subsides. The greatest objection noted has been the tendency to sour the stomach.

I measure out a gallon of water daily and insist upon the patient drinking as much as that and more if possible each day. The patient should be urged to remain as near passive as possible all the time and as soon as the fever subsides he should be started to taking slight exercises to keep up the activity of every muscle.

I believe there is no treatment so effective an aid to Nature in typhoid as is osteopathy.

THE NOBEL PRIZES.

DR. R. E. HAMILTON.

It seems strange the inventor of dynamite who did so much to make war terrible should devote his great fortune to the encouragement of those who win victories in the interests of peace.

Alfred Nobel, the Swedish manufacturer of dynamite, who died in 1896, left his fortune of over eight million dollars in the hands of a committee with directions to use the annual interest of two-hundred twenty-five thousand dollars, to be divided into five prizes, for those who made the greatest achievements in physics, chemistry, literature, medicine or physiology and the promotion of peace.

Americans generally are now bewailing the facts that of these twenty great world prizes, given in the last four years, not one has been awarded to an American. Although besides Sweden, England, France, Germany, Holland, Denmark, Russia and even Spain have shared in the prize distribution.

This year American scientific and literary societies are determined in getting the merits of American leaders of thought before the committee of awards.

DR. STILL, A LOGICAL CANDIDATE.

The Osteopathic fraternity with its 3600 members and million friends is going to present the achievements of Dr. A. T. Still to the committee for the prize in Medicine and Physiology.

That Dr. Still's discoveries entitle him to a prize, there is not room for a reasonable doubt; and if any one doubts that Dr. Still's name will be properly placed before the committee, he has but to notice the power, determination and popularity of the osteopathic profession to be convinced of his error.

The first step in gaining aid for our cause will be the attempt at winning a voting contest inaugurated by the "New York Independent" as this paper intends to press the candidacy of the winner for one of the prizes.

All loyal osteopaths should rally to the task of winning this voting contest. It means much to all the profession; and if osteopaths fail not in their duty, to osteopathy shall be the honor, the power and the glory.

HEREDITY—Continued.

DR. C. H. HOFFMAN, KIRKSVILLE, MO.

Second problem is more interesting. It can be formulated as follows: Is it possible for the generator to transmit the immunity acquired by them against an infectious disease. The scientist who studied this question first experimentally inoculated a certain number of animals against septicæmia. On mating these animals with non-inoculated ones, he discovered that the inoculated females always transmitted a certain degree of immunity to their offspring, while the influence of the male was nil. Wernicke's researches on diphtheria have confirmed this conclusion. Three theories have been advanced to explain these facts. The one by Durlaw is a cellular theory, the only acceptable one if it be admitted that the father may transmit immunity. It supposes that under the influence of the disease the cells receive a new orientation, which persists in the descendants. If following Ehrlich, the paternal influence be rejected, we are quite naturally led to admit that immunity in the child depends upon the passage through the placenta of protective substances elaborated in the maternal organism. The immunity of the fetus is of shorter duration than that of the mother, because it is a passive immunity, a simple impregnation.

The theory of Faillard is related to the preceding: The fetus is supposed to receive the soluble products, but instead of stimulating the cells, they act as a stimulant upon the phagocytes. This is to extend to the problems of heredity, the theories of Metchnikoff concerning the mechanism of immunity. The study of heredity in cases of infection shows that sex eventualities are possible.

1. The microbe, coming from the mother, traverses the placenta and causes in the fetus a disease at times more serious than in the mother (pneumonia, typhoid fever, sometimes syphilis) at times similar (smallpox) but in some instances presenting special localizations (syphilis); at times different (typhoid fever). The manifestations are generally immediate, but they may be tardy (syphilis, tuberculosis).

2. The microbe comes from the father and invades the organism of the fetus, the mother remaining intact, but she may acquire immunity against the infection afflicting the offspring (syphilis).

3. The microbes do not reach the fetus, but the child suffers from digestive disorders manifesting themselves in malformations, stigmata, degenerations and infantilism.

4. The child seems normal, but it has received from its mother (or its father) an immunity generally not well marked and of short duration.

5. The child receives from its father, or from its mother, a particular nutrition, which predisposes it to certain infections.

6. The child is in no wise influenced by the infection of its parents. Thus every contingency may become a reality, from an infection leading to speedy death to the total absence of impregnation.

The important study of the heredity of neoplasms and of cancer in particular, belongs also to the study of chronic infection. We have stated in connection with intoxications and infections that disorders caused by external agents can be transmitted to successive generations and that they may manifest themselves in degenerations, lesions, or disturbances affecting chiefly the nervous system. Chronic alcoholism, saturnism, mercurialism, morphinism and among the infections, syphilis and tuberculosis exercise a pernicious influence. Acute intoxication may at times produce the same disturbances. For example, drunkenness at the moment of conception is often a cause of degeneration. To it belongs a large share in the etiology of epilepsy. Moral impressions often exercise a marked effect upon the nervous system of children. When conception or gestation takes place under the depressing influences of mourning, of annoyances, or during great emotions the children are almost inevitably condemned to nervous degeneration. The age of the parent may also have a similar effect. In this regard both old age and immaturity, exert an influence equally pernicious. If the parents are too young, the first children will be degenerates; those coming later on and conceived during maturity will be normal. Then, as the years go by, the parents grow weak and bring forth children much inferior to their older brothers. We must also remember that the nervous manifestations grow worse in the descendants and that, after a few generations they become serious enough to entail sterility. This has very justly been called progressive morbid heredity. The inherited nervous manifestations are not always identical with those of the parents, not even always analogous. Three cases present themselves. At times there is perfect similarity. This is what frequently happens as regards hysteria. At times the manifestations are only homologous, the disturbances differ in their expression, but they are all disturbances of the nervous system. In other cases the symptoms seem quite different and their affiliation can not be understood except by taking into account the idea of diathesis. For instance the case may be one of an arthritic whose parents being gouty or diabetic have had asthmatic children. These transformations are not too much to be wondered at. Long ago clinical experience taught us that nervous disorders are frequent in all arthritides. In this connection we may mention hypochondria, the insanity of gout, diabetes and the insanity of rheumatism. In order that the nervous manifestations to which heredity predisposes may come to light an occasional cause must intervene. This is by the way, a notion of capital importance from a prophylactic standpoint. The disturbances become apparent on the occasion of an infection, an excess or a moral shock. It is the first drinking bout which is the starting point of dipsomania, and it is a common infection which, as it causes convulsions or delirium, reveals the congenital neuropathy. It may happen that these manifestations begin earlier in the children than in the parents. A father whose neuropathic aptitudes do not reveal themselves until late in life may have a child, who, from his first month has convulsions. In this case hereditary influence would be manifested only at a later date, and if the father

dies too early, i. e., before having brought to light the taints which slumbered in his organism the problem remains unsolved and the child's disorders will seem to be spontaneous. Although the parents generally communicate to their descendants a mere aptitude, they may at time transmit to them a true disease, connected it seems with an evolutive disorder. It is a kind of ovular affection. As an illustration we may mention the hereditary ataxia of Friedreich, the cerebellar hereditary ataxia of Marie, the progressive myopathies (1) the disease of Thomsen, the so-called hereditary tremors. In most cases heredity transmits a certain tendency to nervous manifestations and to ordinary reactions which occur on the occasion of a shock, an insolation, an infection, or an intoxication. Pneumonia, which, in children is so often accompanied by cerebral disturbances that a meningeal form has justly been described, so acts, however, upon predisposed children. It may be stated that even in cases where nervous manifestations seem inevitable, their frequency, intensity, and other characters are governed by predisposition. Drunkenness for instance, is not necessarily accompanied by cerebral accidents. What we have said in reference to alcoholic poisoning may be repeated concerning endogenous intoxications. In uræmia, for instance, the manifestations vary so much that three clinical forms of it have been described according as the accidents involved the digestive apparatus, the respiratory apparatus, or the nervous system. It is generally admitted that the variability of the symptoms depend upon the multiplicity of the poisons, and that the manifestations differ according to the substance which accumulates. We accept the conception, but it seems to us that the roll of hereditary predispositions must be taken into account. Localisations are determined by the state of the organs. It is only an occasional cause that brings to light morbid dispositions which until then had remained latent. In a certain number of cases the nervous taint explains the development of the disorders which appear during or after a disease and persist for a long time. This is the case with chorea, hysteria, epilepsy, and paralysis. Chorea, for instance, occurs frequently after an attack of rheumatism, but only when the subject is hereditarily predisposed to neuropathia. The same is true of the other neuroses. The expressions, hysteria, infectious hysteria, used quite frequently point to this double tendency. It is not that hysteria differs in its symptoms, for they are always the same, but it is brought about by a number of occasional causes, all of which act on predisposed subjects. Analogous considerations with regard to all infections which become localized in the nervous system could also be added.

It is not only in pathology, but also in psychology and sociology that nervous heredity offers an interesting subject of study. Intellectual aptitudes are transmitted for several generations. There are on record families of scientists, of physicians, of musicians and of painters, oftentimes a quality is exaggerated, and becomes predominant and accounts for the appearance of superior individuals. The power of attention, the persistence of ideas, when intensified in the descendants, may culminate in a genius. It is also by an successible

increase of the familiar qualities that the aptitude for cerebral work develops in civilized races, and mental overtaxation becomes possible. Reciprocally, a slight disorder may deviate and grow. The tendency to fixed ideas may breed melancholia. Cerebral activity may be excessive and produce in the child the most varied neuroses. As defects increase with age, it frequently happens that the children are the more degenerate the later they have been conceived. There is an observation which in this connection, is highly instructive. The statement that insanity is hereditary is a common place truth. According to the statistics of Hutchinson it is hereditary in the proportion of 22.6 per cent. Consequently, here, as elsewhere heredity is not inevitable. It is more frequent when the mother is insane, and it decreases in frequency as the cerebral disorders become manifest in the parents after the birth of the children. Aside from similar heredity, the influence of the conditions in which the parents are found must be taken into account. Chronic alcoholism and drunkenness at the time of conception play the same part as the other defects of the nervous system. To these factors, two others must be added. Overwork on the one hand, and arthritism on the other, contribute their part and account for the growth of the number of insane persons in the civilized races. The increasing complications of life, exacerbation and discomfitures and disappointments, overtaxation of mental powers, and predominance of the nervous system, sufficiently explain the progress of mental disorders. Thus endowed with an hereditary predisposition, the individual waits for an occasional cause and then succumbs to insanity. The breaking down may happen at the great periods of growth. There is an insanity of puberty, and in women an insanity of the menopause. Or occasion may be childbirth, an external influence, a nervous shock, a violent moral impression, an intoxication or infection. It must be said, however, that the interpretation of the disorder is not always easy. Alcoholic or venereal excesses and overwork are very frequently not the cause of the mental disease, but represent only the symptoms. If heredity is frequent in insanity, it is certainly not inevitable. In certain forms, as in chronic delirium, it is constantly found; while it is quite rare in general paralysis. It has even been noticed that the sons of general paralytics are frequently endowed with a high order of intelligence, and sometimes with genius. Nordau defined genius as a form of neurosis. Although this view can not be accepted, it must at any rate be admitted that cases of genius and insanity and of genius and neurosis are frequently found in the same family. It is also well established that a large number of highly gifted men present stigmata which make of them superior degenerates. The study of the psychic status of superior persons reveals an exaggerated or perverted sensibility, the absence of practical sense, queer superstitions, and accidents bordering upon pathology, of manias or phobias. Reciprocally, an insane person can have sparks of genius. The beginning of a general paralysis affords abundant illustrations of this peculiarity. How many men called lunatics by their contemporaries hold the rank of geniuses in the eyes of posterity. This is because geniuses and lunatics differ from the sensible men in the same particular. Their ideas are opposed to those of the majority. It is this that makes the great difference between a talented man and a genius; the former continues and completes the ideas current about him, the latter departs from them and pursues different thoughts. It is no easy matter to determine when an idea springs from genius and when

