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THE JOURNAL OF OSTEOPATHY

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"WHERE ARE WE AT" OSTEOPATHICALLY?

A. G. HILDRETH, D. O., ST. LOUIS, MO.

Certain events which have come under my personal observation during the past few months prompt me to write this article at this time. And, if in its wording, the osteopaths whose treatment, diagnosis and prognosis are directly the cause of the appearance recognize the cases referred to, we only offer this apology,—we believe by practical illustration we can make more forcible our argument. We shall quote no name and only seek through these illustrations to help better not only the condition of our profession but also strengthen our practice by better methods, and our patients' confidence by better results.

There came recently to our Sanitarium a case for examination wherein the osteopath, who had been treating it, had, with the aid of an M. D., administered chloroform and undertaken to reduce what he thought to be a dislocation, with the consequent result of a badly inflamed articulation and badly swollen tissues around the joint.

Second, a young woman came in for an examination who had been treated for some months by an osteopath for sciatica, with some benefit. Recently, however, the patient had taken three treatments of another osteopath and upon examination he had advised an operation at once for fibroid tumor; wanted her to go and be operated upon immediately. Both of these cases were treated by practitioners considered among our very best osteopaths. I know them personally and know they were conscientious in what they did and what they advised. But, there is something wrong—radically wrong—somewhere. In my twelve years' experience in osteopathic practice, ten years of the time being spent with Dr. A. T. Still and the American School of Osteopathy, I have never seen him administer an opiate a single time or advise it done in more than half a dozen cases, and then only in cases of recent injury; and, certainly, the force method or brute strength has never been taught as osteopathic, but the method of careful, gradual breaking up of adhesion and of carefully drawing into place abdominal conditions is what has made osteopathy what it is today.

As to the second case, it was a case of fibroid tumor in a woman perhaps thirty years of age. It was not larger than a good-sized hen's egg but was adhered to the right side of the uterus, creating a pressure upon the viscera and

a consequent irritation to the sciatic nerve at times. It was not draining her system; she was regular in her menstruation and otherwise in perfect health; a growth that might have and probably did exist there for years without her knowledge, for she had not discovered it until the last osteopath who had treated her located it. The successful handling of just such cases as this one is what has made Dr. Still and osteopathy world-famous. There is absolutely no need for an operation upon the case at this time and in our judgment there never will be if properly handled osteopathically. First, there was no need of an operation because the growth was giving no trouble to amount to anything; second, osteopathic treatment can greatly lessen the growth if not cure it entirely; third, we know without the operation she will live for years to come and with the operation no man can guarantee her life and know what he is doing. I am not blaming anyone and am fully aware that the writer himself makes mistakes, just the same as other people, but I am also aware that it is high time that those who practice osteopathy realize more fully the true value of their own profession as a remedial agency, and that they adhere more closely to the principles that have made us what we are, and that we ourselves should become imbued with more of the tenacity of purpose, the earnest, never-ceasing, never-tiring example of the one man who gave osteopathy to the world—the one who never wavered, never faltered. When the entire world criticised, he stood alone for truth, and time and results have vindicated his position, and it behooves us to defend that position—not weaken it by trying to follow the teachings of the very schools whose failure have made our existence possible. The trouble is we know not the power that lies within ourselves; we haven't confidence enough in our own profession. Again, too many of our people work at random or on the cut and try basis. And there is no excuse for so doing, for the osteopath who applies himself as he should knows the origin of every main nerve in the human body and the centers that functionally control all organic life, and with this knowledge there is no trouble in locating causes. And, too, our people give too many broadside or we might call it shotgun treatments, with but one thought or purpose—the hope of in some way, either in time spent or diversity of places touched, hitting the right spot. Recently an osteopath came into our office and in telling of his many successes in his practice, said: "I had a very interesting experience lately." Said he had a good physician friend who telephoned him one morning that another physician of the same place had had a light attack of apoplexy and asked our osteopath brother to go with him to see the case. On their arrival there the physician said to the osteopath, "What would you do in such a case?" And he replied, "I will show you." Whereupon he went to work and gave him, as he termed it, "a good treatment." After finishing the treatment the sick physician said to the osteopath, "Why, doctor, if I had known you people could do me so much good, I would have had you treating me all winter." The osteopath was elated over what the physician had said to him. I said to the osteopath, "Where did you find the lesion?" He said: "The lesion—why-er—Oh! I just went after him