from insanity. It has sometimes been said that relations exist between genius, insanity and crime. In this form the statement is unacceptable. There are infinities between genius and insanity on the one hand and insanity and crime on the other, but there are none between criminality and geniuses. The relationship between insanity and crime is so evident that the question of responsibility rises constantly. The differentiation is, it hardly need be said, very difficult to make, and the idea of partial responsibility, so often applied serves only to indicate the existence of numerous transitions connecting insanity and crime. The differentiation can be made from two different points of view. The public considers any crime as the work of a lunatic, as a rule, the motive of which cannot be understood. The physician must judge differently, he must determine the physical condition of the accused, seek for stigmata, reconstruct his past, discover his personal and especially his hereditary antecedents. In studying the families of criminals one sometimes find direct heredity (25 per cent of youthful criminals are born of criminal parents) and sometimes indirect heredity—that is, nervous degenerations, mental derangements and alcoholism. If we turn from the family to the individual, we frequently observe stigmata of degeneration. The criminal is liable to irrational fits of anger, to-night terrors; and at times the disorders are more severe.

Heredity is no more inevitable here than elsewhere; occasional causes, as is always the case, play a very important part. If the individual predisposed by heredity is brought up amongst honest people, his chances of not straying from the straight path are good. How many people have remained virtuous for the want of an occasional cause. Consider from this point of view the influence exercised by the great social perturbations. Review the history of the more recent great revolutions and riots; it is always the same picture, always the same licentiousness, hatred and violence and murder. It is a particular state, perhaps a return to an ancestral condition, at any rate a retrogressive movement, which is produced when the fear of punishment grows weak and when social hypocrisy is done away with. Contagion propagates the disorder, but it reaches those only who carry within them a latent predisposition. If on the other hand criminality as well as insanity increases with civilization, it is because the growing complexity of life breeds overtaxation, and requires a new stimulation which seems to be favored by the use of alcoholic beverages. Heredity expresses itself under these circumstances in an inability for sustained effort, which is the great cause of criminality. According to Lombroso, criminal hereditary predispositions can be recognized by means of particular bodily characteristics. The criminal presents various stigmata which bring him nearer to primitive man. The stigmata are less frequently observed in men than in women, although she commits fewer crimes. Lombroso meets the objection by the statement that in women prostitution is an equivalent of crime; as a matter of fact, associations of criminals and of prostitutes are of frequent occurrence. Equally abnormal, these people come together just as the degenerates do. For it seems well established that the various stigmata numerated by the Italian school do not characterize the tendency to criminality, but simply the degeneration of the race, they are found in degenerates of all kind. The physical stigmata of degeneration are to well known to deserve any mention here. On the other hand, if we consider the intellectual development we find all imaginable types. At the foot of the ladder, idiocy; the cerebral functions are so reduced that we consider the subject as a mere medullary being. Nevertheless, one faculty may persist, idiots have been known who were excellent musicians, or astonishing calculators. A little higher we find imbecility, and still higher mental debility. Above these we find very intelligent, even superior

persons, but they are in some way defective; they are odd, eccentric, gifted at times with a partial superiority, but their character betrays asthma, defect of judgment, inability to look after themselves in life. There are men of genius whose mental degeneration is expressed by the absence of practical common sense, or by some little defect which astonishes, or by some fantastic mania, or incomprehensible phobia. Every degenerate, whether superior or inferior, whether bordering upon genius, insanity or crime, frequently shows an inmost tendency to suicide. At times this is the only stigma, or at least the most apparent one. They sometimes use childish means, but generally they repeat the attempt with increasing earnestness and generally succeed in destroying their lives. The considerations we have presented concerning nervous heredity directly suggest practical applications. Surroundings may prevent the development of the manifestations to which the child is predisposed. As already stated, an occasion is required to determine the occurrence of the accidents. Consequently the child should be removed from his family and this becomes an imperative duty when the parents are alcoholics. We have shown that the first intoxication is the starting point of dipsomania. It is here, where the temperance societies may be useful. We must remember that force in any form—punishment, intimidation never succeed. The effective treatment is to place the child in the country in the family of honest and quiet people. Hardened cases are incurable. It is in this manner that the effects of heredity may be successfully antagonized, effects, which we can not repeat it too often—do not rest upon the race as an unavoidable fatality.

CONCLUSION.

Heredity is the most important chapter of etiology. If the causes of disease must always be looked for outside of the organism, the modes of its reactions are governed by predisposition, aptitude and resistance transmitted by the parents. The functional modifications accidentally brought about are communicated to the offspring and are often exaggerated in successive generations. According as the attending circumstances are propitious or unpropitious the family, the race, or the species will show a corresponding improvement or deterioration. By an abuse of expression, it is often asserted that the affections of the organs—the heart, the liver, the kidneys, and the nervous system—are hereditary. What is transmitted in most cases is a functional disturbance, i. e., a simple predisposition, which becomes apparent only under the influence of exciting causes. Children born of parents suffering from cardiac lesions or pulmonary disorders or from Bright's disease, are more likely than others to develop lesions, of the heart, liver, lungs and kidneys. But an occasion will be required in order to make actual the inherited tendency; a new influence, an intoxication, an infection, or an anomalous reaction will have to interfere in order that the organ be affected. It is in this way that the heredity of visceropathies must be understood. It is even probable that what in many cases appears to be the hereditary pulmonary tuberculosis is due rather to the fact that the offspring of tubercular subjects suffer from insufficient respiratory activity, their breathing capacity being below the normal. Heredity must not be mistaken, for immateness. The latter expression designates those cases in which the child comes to life presenting certain morbid aptitudes, the point of departure of which is to be found in some accidental causes having exerted their influence directly or indirectly during gestation. Immateness is the conclusion of foetal pathology, while heredity is a chapter of the pathology of the species. Immateness results from external causes which have acted upon the foetus through the enveloping membranes. More often it arises from toxic or infectious agents transmitted through the placenta. At times it proceeds

simply from bodily or psychic disorders in the parents. A well-constituted person generating a child during convalescence during pregnancy, would produce an offspring with a particular immateness. It might exhibit nutritive disorders or stigmata of degeneration, it would be predisposed to neuropathies easily contract infections. The morbid influence having acted upon the cells that are young, and so to speak, malleable, would leave an indelible imprint. The disorder would be permanent in the child, even though temporary in the parents. Immateness frequently result from causes so slight that they escape notice. If the great laws of heredity at times seem to fail, it is because we do not always perceive the circumstances modifying their action. In cases of organic as well as nervous affections, it is a predisposition which is transmitted in the majority of instances. Hence the importance of prophylaxis and education. Hereditary taints are only too often aggravated by education. The sons of neuropathics or alcoholic patients are incited by the examples they see in their families, which seal their doom. If, instead, they were placed from early youth under the care of persons able to start them in a good direction, the effects of heredity would be resisted and even completely overcome. Unfortunately it is but seldom that education is used for this purpose. Moreover, its influence may be insufficient. If that be the case, the disorders of the parents will go on increasing. It is in this manner that pathologic families are created. If to this be added the fact that the same defects are frequent in the same classes, it is to see how marriages between persons having the same aptitudes will still tend the more to magnify the hereditary disorders. On the other hand, social selection frequently brings about the survival of the weak and degenerate. It then seems to supplant natural selection, but it does so only temporarily. Infunditly or increasing debility brings about the disappearance of degenerates. We are thus brought back to the great laws regulating the whole evolution, and we are led to look upon social selection as a mere chapter of natural selection, sociology being simply a chapter of biology. As it transmits and fixes certain characteristics, heredity explains the evolution of the races, their diverse aspects at different epochs and in various countries and by this very reason accounts for their pathological variations. Diseases are not the same all over the globe, they differ also according to the period. The variations of pathology in time and space find their explanation in the incessant changes occurring in the inanimate agents in the animate beings and notably in the human species. This is the reason why the diseases we observe differ from those observed by our fathers, just as they differ from those which will come to the notice of our descendants. It aids us clearly to understand the clinical types. The various localizations taking place during infections and intoxications, the diverse nervous reactions happening on the occasion of a traumatism are not the work of chance. They everywhere and always proceed from numerous causes which have influenced the subject or his generators.

If the varied circumstances interfering before and after birth could be traced out, if precise information regarding heredity and immateness could be obtained, and if the external causes playing upon the foetus could be known—the future of each individual could be foreseen, and its physiologic, pathologic, and moral history written out in advance. For it is certain that as all the activities of living beings are nothing more than reactions provoked by external agents they must all be interrelated just as systematically as the other cosmic phenomena. It is impossible to discern the innumerable intervening causes. Our belief in morbid spontaneity just as our belief in a free will—is grounded upon no other foundation than on incomplete knowledge of the numerous causes acting upon us.

AN UNUSUAL CASE OF TYPHOID.

ASA WILLARD, MISSOULA, MONT.

EDITOR BULLETIN: In response to your request for something for the June Bulletin, I will report a case of typhoid which occurred last summer.

The case presented sufficient alarming and unusual symptoms to be in a large measure responsible for the writer's missing the World's Fair and the A. O. A. meeting and it is possible that the features presented may be of interest to the Atlas and Axis members.

Called to see patient, Saturday, the 21st. Patient was a young man of excellent habits, strong, weighing about 160 lbs. For a week he had been feeling unwell, but had kept at his work, of managing a lumber yard.

He had some fever at the time I was called but no headache and the principal source of distress seemed to be from a pain in the right side.

Examination revealed the right 12th rib to be markedly down and twisted and the 11th and 12th dorsal vertebrae to right. Partial correction seemed to relieve some.

Sunday, the 22nd, his symptoms had further developed and indicated typhoid beyond doubt.

Stools showed hemorrhage and patient was very weak.

Monday, 23rd, temperature about 100°F, all day. Tuesday, 24th, 8:30 a. m., temperature 99; 8:30 p. m., 100. Wednesday, 25th, 8:30 a. m., temperature 99; 8:30 p. m., 100½. Thursday, 26th, 8:30 a. m., 100; 8:30 p. m., 101½. Friday, 27th, 8:30 a. m., temperature 99½; 8:30 p. m., 100. Saturday, 28th, 8:30 a. m., temperature 99 from 3 p. m. on normal. Sunday, 29th, normal all day. Monday, 30th, and the 9th day I was out of town. During the day, his temperature as taken by the nurse was at all times normal.

In the evening about nine, his temperature suddenly dropped to 94, his limbs becoming cold and pulse weak. During the night, the temperature gradually worked up to 96 which was the record for the early morning of the 1st.

From the beginning of the sickness, the pulse was never more than 54 and it was but 38 the morning of the 1st.

For the next three days, the 1st, 2nd and 3rd, the temperature recorded from 96½ to 97 during the day and between 1 and 2 a. m. would drop slightly below 96. For the next 7 days, from 3rd to 10th, the temperature would vary from 96 to 97 during each day and would be 95 or 95½ between 1 and 2 a. m. From the 21st, or first day I was called, to the 30th, the first 9 days, there was constant evidence of blood in the stools, although not excessive until the evening of the 30th when they were quite bloody.

The stools showed evidence that there was slight oozing of blood from the intestinal membrane until the 11th, 19th day, when during the next 3 three days this symptom gradually disappeared and the temperature got to 97½ during the day and never fell below 96 at night.

The patient was now showing good strength and began getting stronger each day, but the temperature did not get up to normal at which I marveled.

Took the mother's temperature and found that it was 97½ during day and 96 from 1 to 2 a. m. Mother is 40 years of age. Took only sister's temperature and found it to be 97 4-5 during day. Did not get it at night. Sister is 17.

The low temperature being a family idiosyncrasy, the hemorrhages had produced a more marked depression than would otherwise have resulted.

Indications were that the boy had hemorrhages before he went to bed. He was fed on strained mutton broth and white of eggs, and a cold pack was kept constantly on the abdomen over the ilium.

No change was made in his food to cause the unusual hemorrhage and depression on the 30th. The lesion of 11th and 12th dorsal seemed to be an old one. From the 10th the patient gradually recovered until completely well.

* * *

MIND PRODUCED. OSTEOPATHIC MASSAGE GIVES BOY USE OF HIS BRAINS—IDIOT FOR 15 YEARS.

After living for fifteen years with his mind an absolute blank, sixteen-year-old "Jack" Harry, the eldest son of Frederick Harry, a coachman, at No. 10 East Twenty-seventh street, it is alleged is fast having his reason restored through osteopathy.

To add to the remarkable success attained by the treatment, the boy is fast developing marvellous vocal powers, which for his sixteen years have remained latent. That he was possessed of this gift was totally unknown to his parents and it is their intention, as soon as he receives enough education to fit him for the ordinary walks of life, to see that he is instructed musically. The credit for the remarkable change in the boy is due to the treatment given him by Dr. Edward S. Howard, of No. 509 Fifth avenue.

If it had not been for the Rev. Dr. Houghton, of the "Little Church, Around the Corner," however, Dr. Howard would never have seen young Harry. Houghton had seen the boy on several occasions and had learned of his affliction from the little fellow's brother, William, who is one of the most valued singers in the church choir.

Houghton spoke to Dr. Howard about the case. The physician immediately became interested, and "Jack" was sent around to his office. A careful examination of the spinal column revealed to Dr. Howard that there was not a proper connection of the spinal cord with the brain and that there were several pieces of bone that were pressing on the cord.

On March 13 of this year the boy was submitted to osteopathic massage of the spinal column, and within a week the effects of the treatment began to show. Since the time he was born up to a week after he first visited Dr. Howard young Harry had not spoken an intelligent word. His attempts at speech were mere babbling, and his mind was in such a condition that he had to be

dressed, washed and even fed. He could not be taught to walk until he was nearly eight years old, and even then, and up to the time the treatment was begun, he would frequently lose his balance and fall.

It was the fifth day after Dr. Howard began experimenting with osteopathic massage, that Mrs. Harry noticed a decided change in her son's manner. He had been taken each day to the physician's office by his mother who led him by the arm. On this day, however, young Harry returned walking by himself with a brisk step. It was the first time since the day he was born that his mother had ever seen him show any sign of vigor or liveliness.

The woman was overjoyed. She clasped her son in her arms and cried for happiness. Rushing to her husband she called upon him to watch the boy walk.

"Walk up and down," she told him, and young Harry intelligently obeyed.

"Now, try to run," the boy's mother suggested, and a very good attempt was made. From that time the young fellow improved steadily.

Then began an interesting series of experiments by the family. The boy was taken to the theatre. Never before had his mother been able to make him sit through a performance of any kind. He would scream and object so that they would have to take him away. So he was taken to the Hippodrome and was watched to see the effect upon him.

Instead of crying immediately after the curtain rose, as formerly, he began to take the greatest interest in the performance and laughed as the family had never heard him laugh before at the antics of Marceline, the clown. The war spectacle with all its noise of gun firing, instead of frightening, pleased him and from the way he behaved it was easy to realize that a new world had opened before him.

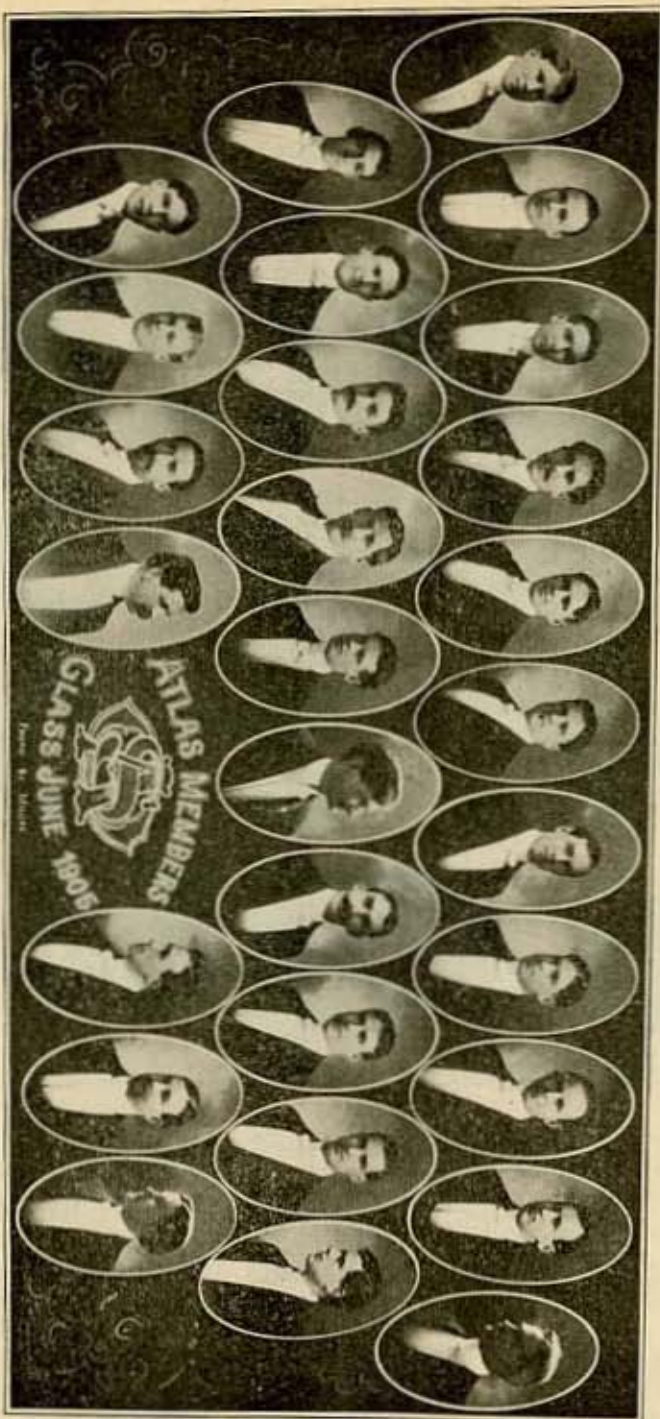
Then the boy's mother began teaching him to spell and pronounce words properly.

Now that the boy has come to understand things in general, he cannot learn fast enough to suit himself. He is constantly found sitting in his room poring over some simple book trying hard to make out the words.

If he masters some difficult sentences he will run to his mother and delightedly inform her of his achievement. His parents have to be careful not to allow the boy to study too hard, and although it is against his wishes, they see that he does not read more than a few hours each day.—N. Y. Press.

NOTE:—We most heartily congratulate brother Howard upon his miraculous success with the above described case. He can easily forgive the writer for the ignorance he displays when he speaks of Dr. Howard's "osteopathic massage" as osteopathy is still too young to expect every one, especially reporters for metropolitan newspapers, to differentiate it from massage.—Ed.

First Row—J. W. Tarr, John Redger, W. H. Eldmore, A. S. Piper, W. W. Vanderburgh, A. H. Daniels, Carl D. Clapp, Wm. E. Reese, O. H. Kent, J. J. Walker, O. M. Culhand.
 Second Row—J. O. Smith, John McManis, D. L. Davis, C. O. Chino, John F. Bone, W. E. Owen, Frank A. Crofoot, N. C. Hawes, M. K. Catrell, H. B. Martin.
 Third Row—Robert T. Dowell, F. E. Hastings, E. R. Ryerson, J. S. Allison, M. G. E. Bennett, W. S. Smith, D. Scott Allen.





FIRST ROW—Pauline R. Mantle, Annie McCullough Brownlee, Katherine L. McLeod, Lulu Hartwig, Dora Peery Boice, Josephine Hartwig, Daisy E. Washburn.
 SECOND ROW—Fannie Singer, Emily Rutledge, Sarah H. Middleitch, Harriet S. Owen.

THIRD ROW—Lulu F. Stoltenburg, May Vanderburgh, Josephine A. Trabue, Ollie H. P. Myers.