generally and stirred him up good and plenty and it helped him." That is just the trouble with some of us. Too many of our osteopaths go after all their cases generally. How much more the physician would have thought of the osteopath (if it was his opinion he was after and valued) if he had located the cause and started the heart to acting correctly, thus correcting the circulation to the brain by a simple, easy process—with so much less labor and so much more credit to himself and his profession, for the reason that he would have received just as good a result, yes better, and the physician would have had much less reason to call him a masseur or a rubber. Let me add that this osteopath is now studying medicine. A desire for more knowledge is always commendable, but a lack of knowledge of all your own profession can and is doing is not only a sad condition for the doctor, but very bad for the patients whom he undertakes to treat.

Again, just recently, a very intelligent gentleman from one of our good southern states was brought to me for examination by his daughter, whom I had cured some years ago of a chronic bowel trouble. The father, notwithstanding his daughter's cure, of which he could not say enough, came to me reluctantly, and before lying down upon the table, remarked to me; "Now, doctor, please do not handle me roughly." He was a frail man. Then he explained his remark by saying, that a few months before he was talking with a prominent attorney of his state who then held one of the best judicial positions in his state about his own health, and he said, "I have made up my mind to try an osteopath." And quickly the Judge replied, "You must not do it; he will pull you to pieces. I am a strong man and I went to an osteopath for some treatment and it seemed to me he would disarticulate every bone in my body, and I never went back." So here you see another one of the serious drawbacks under which our profession labors. In this last instance the osteopath lost a valuable patient and the profession an able, influential follower, by just one injudicious, rough treatment. Rough, hard, meaningless treatments always do the patient more harm than good and usually hurt the profession as well. IT IS NOT HOW HARD YOU TREAT that does the work, but it is the How. Oh! if our profession could only understand this fact and modify their treatments—spend hours, yes years if need be, to learn how to correct a contracted tendon or a dislocation without pain to the patient, instead of spending hours in giving general treatments, or studying what some medical authority had said of the condition and treatment, it would mean so much more to the future of our beloved science as regards results and the alleviation of human suffering.

The above cases cited, all came within our observation during the past few weeks and are only a few—a very few—of the many mistakes made by our osteopaths. Located as we are, here in St. Louis, we have practice from all over the United States, and it gives us a wonderful chance to know just the condition of our practice everywhere. While it is some consolation to know that all the other schools of medicine have practitioners who are making even greater mistakes, yet it is a condition that should be overcome both for the sake of the patients and the lasting good of our science.

Only recently there was held in this city the greatest osteopathic gathering ever assembled on earth—great in enthusiasm, great in numbers and great from the standpoint of educating the world as to what osteopathy is. But it does seem to me we should, if possible, reach a place in our great conventions where we could more thoroughly discuss and emphasize and demonstrate the how to treat osteopathically. I hope that at Denver next year two-thirds, at least, of every session can be spent in the demonstration of actual, practical methods of how and where to do our work, that we may eventually treat strictly scientifically which would mean cure for many more people without pain to patient and with so much better standing for our profession. We, it seems to me, must, through our schools, our conventions, both state and national, and through our Journals, reach and combat and overcome, at least, some of our most glaring, unnecessary blunders, so general to us all—rough, harsh treatments; the general or from half to three-quarters of an hour's treatment; careless, loose examinations, and, too, the tendency to advise surgical operations where osteopathy in its purity has in the past covered itself with glory. We must get away from the tendency to diagnose conditions according to the other fellow's method, because it is not osteopathic and often leads the osteopath to make just such mistakes as are cited above. Let us unite and go after our own mistakes; let us look at ourselves as others see us; let us seek to know more of our own science and less of the other schools' methods—whose mistakes have made our own profession possible. These are only a few of the many things, it seems to me, that need airing and discussion in our profession in order that we may know "Where we are at" osteopathically."

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### POSTURAL DEFECTS.

(CONTINUED.)

DR. CARL P. McCONNELL, CHICAGO.