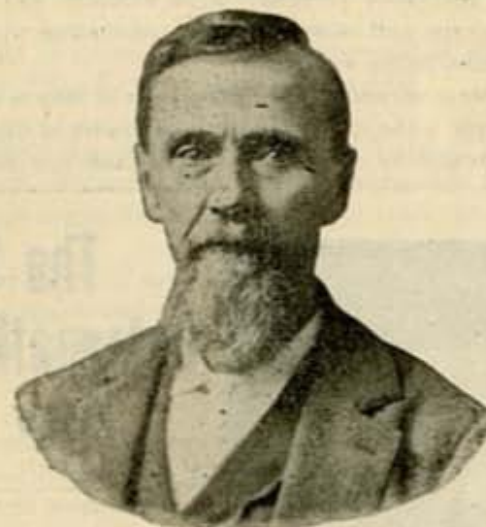
FOURTH ROW—Mary L. Spaulhurst, Celia J. Newman, Edna M. Apthorpe, Frances A. Howe, Lena Prather, Rose Bolan, Mercy Minor Larsh.

A FEW THOUGHTS ON DIGESTION.

A. T. STILL.

We to-day know just about as little of the process of atomizing food as Adam and Eve did when they ate their first apple.

We find fluids of different kinds in the stomach, bowel, pancreas, liver, omentum, and the peritoneum. We analyze them, find differences in substance as we analyze the products of each division. We name each fluid, talk of chemical action and suppose and call this process digestion and stop. We find fluids collected in a tank called the receptaculum chyli, conducted by the way of the thoracic duct to the heart, then to the lungs and drop the subject



of digestion, go to supper, eat, drink and gorge again and ask no questions of Edison, Morse or Franklin about the power of electricity to atomize food by its powers, to explode compounds while in the stomach. Perhaps an electrician would tell us that the brain is a dynamo, the nerves the wires that conduct the electricity to the stomach and bowel and atomize the food by the motion given to electricity by the action of the heart. Perhaps Edison would say the stomach and bowel are only vessels to hold the chemical compounds till electricity produces the action of combustion, and that electric combustion is all there is to digestion.

I reason that when compounds enter the stomach or bowels that electricity comes in contact with the food by the way of the nerve system and thrown off at nerve terminals in mucous membrane of the alimentary canal. Thus the transfer of electricity from the nerves to the food to be atomized. We know

a stroke over the back of a cat, dog, horse or other hair covered animals produces snapping of electricity; striking of a friction match will explode the compound by action of electricity. Edison would see the point at once and say, Amen, and so do you.

If the body is a machine then we can expect to find perfect work prepared for in all the parts. Then we will start with the completed man and examine the parts of power producing, the application of power, then the chemical laboratory, how it gets solids to fluids and gases, then back to solids. Then if all atoms are the result of chemical action, we must be correct, know what part electricity plays or we may be blanks on the "hows" of digestion. If electricity is the motor power of nature we must learn or fail to succeed.

Electricity is the chief factor in digestion. Every part in the body of man or beast shows to the electrician that the preparation to generate, store and apply electricity is absolutely perfect. If we examine and reason we see all acids, minerals and vats, and storage battery conducting wires and the engine or heart to give motion to the electricity.

All is before your eyes, and if you have power of reason above an idiot you will see that electricity is the motor power in all grades of digestion.

For further information consult electricians and you will be rewarded.



The Smith Osteopathic Swing Price \$4.50

Swivel Stirrups, Treating Board, Self-locking table Lift, Convenience Comfort, Ease. Do you use a swing? Get a Smith and save your strength.

E. W. Raymond Morelock

THE BULLETIN

OF THE ATLAS AND AXIS CLUBS.

SUBSCRIPTION, \$2.00 PER YEAR

W. W. VANDERBURGH, EDITOR.
MRS. ANNIE BROWNLEE, Reporter for Axis Club.

Entered as second class matter, October 12, 1903, at the postoffice at Kirksville, Mo., under act of Congress of March 3, 1879.

KIRKSVILLE, MISSOURI, JUNE, 1905.

EDITORIAL.

We are pleased to announce the reinstatement of Drs. H. B. Sullivan, Frances A. Turfler, Fred F. Coon and J. J. Schmidt.

We are in receipt of a copy of Osteopathic Truth. This paper is gotten out by Dr. Charles H. Murray of Elgin, Ill. The object of the publication is to educate the laity and the initial number certainly is an educator.

Dr. R. E. Hamilton will hereafter be editor-in-chief of the Journal. Dr. Hamilton is a progressive and apt student and is particularly adapted to the position he has been chosen to fill. We bespeak for him and the Journal a bright future.

In this issue will be found an appeal to osteopaths to work for Dr. Still for one of the Nobel prizes. Dr. Hamilton clearly sets forth the reasons why you should work and work earnestly to secure this prize. We all know what it means to the profession to have Dr. Still head the list of Americans who are contending for this honor. We also know that he is entitled to it. Let us then see that he secures just recognition for the great work he has done for all mankind.

That the 7th and 9th nerves of the Atlas and Axis Clubs were functioning properly when their appetites were excited for the following members: John F. Bone, Chas. S. Fisher and C. O. Cline of the Atlas Club and Celia J. Newman, Pauline Mantle, Annie McCullough Brownlee, Eliza Mantle, J. Grace Prindle, Josephine Hartwig, Lulu Hartwig and Katherine F. McLeod of the Axis Club, is shown by the fact that all successfully passed the Illinois State Examination.

We have issued a twenty-four page supplement to this issue. The Club has

gone to the trouble and expense of getting this special issue out for the benefit of students not members of the Clubs. Dr. Hoffman's article is given in full, making it more convenient than when appearing in two separate copies. Dr. Baughman's article on Compared Therapy is also reprinted. We can supply a few hundred copies for distribution at a very reasonable rate. Single copies, five cents. For further particulars address, Frederick J. Eimert, 201 E. McPherson, Kirksville, Mo.

* * *

A new epoch in the lives of the Atlas and Axis Clubs will begin with the inauguration of the three year course. This will be a critical period through which the Clubs must pass. The extension of the college course adds greatly to the expense of the students, consequently they will spend less money in a social and fraternal way. While a perusal of the curriculum might lead one to think that it would not be so necessary to secure practical work outside the school as it formerly has been, at the same time it can readily be seen that although this step taken by the college will greatly further the science, there is still room for advancement and the Atlas and Axis Clubs should be great factors in this advancement. We do not think that any one expects the next few classes to be so large as the present classes are. We must therefore expect a smaller Club membership for a time at least. According to the law of the conservation of energy, there is the same amount of energy in the world today that there was at the time of its creation. We might apply the same line of reasoning to the American School of Osteopathy as it is today and as it will be when the new classes have entered, in that there will be the same amount of brains and energy in the new classes that there is in the present but it will be crowded into fewer individuals. In the early history of osteopathy, many left the plow to study the science without having previously attended school, two years seeming a short cut to professional life. One cannot peruse the later catalogues without seeing the scientific phase of our work. This, coupled with the increased length of time given to master it, will turn many bright minds this way. The classes have always contained many educated persons but as time goes on the percentage of such people will increase. The Atlas and Axis Clubs, too, have had in their membership the highest intellectuality of the school. That this condition will continue to exist there can be no reasonable doubt. As stated before in all probability there will be fewer initiations hence less money to carry on the work. To those who are in arrears, we ask the earnest consideration of these statements. While the Clubs have managed thus far to send you The Bulletin, they can no longer continue to do so unless your indebtedness to them is cancelled. Under the impression that your intentions were honorable, the Clubs have carried you as members believing that when circumstances would permit you would meet your honest obligations to them. There is still about \$1000 due the Clubs from the field, so now brothers and sisters dig up.

The Clubs fully realizing the changed condition have elected the strongest possible officers to meet the emergency. For the first time in the history of

the Atlas Club a Junior will occupy the chair of Noble Skull. Mr. Hugh L. Russell, who has been chosen to preside over the destinies of the Club during what will perhaps be the fasting period, is without doubt the most capable man in the Club for the position, and, backed as he will be by the brains and back bone of our organization, we expect his administration to meet all difficulties and bring the Atlas Club through with flying colors.

The Axis Club, also, has elected a strong corps of officers. The new president, Miss Jessie Catlow, is a woman of estimable character, a logical thinker, who is capable of expressing her views in a clear and comprehensive manner. She has the united support of the Axis members all of whom have the greatest admiration for her, recognizing in her a leader of unusual ability, who has the courage of her convictions and the welfare of the Axis Club at heart.

* * *

In laying aside the duties of editor of the Bulletin we desire to thank those who have so ably assisted us in our undertaking. In this connection we refer particularly to our co-worker, Mrs. Annie McCullough Brownlee. Mrs. Brownlee has labored earnestly to make The Bulletin interesting to our Axis readers and from the letters we have received from the field we feel assured that she has been eminently successful in her undertaking. Mrs. Brownlee has not been content with her work on The Bulletin but has been a power for good in the Club. Her successor has not been appointed but we hope that the one who succeeds her will continue the line of work inaugurated by Mrs. Brownlee. We also wish to thank Drs. Gerdine and Hoffman and our friends in the field from whom we have received much excellent material. Dr. M. E. Clark will have our everlasting gratitude for his valuable contributions and the many excellent bits of advice he has given us.

To those who confiscated the stamp we inclosed when requesting articles we offer up full forgiveness but we hope that their practice will increase sufficiently to enable them to send something to our successor, Mr. A. W. Rogers. Mr. Rogers is a man of great ability and his years of experience in educational work renders him especially adapted to the position of editor. However well qualified he may be, if The Bulletin is to improve as it should, assistance must come from those whose study and professional experience render them capable of preparing something with scientific merit. W. W. VANDERBURGH.

SCHOOL NOTES.

Dr. L. von H. Gerdine will start for Chicago immediately upon the close of school. Dr. Gerdine will take the summer course at Rush Medical College.

* * *

The Old Doctor and Dr. Charlie have returned from an extended trip through the east. Both are in the best of health and enjoyed the trip immensely.

* * *

Dr. E. C. Link expects to remain in Kirksville during the summer. He will be engaged the greater portion of his time treating or lecturing at the school.

* * *

Material is now on the ground and work on the foundation for the new hospital has begun in earnest. The corner stone will be laid on June 22, commencement day.

* * *

Drs. George Laughlin and F. P. Young are contemplating a trip through the west this summer. If all arrangements are perfected they will go through the Yellowstone National Park and visit the Portland Fair.

* * *

Dr. W. D. Dobson will remain on the treating staff and lecture to those taking the summer course until about the first of August. He will then go to the A. O. A. convention in Denver and complete his vacation in Colorado.

* * *

Dr. Warren Hamilton will erect an elegant residence on the corner one block east of the Still Hotel. Dr. Hamilton has several lots and will have a beautiful home and a convenient location.

* * *

The Missouri Osteopathic Association which met at Springfield last week was attended by Drs. George Laughlin, M. E. Clark, C. H. Hoffman and F. P. Young of the A. S. O. faculty. During their absence Dr. Nettie Olds Haight lectured on Children's Diseases and Dr. George Still on Surgery and Pathology.

* * *

The A. S. O. has had a number of visitors from the Des Moines School during the past month. The students from the Still College are unanimous in their praise of the parent school and they will be glad to make the change next September.

* * *

Dr. E. G. Starr of the A. S. O. faculty was married to Miss Bessie Smith of this city, June 14th, 1905. Doctor and Mrs. Starr will attend the Portland Fair and visit the Doctor's parents at Eugene, Oregon, spending the entire summer in the west. With the beginning of school Dr. Starr will resume his duties as prosector for the college.

The seniors had quite a little excitement Wednesday morning, June 7th. A portion of the plaster broke loose from the ceiling of Memorial Hall, and came down with a crash. Some of the pieces struck Dr. Graves upon the head causing him considerable pain though not seriously injuring him. Several others narrowly escaped.

* * *

Considerable grading has been done east of the main building. The slope leading from the side walk to the basket ball court has been removed, the dirt being used to level up the north end of the campus. This adds greatly to the appearance of the grounds, it will also be greatly appreciated by the foot ball squad when working out this fall.

* * *

Dr. M. E. Clark has purchased a five acre tract adjoining the Old Doctor's on the south. Dr. Clark will take his vacation on his farm just treating enough for exercise. He intends remodeling the dwelling on his recent purchase and will, in all probability, move into his new home before school commences this fall.

* * *

Dr. W. R. Laughlin will continue his anatomy lectures during the summer course. He will also have charge of dissecting. Dr. Billie has his freshies responding to the usual signals. Tyndal responds to the lumbar nerves. Nichols is flexor sublimus digitorum while Simon says thumbs up. At the conclusion of the summer course Dr. Laughlin and wife will attend the Denver meeting.

* * *

The Still College base ball team played the A. S. O. in Kirksville, June 2nd and 3rd. The teams broke even, A. S. O. winning the first by a score of 9 to 3, while the Des Moines boys took the second after an exciting twelve inning battle, score 6 to 3. At the conclusion of the second game the A. S. O. team played Highland Park College and won 7 to 6. Our boys won from the Still team in Des Moines 6 to 4.

ATLAS NOTES.

R. M. Farley and N. A. Johnson remain to dissect.

* * *

J. W. Martin will put in the summer at home, Yankton, S. D.

* * *

J. W. Robinson will visit at Ashtabula, Ohio and Erie, Pa.

* * *

George A. Wells returns to the farm at Waxahachi, Texas.

* * *

C. B. Ingalls will spend the greater portion of his vacation period at home, Perry, Ill.

O. S. Leitch expects to assist his wife with her practice in St. Louis this summer.

O. C. Robertson will spend the greater portion of his time at home, Utica, Ky.

F. E. Root expects to turn his vacation into one of profit. He will work in Western Illinois.

W. H. Bennett will visit for a time at Owensboro and Maxwell, Kentucky. His address will be Maxwell.

C. A. Wilske will take pathology here and then go to Chicago where he expects to take dissection at the Littlejohn's.

H. M. Frazer will be in the office with Dr. H. K. Bennison at Clay Center, Kansas, which is also Dr. Frazer's home.

E. B. Hart will remain here. Mr. and Mrs. Hart will commence house-keeping for the first time in ten long months of married life.

A. W. Rogers returns to his summer home, Bryant Pond, Maine. Mr. Rogers will also visit Boston and other eastern cities before returning to resume his work.

J. P. McCormick remains to take dissection. Mr. McCormick is now Pylorus and will receipt for all dues sent in during the summer as gladly as he would if the Club were holding its regular weekly meetings.

C. S. Fisher will visit at home, Milwaukee, Wis., at least until he hears from the Illinois State Board. He took the examination in East St. Louis last month and if he was successful he may practice a short time before returning.

H. L. Russel and wife go direct to Anoka, Minn., to visit his wife's relatives, after a short stay there they will go to the Bay of Funday for the balance of their vacation.

Messrs. William E. Reese, Carl D. Clapp and D. Scott Allen left for Columbus, Ohio, on the 7th, where they took the examination before the Osteopathic State Board.

The Club acknowledges receipt of an invitation to attend the graduation exercises of The California College of Osteopathy which were held in Golden Gate Hall, 667 Sutter Street, San Francisco, California. We are pleased to note that brother Frank L. Martin occupies the chairs of Pathology, Bacteriology and Anatomy.

F. M. Plummer will spend his vacation at home, Orange, N. J., and will probably take up nursing, he having been a nurse for a number of years prior to taking up the study of osteopathy. He will, however, be on hand when school opens in September.

The officers elected for the ensuing term are as follows:

Noble Skull.....	Hugh L. Russell
Occipital.....	Thos. H. O'Neal
Stylus.....	H. M. Frazer
Sacrum.....	J. H. B. Scott
Radius.....	N. A. Johnson
Styloid.....	J. H. B. Scott
Receptaculum.....	F. E. Root
Pylorus.....	J. P. McCormick
Right Clavicle.....	C. A. Wilske
Left Clavicle.....	C. B. Ingalls
Ed. Bulletin.....	A. W. Rogers
	Dr. W. D. Dobson
Trustees.....	Dr. M. E. Clark
	Dr. J. H. B. Scott

J. H. Robuck returns to his home, Denver, Colo., for the summer. Mr. Robuck has the authority to represent the Atlas Club in any matters that may come up during convention week. We hope that the committee, that brother Plant refers to in his communication printed in this issue, will get together and accomplish much for the good of the Club. Mr. Robuck will be glad to meet and confer with this committee.

We give below as far as we are able the addresses of the outgoing Atlas men: D. Scott Allen will visit a few weeks at home, Chillicothe, O., and will then locate some where in Ohio, but has not yet decided upon a town. J. S. Allison expects to locate in California. M. G. E. Bennett, Eugene, Oregon. M. K. Cottrell, 318 Broadway, Patterson, N. J. Before locating in Patterson, Mr. Cottrell will visit a month with his parents in Chesterland, Ohio. F. A. Crofoot, Port Byron, New York. Carl D. Clapp will visit a month at Adrain, Michigan, after which he expects to locate in Ohio. Dabney L. Davis will visit a few weeks at home, Enid, O. T., and expects to locate in Oklahoma. A. H. Daniels will visit at home, Barry, Vt., for a short time. He has not decided upon a location. Robert T. Dowell goes to Fort Wayne, Indiana for a months visit, will then go to Patterson, N. J. to practice. John F. Bone will spend several weeks with his parents at Petersburg, Ill. He expects to locate in Illinois. O. H. Kent will visit for a time at Auburn, Nebraska. W. S. Smith returns to Sterling, Colorado, to visit home folks. Mr. Smith has not decided upon a location. J. O. Smith will spend a few days at home, Monroe, Wis.

consin. He expects to practice in Minnesota. C. O. Cline will return to his practice at Monticello, Ill. Dr. Homer Stewart who now has charge of Dr. Cline's practice, has not determined upon a location. H. B. Martin will visit his parents at Flushing, N. Y. His address will be 44 Main St, Flushing, N. Y. Mr. Martin will practice in New York City. E. R. Ryerson, Lincoln, Nebraska. John McManus will be at home, Baird, Texas, for a few weeks after which he will practice at Abilene, Texas. J. J. Walker, Middleport, N. Y. W. E. Owen, New York State. J. W. Tarr will spend a few days at home, Moravia, Iowa, and will locate in Duluth, Minn. A. S. Piper, Minneapolis, Minn. F. E. Hastings will be at home for a month, he expects to locate in Washington State. John Rieger, Red Lodge, Montana. N. C. Hawes will visit for a time in Chicago, has not decided upon a location. W. H. Elmore will visit for a time at Chula, Mo., has not decided upon a location. W. W. Vanderburgh will visit for a time at Soledad, California. O. M. Calland will visit in Olathe, Kas.

* * *

Thos. H. O'Neal will remain for dissection and will then go to Denver for the summer.

* * *

Mr. E. W. Raymond Morelock remains in Kirksville. Mr. Morelock will take no advance work. He says he can get enough to do in the regular course, so will rest during vacation.

* * *

One man, Mr. C. A. Lumsden, escaped the black-baller since our last issue. Mr. Lumsden was a timber buyer in Arkansas before taking up the study of medicine at the Louisville Medical College. At the conclusion of his vacation after a years' study in that college, he chanced to meet Dr. Glenn of Stuttgart, Ark., who convinced him of the superiority of osteopathy and he came to the A. S. O. instead of returning to Louisville. Mr. Lumsden is highly pleased with the change and says that our school is much more thorough in its work,

ATLAS FIELD NOTES.

Dr. W. C. Stevenson, Westport, Ind.: "I regret very much to see some of the brothers let their dues lapse so far in arrears as to come under penalty and think it must simply be due to carelessness or neglect, in fact, know it is with a great many as I notice the names of some of the staunchest members we had appear among the names published. How much I should like to be there for your smoker. I enjoyed our final reception more than any other social function of the Club. It is the one most lasting."

* * *

Dr. Fred F. Coon, Niles, Mich.: "Give my best wishes to all the boys and tell them to enjoy the Club while they have a chance.

I have been out now a little over two years and my faith in osteopathy is as firm as a rock and growing every day. I am doing a big business up here in

Michigan, doing what the M. D's. can't. That is how I make a living—doing what they have failed to do."

* * *

Clinton D. Berry: Tell the boys for me, that it is worth something to be an "Atlas man" and also to graduate from the A. S. O. for as I mingle with fellow osteopaths, I find that the pure and unadulterated osteopathy certainly is found in no other school as at Kirksville.

Get all you can of it and never for a moment feel that a case is too simple to spend time with, for as you get into the field, entirely upon your own resources. So many cases will come up and you will think if I could only consult Dr. George, Dr. Clark, Dr. Dobson, Dr. Link, etc., I would give anything but that time has passed and you alone will have to decide the question, so load and load heavy for you will need it.

* * *

Dr. Ernest A. Plant: The May Bulletin received and my eye has just fallen on Dr. Chile's suggestion on page 33 for Atlas and Axis reunion at Denver and I hasten to call attention to the fact that, as far as the Atlas Club is concerned, a committee of our field members (elected at St. Louis last July—see page 29 of Bulletin for September, 1904), already has the responsibility of social and gastronomic features at Denver. The chairman of the committee is our brother, Geo. W. Riley of New York City, and the writer hereof is now in correspondence with him about matters of vital importance to be brought before the brothers for their consideration at that time, in accordance with vote of Club last December or January on acceptance of report of a committee on amendments of which I was fortunately or unfortunately the chairman.

Dr. Riley is doubtless in correspondence with headquarters now and will probably mention need of some things being put in June Bulletin, but if he doesn't, I think it would be to the Club's interest if you put the preceding paragraph therein.