#### THE PROMINENT HIP.

A hip that is prominent and larger than its fellow is of frequent occurrence. It may not be necessarily conducive to a defect in posture, but it often is. The female sex is more frequently afflicted with this anatomical irregularity than the male sex. In the first place, the female pelvis is not so stable and rugged as the male pelvis, i. e., a mechanical wrench or fall will more easily displace the relative position of the tissues in the female. Then, in the second place, the dress of the woman accentuates irregularities of the figure, so that possibly, in some instances, the defect, from a diseased or deformed point of view, is more apparent than real. But of still more importance is the fact that many cases of a prominent hip are due to a lateral curvature in or of the lumbar spinal column, that part of the spine at and below the waist line. Lumbar spinal curvatures are of common occurrence in the woman; firstly, the spinal column is not so strong as in the man, simply on account of the physique not being so strong; secondly, modern dress constricts the waist from the wearing of corsets

and the utilizing of many waistbands, and from the weight of heavy skirts dragging upon the waist, hips and abdomen; thirdly, excessive strains from childbirth.

One of the principal causes of a prominent hip, then, is the lateral lumbar curvature. This, through compensatory action, renders the hip on the concave side prominent and high, while, naturally, the hip on the convex side is less pronounced in appearance and depressed. Dressmakers and tailors are all too familiar with this feature of the irregularly outlined figure, and, consequently, have to resort to "padding" to round out the symmetry of the body. Unfortunately, the mere defect of figure is by far the less serious part of the defect. Many ailments and diseases can be readily and directly traced to this. Not that the prominent hip itself always necessarily plays a leading part, but rather the lumbar curvature is the cause of very much suffering and misery. To merely enumerate the thousand and one disorders that arise from malaligned lumbar vertebræ might be tiresome, but, however, a few will be somewhat detailed. A point to be emphasized is that the prominent hip often plays the role of a sign or symptom, or an effect, that an ailment or disease may be elsewhere. It is one of the many anatomical lesions that the osteopathist takes note of and which directs him to look for a primary cause.

In the female sex, one of the most common causes, if not the most common cause by far, of disorders of menstruation, whether painful menstruation, profuse menstruation, or irregular menstruation, is a weakness, obstruction, or irritation, of the nerves making their exit from the lumbar spine, caused by a lumbar curvature. In fact, the lumbar spinal column gives exit for most of the pelvic nerves, and, as a consequence, a lesion of this part of the spine may readily affect them. The osteopathist gives the major part of his curative treatment for pelvic diseases along the lumbar spine; and lateral curvature is one of the most frequent lesions found.

Then certain bowel troubles owe their origin to predisposing lesions here, such as appendicitis, typhoid fever, dysentery, rectal diseases, sexual disorders in men; bladder weaknesses; and many ailments of the legs, as sciatica, varicose veins, often start from a disturbed anatomical relation of the lumbar vertebræ.

In a few cases the prominent hip may originate from an actual slipping upward of the hip, or being more exact, the innominatum, the large flat-pelvic bone, on its articulations. These actual displacements usually result from a sudden heavy fall upon the buttocks. In such instances a lumbar curvature will result as a compensatory condition. This reverses the compensatory act as heretofore referred to; the prominent hip, in this instance, is the cause and not the effect. To diagnose which is cause and which is effect requires technical knowledge and experience. The slipped innominatum then produces symptoms and disorders directly from its changed anatomical relations, so that frequently physiological functions are much interfered with. In these cases a shortening of the leg will be noted when the subject is placed upon his back

and the length of the legs compared at the heels, for the socket of the hip joint is actually raised higher than its fellow by the upward displacement of the large flat bone. In some cases, where the prominent hip is due to a lumbar curvature, and the prominent hip is a secondary feature, the legs will be found uneven in length, but not always, for the lumbar curvature may straighten out when the individual lies flat upon his back.

The prominent hip can easily be detected when the subject sits down upon an even, firm surface, or stands up, and the one side is compared with the other. To diagnose the cause from effect and to differentiate the maze of signs and symptoms that may be present is not always easy for the skilled practitioner.

But the object of this article is not to write a treatise but to call the layman's attention to some apparently non-serious, commonplace defects of the body that too often pass unnoticed, and which inevitably lead to much suffering and ill health. At first they are simply slight anatomical irregularities but they can easily be the source of much serious consequences.

To correct a prominent hip is not ordinarily a difficult osteopathic matter. In the cases where the lumbar vertebræ are principally at fault, and these include the greater number, it is a problem of correcting the spinal curvature. Lumbar spinal curvatures are the easiest of any of the curvatures to correct, for one is not hampered by the rib articulations and the lumbar sections present an area where an easy leverage can be obtained. Strains, sprains, falls and any mechanical racking of the lumbar spine may produce the initial lesion that leads to the curvature; so the curvature may be started by an injury to a vertebra or two and a resultant posture or weakened muscles on one side of the spine can be the means that lead from bad to worse. Correcting a slipped innominatum is usually an easy matter; it is simply a question of mechanics. But to overcome defective and unhygienic dressing is another problem. As the treatment progresses, certain exercises, familiar to all osteopaths, in some cases might be helpful.

Standing erect will, of course, be valuable help. A physician can not do everything, for if the patient will not help himself, it will be next to impossible for the physician to give the greatest possible relief. Standing with the weight on one foot will tend to make the hip on that side more prominent. A few prominent hips may so result, but generally the reason why one favors a certain side is because the other side is weaker; a weak back, a slipped innominatum, or a weakened leg, will be common causes.

The writer has repeatedly seen cases where the skirts would have to be considerably altered after the hips had been made symmetrical under osteopathic treatment.

#### THE PENDULOUS ABDOMEN.

The pendulous abdomen is another defect that is all too common. A great many people have a prominent abdomen because they do not stand properly, but a pendulous or prominent abdomen is not necessarily synonymous with a stout abdomen. They attempt to stand erect by drawing the shoulders back

and sticking out the abdomen. If they would hold the shoulders back and and throw the chest forward, and draw the abdomen inward and upward, their figure and physique would undergo shortly a wonderful transformation. Drawing the abdomen upward and inward will at first require considerable constant effort. It certainly will not be an involuntary act for the first few days.

The sagging of the abdomen not only causes an unsightly appearance but results in great relaxity of the abdominal muscles, interferes with digestive functions, displaces the pelvic organs, and weakens the action of the lungs and heart.

The laxness of the abdominal muscles allows the abdominal organs, the intestines, stomach, kidneys, etc., to displace downward. This tends to indigestion, constipation, inactivity of the liver, etc., and causes a score of reflex symptoms. The organs become simply weakened from a lack of proper tonus. This is a common cause of nervous prostration.

This is one of the common causes of prolapsed and displaced pelvic organs, because the abdominal organs sag down upon them and the pelvic organs thus receive the brunt of the gravitative effect. External local treatment of the pelvic organs can only be a makeshift in these cases. The lungs and heart are weakened because the abdominal organs are dragging on the chest. The lungs can not aerate the blood freely owing to the abdominal weight and to the blood being hindered in passing from the abdominal organs through the liver to the heart and lungs. The heart is handicapped in its work and freedom through lessened chest capacity and obstructed circulation. Just "suck" up the abdominal organs and see how much easier it is to expand the chest and to breathe!

Of course, there are other causes for a pendulous abdomen, such as a weakened spinal nerve supply to the abdominal muscles and organs. The weakened nerve supply may cause a loss of tone to the abdominal organs themselves, so that certain organs, as the stomach and intestines, become dilated and prolapsed: to the ligaments, and to the tissues and organs as a whole so that they become gravitated.

Through childbirth muscular fibers of the abdominal walls often rupture, leaving scars and a relaxed condition. Actual ruptures, hernia, of the abdominal muscles occur and cause a pendulous abdomen. Then there are cases of obesity where the pendulous abdomen is a symptom. But a discussion of these conditions hardly comes within the province of this paper.

Much can be done with all of these conditions through osteopathic work. But, again, the subjects must help themselves. The centre of gravity of the body must be changed, and kept changed; correct posture and a constant effort will accomplish considerable. The "setting up" military exercises are splendid for this effect. Even in some cases of obesity the abdominal prominence can be markedly lessened by careful exercising and keeping the abdomen drawn in so that the abdominal muscles, the diaphragm, and the chest may be strengthened. For the relaxed, flabby abdomen, self manipulation of the weak muscles when in a lying posture will materially aid.