* * *

J. W. Sylvester: Reading the letter in this month's Bulletin from the Kansas Doctor, put me in mind of my dues and I herewith send you them for 1905. I cannot agree with the Doctor in his ideas in regard to field members. I consider that we are getting off mighty cheap for there never has been a time when the Bulletin was not worth a dollar a year say nothing of the pride you feel in belonging to an association like the Atlas Club. This last number is worth the price of the dues for the year and it is to any thinking progressive osteopath. I heartily endorse brother Fisher's idea about a building. We ought to feel that we are in duty bound to help one another, and especially our own brothers and sisters. You boys that are there trying hard to get all out of work that can be gotten need our little help, and what is a dollar a year, that means for me to smoke one less cigar a month, to help some brother who is probably spending his last cent to get through. I belong to several secret organizations, but I would put my hand in my pocket to help an Atlas brother quicker than I would for any the rest of them. My advice to

Brother K. and all others who are growing lukewarm is to get into line it won't be but a few years till all those who are not Atlas men will say. I made a mistake. I often think of you all and what a lot of cranks we were and wish I had my life to live over again there. I would make amends for all the little petty quarrels I was in. Life is too short for those things. Here is my money and if you need more to help along with the parties and entertainments, I will be glad to give it if I have to sell old iron nights to get it. Nothing does one so much good, as to be made to feel at home when he is away from home and that is what the good true royal Atlas man tries to do.

* * *

A. R. Tucker: "I thoroughly enjoy the Bulletin and think it well worth one dollar a year. I can't understand why some are kicking on paying dues unless they expect something for nothing, and that we don't often get in this life, at least the D. O's. in N. C. don't. I am mighty sorry to see some good men dropping out and if they will reconsider the matter, they will certainly "pay up" and ask to be reinstated.

* * *

Dr. Frank H. Smith: "I have been very much surprised that so many of our field men are kicking on paying [the field dues. The Club Bulletin is certainly worth all we have to pay for it, and I regard my dues simply as a subscription to our publication. I believe we field men are much more able to pay for this, (and ought as a matter of justice to do so) than the active members, and certainly we are the ones who profit by it.

I am proud of my Atlas pin, and I am always glad to assist an Atlas brother when possible. When I want genuine osteopathy I go to an Atlas man, because they are usually more competent and more thorough.

* * *

Dr. Clifford Klein, McKinney, Texas: "It is with surprise that I have noted the kicks registered by several of the members relative to the matter of dues. It does not seem possible that any one who enjoyed the profit and social intercourse of the Club should wish to deny to the resident members anything which might further their individual interests or in any way contribute to the pleasure of the Club body. And while as was stated in the last number of the Bulletin all social features are borne by the resident members I feel assured there are those of the field who would willingly make any reasonable donation to defray such expense if it should be deemed necessary. The social items make pleasant reading for they always recall the gracious hospitality which dominates all true college fraternities and organizations. My best wishes for the Club's future prosperity.

I herewith hand you the report of the sixth annual meeting of the T. O. A. held in the parlors of the Hotel Delaware, Ft. Worth, May 18th and 19th. The meeting was largely attended from every portion of the state and the secretary's report showed the association to be in a more prosperous condition than

at any time in the past. The following papers were read and discussed: Dr. A. P. Terrell, Dallas, "Osteopathic Specialists"; Dr. J. L. Holloway, Dallas, "Osteopathy, The Right Way"; Dr. T. L. Ray, Ft. Worth, Tubercle, Bacillus, A Harmless Germ"; Dr. A. L. Randell, Sherman, "The Need of Osteopathic Legislation"; Dr. D. S. Harris, Dallas, "Neuritis"; Dr. J. F. Bailey, Waco, "Insanity"; Dr. E. E. Edmondson, Galveston, "Occupation Neurosis"; Dr. C. A. Campbell, Victoria, "The Spine."

The following official body elected for the ensuing year: Dr. A. D. Ray, Cleburne, president; Dr. E. E. Edmondson, Galveston, vice-president; Dr. J. L. Holloway, Dallas, secretary and treasury. Trustees: Dr. T. L. Ray, Ft. Worth; Dr. J. F. Bailey, Waco; Dr. D. S. Harris, Dallas; Dr. W. E. Noonan, San Antonio; Dr. D. L. Clark, Sherman; Dr. M. B. Harris, Ft. Worth.

The local osteopaths provided several pleasant diversions for the visiting members. Association adjourned to meet next time at Waco.

* * *

Dr. L. S. Irwin, Washington, Pa.: "I am surprised to see some of our members finding fault with this yearly assessment. Their objections are of the poorest and am pleased to see you go after them.

I see that one member makes the statement that no Frat. men pay dues after leaving college. Well I have been out of school for some few years, but have been paying an assessment of \$2.00 annually for a publication similar to the Bulletin, and know of other fraternities that are conducted along the same lines. The brother from Kansas would no doubt, have died from heart failure had he been in school when Knapp, Allen and Montague and one other member, composed the committee on entertainment. That committee, backed by the Club, gave several dances and managed to pay for them without assistance from the field members. You know "all work and no play," etc., applies in Kirksville as well as in any other community.

I look forward with pleasure for the article promised by my friend, Dr. Jim Holloway, late of Arkansas.

* * *

Born, to Drs. W. L. and Alice Thomasson, Terre Haute, Ind., April 28th, a son.

* * *

Dr. A. E. Robertson has moved from Brainard, Minn., to Winnipeg, Manitoba, Canada.

* * *

Dr. Charles L. Severy has moved from 97 Lysander St., to 232 Woodward Ave., Detroit, Mich.

* * *

Born, to Dr. and Mrs. A. M. Keith, Greenville, Ill., April 28th, a nine and one-half pound boy.

* * *

Drs. Norman J. Sickles and Lamar K. Tuttle have opened a branch office

at 20 Elm Street, Morristown, New Jersey. Their New York City address is 38-40 W. 33rd St.

* * *

J. A. DeTienne: "It is refreshing to know how effectual has been the adoption and publication of the "Fullam" resolution regarding Atlas members in the field.

Is it not possible that those who are being dropped are men who did not devote their time and energy unselfishly to the club while they were in school? The men who fought battles for the integrity of the club will stand by her and the Bulletin to rid her of the rubbish. I hope you are sending the Bulletin to the men who have been expelled or suspended, it might bring conviction to a good many to know how loyal, genuine Atlas men are to the club's future welfare and how indifferent they are as to whether or not the delinquents and malcontents stay in or not."

If field men consider membership in the Club any advantage to themselves and to the profession they will be willing to support it. If they do not they will not be willing to support it. The welfare of the Club is safer in the hands of the former."

We believe that some of the strongest men the Club ever had are among those suspended for non-payment of dues. Why this is, in most cases, we are unable to say but some became angered because it was found necessary to resort to such strenuous measures to collect. In this we do not think they are justified as statement after statement was sent them and the Club was not even given the courtesy of a reply. We, however, most certainly desire to see these gentlemen reinstated.—Ed.

AXIS NOTES.

Mrs. Isabelle Miller made a flying trip to Chicago last week.

* * *

Frances H. Singer, Lenna Prater and Frances A. Howe remain for the present in Kirksville.

* * *

Miss Jessie Catlow has been delegated to represent the Axis Club at the A. O. A. meeting in Denver this summer.

* * *

Dr. Jennette Allison visited the Club recently and entertained us by reciting some interesting and funny experiences in the field. The Dr. is practicing at Maryville, Mo.

* * *

The farewell reception to the Seniors is to be given Friday night, June 16th at which time the officers for the ensuing term will be installed. The heartiest good wishes of the Club go with our departing members who so signally helped in time of stress and storm and now leave the Club in a condition of unprecedented prosperity.

Resolved; We, the members of the Axis Club, do extend our heartfelt sympathy to the friends of Dr. Bertha Rhoads Lacy of June class, '01, in the loss they sustain in her recent death.

Be it also resolved, that in her death the Axis Club has lost a worthy member,

And be it further resolved, that a copy of these resolutions be sent to the friends of Dr. Lacy, also spread upon the records of the Club and printed in June number of Bulletin.

JOSEPHINE TRABUE,

MARTHA FOSS,

FRANCES PLATT, D. O.,

Committee.

* * *

Mrs. Daisy Pennock, wife of Dr. L. N. Pennock, was admitted to membership May 31st. Her husband is an Atlas man practicing at Norborne, Missouri. Mrs. Pennock is a member of the Junior class.

* * *

The Axis Club received the Freshmen ladies on the evening of May 19th. The special reason for this was the fact of so many new additions to the class since the joint reception earlier in the term and the necessity to acquaint stranger students with the existence of an Axis Club home and the charms and benefits of membership.

There was much social converse all through the evening varied by a splendid address by Dr. Hoffman and short speeches by Miss Prater, Drs. W. R. Laughlin and L. von H. Gerdine. Miss Morrison also pleased the company by singing in her usual charming style.

Punch and wafers were served throughout the evening. Some played games, and some danced. A few of the Atlas gentlemen dropped in late and were made welcome.

The wives of Drs. Hoffman, Gerdine, Link, C. E. Still and W. R. Laughlin honored us by their presence.

* * *

In accordance with the provisions of Article X, Section 3 of our By-laws, the Club on Wednesday, May 31st, at regular session, voted to suspend the following members: Carrie Ashlock Cramb, Mrs. Willie Bonta, Miss Lulu Burris, Mrs. Evelyn Bush, Mrs. Etta Kelso Curry, Miss Jennie Evans, Miss Nellie Evans, Mrs. Eva A. Ganong, Miss Nell Marshall Giddings, Mrs. Ada Harding, Miss Myrtle D. Harlan, Miss Cassie Hubbard, Miss Grace Huston, Miss Katie Huston, Miss Fanneal Harrison, Mrs. Lyda Henderson Betts, Jessie B. Johnson, Sophronia B. Kelso, Mrs. Margaret S. Laughlin, Mrs. Ellen Barrett Ligon, Mrs. Lottie Linder, Mary Isabell Mahaffey, Mrs. Caroline Beardsley Martin, Mrs. Ella B. May, Mrs. G Belle Fleming Muttart, Florence McCoy, Anne McGavock, Ella May McNicoll, Blanche McLaren, Mrs. Lenore Kilgore Molesworth, Kate L. Norris, Jennie Bell Neale, Mrs. Lou Blake Regan,

Della Renshaw, Mrs. Emma Rickart Rochester, Mrs. Fannie Vance Seaman, Loa E. Scott, Mrs. Minnie Stanley Miller, Madeline Stravens, Jean Moore Tyndall, Mrs. Frances McFall Watson, Jennie Wyckoff, Isabelle Robertson, Minna R. Boyer.

Provision for reinstatement is made in our By-laws as follows:

Article X, Section 4: "A member having been suspended for nonpayment of dues may be reinstated upon the payment of all arrearages, and by a vote of the chapter at any regular meeting, a three fourths vote of all members present being necessary for such reinstatement."

The present number of the Bulletin is sent to the suspended members for official notice of the action of the Club but after this time the Bulletin can not be sent to any who do not assist in defraying the expense of its publication. The editor has fully explained on page 20 of the May number as to the usefulness and cost of such a publication and we know that those who value it are willing to pay for it. We sincerely hope that all our suspended members will take proper steps for reinstatement early in September for the mutual benefit of both themselves and the Club.

We are now on a splendid working basis and the only way to keep the present success and insure its continuance is to enforce our laws. Those affecting our finances are among the most important.

The officers selected for the new term have been very carefully chosen and with that very object in view that obedience to our vows shall be enforced. The seniors who are now changing their relations to those of graduate members have still the best interests of the Club at heart and hope for the perpetuity of the Bulletin in order that communication with the Club may continue. In proof of this they are paying their first year's dues as graduate members in advance.

* * *

New officers elected for next term are as follows:

President.....	Miss Jessie Catlow
First Vice-President.....	Frances Butcher
Second Vice-President.....	Mrs. L. A. Rockwell
Recording Secretary.....	Miss Annie Roberts
Financial Secretary.....	Miss Mary Walters
Corresponding Secretary.....	Miss J. Grace Prindle
Treasurer.....	Miss Mary Balfe
Chaplain.....	Mrs. Sarah Russell
Escort.....	Miss Mary Shepherd
Janus.....	Miss Augusta Nichols
Historian.....	Miss Amanda Hamilton
Librarian.....	Miss Martha Foss
Assistant Librarian.....	Mrs. Lillie Collier

* * *

Addresses of graduating members are:

Katherine L. McLeod, Newcastle, New Brunswick, Canada.
Dr. Frances Platt, 813 Hazard Ave., Kalamazoo, Mich.

Josephine A. Trabue, Pittsburg, Kansas.
Pauline R. Mantle, Springfield, Illinois.
Sarah H. Middleditch, Petoskey, Michigan.
Margaret Messick, 1306 North 5th St., Quiney, Ill.
Eliza Mantle, 317 East Jefferson St., Bloomington, Ill.
Josephine Hartwig, Lincoln, Illinois.
Lulu Hartwig, Lincoln, Illinois.
Dora Peery Boyce, 408 Franklin Ave., Trenton, Mo.
Edna M. Apthorpe, 228 E. Genesee St., Auburn, N. Y.
Daisy E. Washburn, Port Clinton, Ohio.
Celia J. Newman, Griggsville, Illinois.
Mary L. Spaunhurst, Heber, Arkansas.
Annie McCullough Brownlee, Edina, Mo.
Emily Rutledge, undecided.
Harriet S. Owen, New York State.
Rose Bolam, Dallas, Texas.
Merey Minor Larsh, Belvue, Kansas.
Ollie H. P. Myers, 109½ N. R. R. No. 2, Dorris, Ottumwa, Ia.
Lulu F. Stoltenburg, Dinuba, Calif.
May Vanderburgh, Soledad, Calif.
Frances A. Howe, ————
Dr. Elma Harbert has resumed her practice at Richmond, Mo.

* * *

The business of organization of chapters in other schools was taken up at the regular session on Wednesday, May 24th; this was three weeks later than the time set for considering the matter and although many graduate members had written letters to the Club and many had paid their dues, only six of the number expressed opinions as per the request published in April Bulletin. Three of these were in favor of extending the organization into other schools and three were opposed, hence the decision was left entirely with the active members. As it is now too late in the session for any work towards extension to be made effective, the Club decided to do nothing for the present, leaving the subject open to future discussion. It should be taken up soon after the opening of school next autumn provided nothing is done by the members at Denver in the summer. We recommend that those members desiring the organizations who have written to the Club put themselves in communication with those who will attend the A. O. A., or better that they themselves attend and there assist in perfecting arrangements by which the machinery of organization shall be successfully launched.

It was the express intention of the founders of the Axis Club to organize chapters in other osteopathic schools of recognized standing and it is our unqualified opinion that such a course will greatly aid and strengthen our work as osteopaths and our influence as Axis members. We sincerely hope the discussion of the subject will be resumed at Denver and all preliminaries finally concluded.

AXIS FIELD NOTES.

Dr. Clara Rhotchamel, Lancaster, O.: "I enclose a check for \$2.00, the amount of dues, which closes my account with Axis Club. This does not sever my interest in the Club as it will ever be of the keenest kind and my best wishes are for its maintenance and success."

* * *

Florence Brown Stafford: "It is with great pleasure I enclose you a check for dues long deferred which I have often intended sending and which I have as often neglected. If my interest in the Axis Club were measured by my faithfulness in discharging my only—almost my only—duty to it I fear I should fall very short. I realize that any excuse, however, would be inadequate for such negligence is really very unpardonable."

My very best wishes for the success of the Club and the hope that in the future I may be of more account to it than I have been before, since leaving the alma mater."

* * *

Axis members who have paid up: Drs. Susan Balfe, Clara J. Rhotchamel, Laura DeLong, Mary E. Pratt, Zeula A. Nevius, Florence Brown Stafford, Minnie Schaub, Mary Wheeler Walker, Elvira Tracy, Mary E. Pratt, Julia K. Dorrance, Julia A. Fogarty, Alice Thomasson, Lucy F. Thompson, Etta Wakefield, Sophronia G. Rosebrook, Harriett Van Deusan, Mary E. Noonan.

* * *

Mina A. Robinson: Will you please change the name and address of "The Bulletin" from "Mina Abbott" to "Mina A. Robinson." I was married February 8th, 1905, to Chas. E. Robinson of Hanford, Calif., at Visalia.

I wish to be always notified when I am delinquent in the Club as I always look forward with pleasure to the appearance of "The Bulletin" and feel proud of its continued improvement and think it fully compensates for the small amount of dues we field members are taxed.

With best wishes for every success of the Club and its members.

Harriett A. Whitehead: In reply to yours, enclosing bill, I send you my check for two dollars. I am frank to confess that I do not send the money cheerfully, for I feel that I do not get "valued received." I do not think it right for field members to have to pay two dollars per year. It seems just like throwing that much away.

The "Journal" keeps us posted on the changes, improvements, and happenings at our alma mater, which leaves practically nothing for the "Bulletin" to give except "Axis Notes," which have little or no interest for field members who have been away from their alma mater a year or two, as the very names of the school members are strange to them.

When you have been out practicing two or three years, you will look at this matter from the same view-point that we field members do now. You will come to see that it is of no practical value to a field member to be an "Axis woman."

In this day of a great multiplicity of clubs, it means nothing to the laity to tell them that you are a member of the Axis Club.

I note what you say about the by-laws providing that graduate members pay no dues after five years.

According to that, I shall have to pay but once more.

But that is too long. They ought not to pay longer than three years. When you get out in the field, you will find so many ways for your money that you won't feel like squandering ten dollars for nothing.

Pardon me for expressing myself so frankly on this subject, but the time is coming when you will, doubtless, look at this matter through the same "camera obscura" that I now do.

You refer me to an article in the April "Bulletin." I have not received it. Will you kindly see that a copy is sent me?

Miss Whitehead changed her address and did not notify us which accounts for her not receiving her April Bulletin.—Ed.

* * *

Zeula A. Nevius: In this busy workaday world one's best intentions and resolves, to keep in touch with Club and school, become swallowed up as it were, and one's friends sadly neglected.

Those good old days though, always remain with us, as a sweet, sacred memory of the past, even if silence does often misrepresent that fact.

Once in the field you will readily experience the thousand claims on your attention which form a barrier to helpful letter-writing. By the way, this aforesaid field, in which you are to test your power, finding the sweets—and some bitters,—will soon dawn upon your horizon, ushering in many and dire responsibilities, and the much to be regretted knowledge of "How little one knows after all research."

Standing out in bold relief will be the wonderful mind of—and your increasing admiration for—the Good Old Doctor, the author of this wonderful science.

When in sickness and suffering you can stretch forth your hands, through his researches, and witness the healing powers of "his" science, you will feel amply repaid, for all struggles of school life and each day, more and more appreciate the honest efforts of able instructors.

I am perfectly in love with the work finding every day new surprises even though some failures, attributed usually to personal inability—beset my efforts.

Let "knowledge of the science" be your watch-word morning, noon and night, for therein lies the power over the wonderful human machinery. There is positively no flaw in the science osteopathic.

Wishing all many possibilities and successes.

* * *

Dr. Elvira Tracy has moved from Hotel Wynstay to 78 Norburton Ave., Yonkers, N. Y.

Dr. Etta Wakefield has moved from 473, 14th St., to 714 Union Savings Bank Bldg., Oakland, Calif.

* * *

Dr. Laura DeLong, Reading, Pa.: "I get a great deal of pleasure out of the 'Bulletin' and trust it will continue to grow and prosper."

* * *

Dr. Minnie Schaub, St. Louis, Mo.: "I look forward with great pleasure to the receipt of the Bulletin as it keeps me in touch with the Club work both in school and in the field."

* * *

Dr. Harriet A. Whitehead has moved from Whitewater, Wis., to Spencer Bldg., Wausaw, Wis. She writes: "I wish to go on record as being heartily in favor of the suggestion made in the March Bulletin by Dr. Reuben T. Clark, that the Atlas and Axis Clubs jointly publish a descriptive pamphlet of osteopathy to be used by the Atlas and Axis members in the field."

* * *

Dr. Mary E. Pratt, Toledo, Ohio: "Ohio is a pretty good state in which to locate, and one who is well and strong and a hustler is bound to succeed, people in the main take rather kindly to osteopathy. So far as I know there are only three from the A. S. O. practicing here in Toledo."

* * *

Dr. Lucy F. Thompson, Walla Walla, Wash.: "Enclosed please find dues for 1905 and 1906. That as I understand entitles me to life membership, having graduated in 1901. It has been mere negligence that I have not remitted sooner, for I can assure you, we are always anxiously awaiting the arrival of the Bulletin."

* * *

OSTEOPATHY IN WASHINGTON, D. C.

Doubtless all osteopathic practitioners and friends of our science will be glad to hear of a new local organization founded May 5th, 1905—The Osteopathic Association of the District of Columbia.

Dr. Clarissa Brooks Tufts: "I enclose with this, subject to any alterations you may deem fit, an account of the organization of 'The Osteopathic Association of the District of Columbia.' I think it will especially interest readers of the Bulletin, as three of the five women members are Axis girls, and several of the men wear Atlas pins. I am very proud of the progress the Axis Club is making—and am very glad that we did not have our struggle of last year in vain. I shall always be gratified to the Club for much of my osteopathic development."

There is a charter membership of seventeen, and the officers are as follows: Dr. George P. Kirkpatrick, president; Dr. Alice M. Patterson, vice-president; Dr. Clarissa B. Tufts, secretary; Dr. Merton A. English, treasurer.