These instructions, taken in conjunction with the correct osteopathic treatment, will result most satisfactorily.

(TO BE CONCLUDED)

**\*IMPRESSIONS OF THE ST. LOUIS MEETING.**

T. L. RAY, D. O., FT. WORTH, TEXAS.

I was asked by our worthy president to preach from this subject. I am not a preacher and have been told that I am a poor talker, so have jotted down a few things, that I trust will be of interest to you. It is hard to get the good things from a meeting of this kind without being there, as the darkey says "in pusson." It is like the darkey preacher's ideas of praying, when he said, "Brederin yo must work as well as pray. If yo wants a chicken, pray for it and den go after it in pusson, for de Lod won't bring chicken to a lazy nigger."

I hope to be able to whet the appetite for chicken so we will all go after it next time. I was impressed very deeply with the wonderful interest and attention displayed by the osteopaths.

We had expected to see a great many osteopaths at the Fair at this time, as we considered that most of them would want to see the Fair and would go there in order that they might attend two great functions at the same time. We were not disappointed in this, for they were there from every quarter of the United States, Hawaii, and Canada, but we were of the opinion that the Fair would be the greater attraction.

We were agreeably surprised when we found that the A. O. A. convention was greater to the D. O. than the greatest World's Fair that ever happened. It was greater to them because they gave it their every attention as long as it lasted. Standing room was at a premium in the large hall of the Missouri Building at every session.

The Fair only got their attention between sessions and then they talked osteopathy as they beheld what it had in store for them.

One of the most pleasing things to me personally, is the way in which the profession stands pat on pure osteopathy. I was a little afraid after reading some stuff written by an osteopath who assumes to tell us how to succeed, that a great many of the D. O.'s would go into the vibrator business. On the contrary I found that the vibrator agents all had faces as long as your arm. One said in my presence that he had hoped to reap a great harvest among the osteopaths but he had found that the most of us hated vibrators like poison. This is hardly true, for most of us know that there is some good in shaking things up occasionally, as I sometimes pound my watch, when it has stopped and it starts off all right, yet I would be amused if a watch maker should attempt to adjust it that way.

At every A. O. A. meeting before this there has been talk of this, that and the other adjunct, but every thing was Simon Pure osteopathy at our great St. Louis meeting. I was indeed glad to see this as I am of the opinion, that to put our beloved science at the top of the ladder, where it deserves to be, we must forge forward on the lines blazed out by its noble discoverer. Who shall say that this mighty system has failed because he has failed to accomplish in it.

\*Read at T. O. A. Meeting on 10th of October at Dallas, Texas.

Bless your hearts, our faults are our own; they can not justly be laid against osteopathy: Is it the fault of the hammer if you fail to hit the nail on the head? No, the hammer is true steel, hit again and perhaps you will accomplish.

Dr. Still said in his address to us at St. Louis: "He who drops the study of bones, of physiology or anatomy and takes up something else without having proved his God a poor architect, a poor physiologist, a poor chemist, that man is to be pitied and I would say, Lord, give him a little bit more anatomy. Talk to me about three years, two years, five years! Some heads will never make osteopaths if they are five hundred years at it. Give honor to the old doctors; they did their honest best, but do not worship them. Cleave to nothing but that which you can demonstrate before God and man."

It was a great treat for us to see and hear our noble preceptor again, and a great pleasure to see that age is not telling on him. He speaks with as much vim, and walks with as light step as ever. It was indeed a grand sight to see the hall crowded with perhaps 1500 osteopaths and what they did when Dr. Still walked in, and the profound attention they gave to every word of his address, and what a wonderful cheer they gave as he left the hall. We were still more proud of him on Osteopathic Day in Festival Hall where he spoke to three or four thousand people. They seemed to be every whit as enthusiastic in their cheers as we were at his first speech. In fact some of the people who have found relief through our beloved science are more enthusiastic in its praise than we.

There was more enthusiasm displayed at this meeting than in any of the others, and I have noticed that each has been more enthusiastic than the one preceding it. This is a good thing, since it is through the enthusiasm of those who champion a cause that others are drawn to it. I feel that if there was no other good in our association that it would be highly profitable for us to go once a year and get a new supply of this great power, enthusiasm.

Our greatest good, however, comes through the discussion of diseases and their cure. This is especially true in so new a system as ours, since discoveries are continually being made. It is in these discussions that they are made known to the profession.

If you or I have made discoveries in the treatment of any disease, we owe it to osteopathy and to the world to go to the national convention and make them known. It is very hard, as I said at first, for us to get all of these good things unless we attend the conventions.

Our banquet was certainly a great success. The press spoke of it as the the banner banquet of the Fair up to that time, and commented very favorably on our not having wine served.

We were honored greatly as a system of therapeutics in a way that no other system has been honored, that is, by our having had a World's Fair day set apart.

My good friends it is my heart's desire, that you pray for chicken and be at Denver next summer "in pusson" and "ye" shall be satisfied.

**\*A NOT INFREQUENT CAUSE OF FAILURE.**

AUGHEY VIRGINIA SPATES, D. O., SHERMAN, TEXAS.

A case that recently came under my observation put me to thinking that a not infrequent cause of our failure to bring many of our cases to a happy termination is owing to our patients obstinately neglecting to carry out important instructions or worse still doing those things which we have strictly forbidden them to do.

The case in mind caused the physician anxiety, study, and in the end great disappointment.

The patient came saying she thought she was about seven weeks pregnant and that after missing the menstrual period she had had at first many subjective symptoms but that they had ceased.

The probable signs are as we know often misleading and at this early period there could not be positive signs of pregnancy. The patient was very nervous and anxious and in real doubt as to her condition. Inquiry elicited the history of a similar illness some four years prior and which about the fourth month resulted in a flooding spell with the passage of a liver colored growth, which the physician in charge pronounced "a kind of tumor". Here were cessation of menstruation, tenderness and tingling of the breasts, morning sickness, changes in disposition, etc., which had ceased sometime prior to the attack of flooding, and the passage of the "tumor". We know this is not the history of tumors and so the case was diagnosed as being one of uterine mole, which proved correct. We all know the pathology of the uterine moles, they being caused by the product of conception being implanted upon a weakened or diseased endometrium, which makes it particularly subject to disease.

A sudden jar or great fright, anger, or mental stress and anxiety will cause the placenta to loosen from its site, followed by death of its foetus. This would result in abortion were it not that the process occurs very slowly so that the blood pours out between the periphery of the ovum, and the decidua has an opportunity to coagulate, so that the ovum is surrounded by a capsule of clotted blood which has become organized so forming the BLOOD mole, or if the capsule is paler, the CARNEOUS mole. These are distinct from the hydatidiform or destructive type.

The patient was dull and bloated and the complexion which was naturally fair was dark and leathery. Eyes dull and heavy, breath foul and she complained constantly of a disgusting taste in the mouth. To have simply looked at her one would have thought her suffering from some serious renal lesion. There was great lassitude and nervousness with almost an insane repugnance to bearing a child. She received three weeks osteopathic treatment directed to overcome the nervous condition and especially to bring about free action of the organs of elimination with the result that she improved in every respect, being greatly relieved of the mental depression. It was remarkable how quick-

\*Read before the Texas Osteopathic Association at Dallas, Oct. 10, 1904.

ly the complexion cleared and the expression of the eyes changed. The treatments in this case were always gentle, bearing in mind the probability of a mistaken diagnosis and that the foetus might still be living, for no matter how truthful the patient her statements as to her feelings should not be taken as "confirmation strong as proof of holy writ" that conditions are as she may honestly believe them to be.

At the end of the third week the menstrual flow reappeared in a normal manner without flooding and here is where she proved herself a true daughter of Eve. Most careful instructions had been given as to the bath, temperature of same, etc. She was also cautioned against making vaginal examinations, for not knowing when the mole might pass it was best not to run the risk of complicating the case with infection from the septic hand. For reasons unknown the patient wished to stop the flow and got into a tub of ice cold water. This checked the flow which was followed by such shockingly bad results that she was taxed with imprudence and upon the facts being made known the case was immediately given up.

Here was a fine opportunity for osteopathy to demonstrate its efficacy spoiled by a stubborn patient, who finally received the usual medical treatment—with the usual results.