The objects of the organization, as outlined by Dr. C. F. Winbigler at the first meeting, are three-fold:

First, to advance our own proficiency in the science of osteopathy by having at each monthly meeting a literary program, dealing with osteopathic subjects;

Second, to meet any legislative crises, which may arise in the District;

Third, to promote sociability and fraternal feeling among ourselves.

We expect much for osteopathy from this organization, and shall always be glad to welcome to its meetings, members of similar osteopathic organizations who may visit our city.

CLARISSA B. TUFTS, Secretary.

* * *

Dr. Minerva Kenaga: As the time approaches for each class to graduate I think of the members of the Senior class who are to leave the home nest and go forth to uphold the banner of osteopathy. May success go with you and surely it will if you have improved your time and applied yourselves to your studies. I often think of Dr. Charley's saying: "You will succeed if you can deliver the goods." It is such a pleasure to relieve pain and see how we have certain functions under control. For instance in an obstetric case, the woman's third pregnancy. At the time of first parturition she suffered with intense pains in her lower limbs a day and a half. Then instruments were used. This time these pains started again and when I was convinced that the force of pains was going to the legs instead of dilating the parturition tract, I began treatment at parturition center and child was delivered in 10 or 15 minutes.

Perhaps you would like to hear of a few cases that have been quite gratifying:

TIC DOULOUREUX:—Woman, age 63 years. Neuralgia in face for 30 years increasing in intensity until 5 months before beginning treatment, when it became almost unbearable. Morphine did not ease pain. She was a nervous wreck. Had heart trouble, indigestion, torpid liver and constipation. Treatment relieved some, more as health improved, but in three or four months was in good health every way but the tic douloureux. It took 70 treatments to cure her but she is a very thankful woman. Her age and run down condition were against her. She had been a hard working woman. Was a farmer's wife and had eight children. I became very much discouraged and wrote to Dr. George about it. He wrote me "keep at it" so I did with the satisfaction of a complete cure. She had been obliged to use whiskey to stimulate heart as often as three or four times per week for five years. Had only one attack after beginning treatment and never used any more. Lesion for the tic douloureux was second cervical.

EARACHE AND DEAFNESS:—Child of four years. Had a slight rash so slight no heed was given or doctor called. Did not break out well. Earache followed. Cured in two treatments. Deafness followed in one ear in a few weeks. Cured in one treatment. Upper cervical tissues contracted and lymphatic glands swollen.

ABSCESS OF EAR:—Child of fifteen months. Brother of foregoing case. Same prodromal symptoms. Abscess ran three weeks. Tried many things. Delayed bringing him to me because they knew he would not allow me to treat him. Was very bashful. His mother held him down but the treatment in his kicking and screaming condition was of no avail. Here is a suggestion. Treat them while asleep. That evening after he was in bed and asleep I went to his home and treated him. He did not awaken. One more treatment while he was asleep cured the running abscess. Pus was green and very foul smelling. Scented whole house and the ear had been properly cleaned twice a day all the time. Think abscess was caused by an enlarged lymphatic gland just below ear that formed fistula to outer ear. At any rate when lymphatic drainage was opened up, the pus gradually ceased coming out of ear.

PALPITATION, INDIGESTION, GENERAL WEAKNESS. PARTIAL BLINDNESS IN ONE EYE:—Miner, thirty years old. Had worked only two months in last year. Two M. D.'s. said they could do nothing for him. Advised to go to springs. I gave him ten treatments and then he went to work in mines, hard work. Is getting along nicely. Feels stronger than for years. He had not been able to lie down for two weeks on account of palpitation. After two treatments no trouble. Had twisted 5th rib and 5th and 6th vertebrae. One eye was comparatively useless. Could not tell black from white three feet off. Can now read type one-fourth inch high and is improving.

I fear I am wearying you with case reports. There is one thought I want to leave with you. Don't treat too harshly. I have patients who tell me that other osteopaths have hurt them, making them so sore they have to go to bed. One case, a young woman took treatment until she had hemorrhage from lungs or throat. An M. D. was called and said: "Osteopathic treatment is too harsh for her. She is not strong enough to stand it." Such cases as this have hurt osteopathy very much here. It is hard to make people believe it is the osteopath who is to blame and not the system. You must set the lesions but when you have a weak person who is half lesions, don't try to set too many at once.

THE ATENUATION OF MISERY.

Not long ago a poor, sick woman whose nervous system was wrecked and whose brain was pitifully distraught with suffering, sought the services of a physician. It was in a large city, and the doctor's office was located in one of the upper stories of a tall building of the modern sky-scraper type. The woman was directed to enter one of the several elevators, and was instantly shot up through space at the usual frightful speed, the thing stopping with a nauseating jerk at each of the several floors until she was at last ejected at the place she was seeking. Dizzy and bewildered, her legs trembling with weakness from her sickening ride, she staggered into the anteroom of the physician's suite of professional apartments.

If this wretched experience were all that the woman had to endure, per-

haps all might have been well in the end, but, alas! she was only being prepared for newer and worse horrors. As she sank into a chair, awaiting her turn to be called, and after she had in a measure recovered her composure, she began mechanically to gaze upon the walls of the room in which she was seated. The first thing that met her eyes was a painting of a hideous skeleton with serpents hissing from the orbless sockets of its grinning skull. Turning from that with a shudder, she saw a large steel engraving depicting a scene in a dissecting-room where a dead body was laid on a table and a lot of surgeons and students were standing over it, knives in hand, ready to begin their ghoulish work. The poor, sick patient hid her face in her hands in despair, nor looked up again until she was called. Then proceeding into the consultation-room where the physician awaited her, she was again confronted with terror. On the tables and in glass cases all about the place was a lavish display of surgical instruments—cruel-looking things that reminded her of thumb-screws and the devilish inventions of the Spanish Inquisition. This was the last straw. The nerve-shattered system gave way, the tortured heart failed, the terrorized soul faltered. With a moan she fell to the floor in a swoon.

Now, dear reader, the saddest part of this tale is that it is not exaggerated in the slightest of its particulars. It is absolutely true from the first word to the last. Moreover, and more regrettable still, the incident is merely illustrative of a state of affairs that exists to such an extent throughout the whole country as to be almost general. Astonishing as it may appear that physicians, above all others, should be guilty of errors so palpable, we have the distressing fact that the conditions herein described actually exist. And that no time should be lost in so moulding public opinion as to bring about a change in these conditions, must be evident to all who will give the subject serious thought. It is all very well for a lawyer, perhaps, or another professional or business man to open shop in a building that climbs up to a dizzy height, but a physician's office should be on the ground floor or on the second floor, at most. It will be all the better if it is located on a quiet street, off from the noise and the hurly burly of the city's roar and traffic. The rooms themselves should be quiet, subdued and restful, with a soothing air of cheeriness about them. There should be no grinning skeletons or pictures of such to greet the eye, and surgical instruments and every other thing suggestive of torture and pain should be religiously hidden away from the patient's view so far as possible. There is so much mental and physical misery in this world that every effort should be made to soften their terrors instead of accentuating them as is all too often the case.—L. A. Times.

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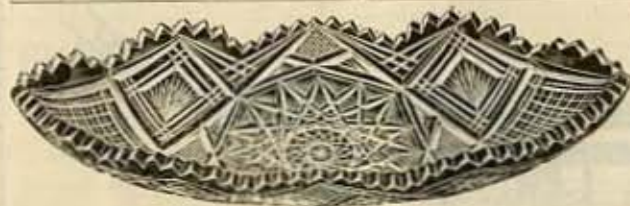
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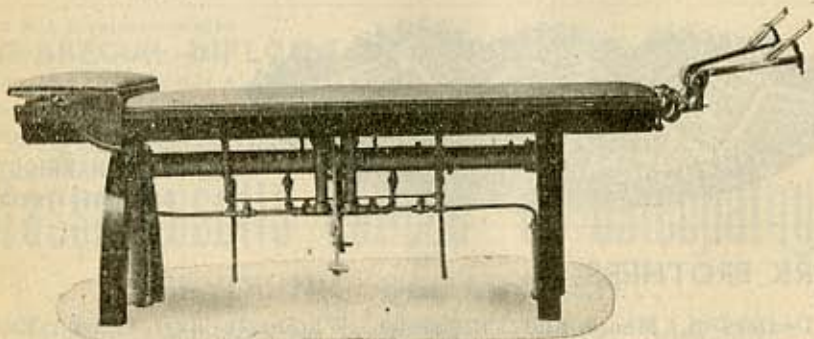
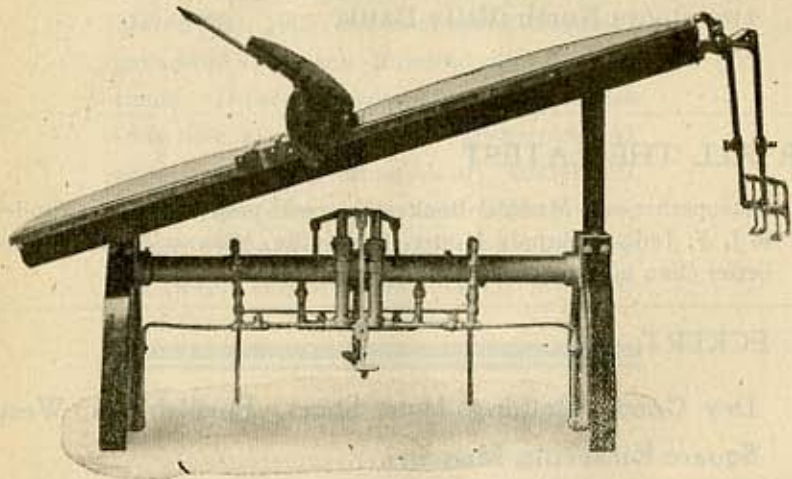
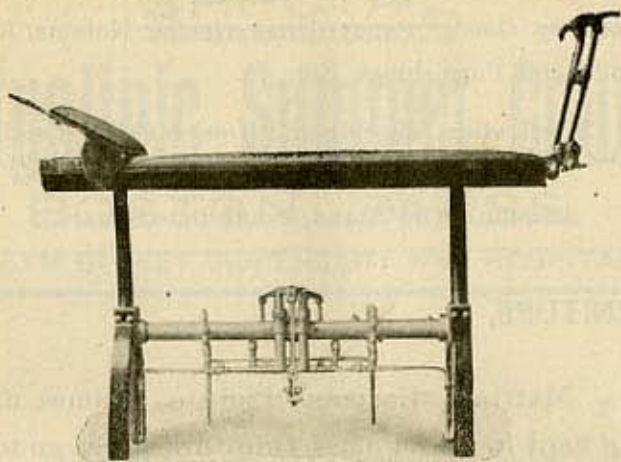
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