**\*THE FUTURE OF OSTEOPATHIC EDUCATION.**

CHARLES HAZZARD, PH. B., D. O., NEW YORK.

The flight of time has steadily widened the field of usefulness of the osteopathic practitioner, and he has found that the world was ever ready to grant to him such privileges and recognition as he actually deserved. There have gradually been added to the osteopathic course many studies not at first included in it. One of the most convincing signs of the virility of osteopathy has been the manner in which it has kept forging ahead in the matter of education.

So it will ever be. Advancing time continually finds osteopathy occupying a wider and a wider field. As the osteopath's field of usefulness widens so must his preparation for occupation of that field be broader. The educational equipment that fits a man to go into the field of chronic practice, conducting a largely office-practice among chronic cases of all sorts, is not sufficient to fit him to go into the field of general practice among acute diseases, in which he meets all kinds of dangerous conditions, many of which may be fatal in a few hours.

Any man following the life of a general practitioner has need of the broadest knowledge of disease in all its varying, often deceptive, features, and of the greatest resourcefulness in dealing with it. There is nothing more to be abhorred than the taking of a patient's life into the hands of an unskilled, ignorant, or incompetent practitioner. He who undertakes a general practice, with its arduous duties and great responsibilities, is bound, in the sight of God and of man, to be adequately prepared.

\*Read before the New York Osteopathic Society, October 27, 1904.

The reason for my preparing an article upon this subject is because it seems to me, as I look over the present status of osteopathic education, and at the ever-widening future field of osteopathic practice, that we have reached a crisis in our history; that we are, in a very important sense, at the parting of the ways. The next few years (how few I cannot say) are to determine whether or not the osteopath is to occupy that broad and fair field to which the future is already earnestly beckoning him; whether or not osteopathy is to maintain herself as a great and independent school of medicine, or whether she is to remain what she is, very largely, today, a specialty with a limited applicability.

To my mind the issue stands forth, clear-cut and decisive. It is this; the osteopath must be either a whole doctor or none; osteopathy must be an independent and sufficient school of medicine, or she must lose her identity and individuality and be relegated to the rear. If we cannot make good the claims we have set up to the right of osteopathy to exist as a separate school of medicine, she must awake from her dream of preeminence and fall in line with massage, Swedish movements, and the like, all capable of doing good, but dependent and subsidiary to what we know as the regular practice of medicine. Education alone is the solution of the problem.

Hitherto practitioners of osteopathy have accomplished wonderful results in many lines. The osteopath, with his education such as is now afforded by a two-year course, has been able to get results that doctors of medicine had been unable to achieve. Still, this is but a further reason why his education should be broadened, for it is an earnest of the great future that he may have if properly equipped for it.

With our comparatively limited numbers at present we find abundant practice for all in the comparatively limited field afforded by what is known as an office practice, and many of our practitioners will take no acute work. But our men are today going into acute practice more and more as the demand grows, and it is clear that in the future we must as fully occupy this field as any other. It is not conceivable that we can maintain the integrity of our school of medicine if we are simply fair weather doctors, or doctors only for some things. The fact that we are going more into acute work itself constitutes a demand for large additions to our educational course in order that all may be adequately equipped for this work.

Some of our brainiest and most thorough-going osteopaths are today studying in medical schools, as others have done before them, in order that they may gain the knowledge, entirely aside from that of drug medicines, which they cannot as yet get in our own schools. The thorough and earnest seeker for knowledge will always go after knowledge at any price. It is just this stamp of intellect that can do the most for the future of our science, and we must prepare to give, in our schools, all the knowledge that may be needed in the making of the most thorough and resourceful physician.

We point with pride, today, to the fact that we are teaching in our schools, all the branches taught in the regular medical schools, except *materia medica*

and major surgery. But it is undeniable that we lack for example, the clinical facilities such as are afforded alone by the great hospitals connected with medical schools. We lack the advantages afforded by institutions founded for scientific research, which are so badly needed by osteopathy today. None knows better than we that a new pathology of disease must be written which shall revolutionize the old pathology. The same is more or less true of surgery, anatomy, chemistry, physiology, physical diagnosis, symptomatology, and, in fact, of practically every branch of medical science.

We need endowments for chairs in our institutions and for the founding and maintenance of colleges, institutions of scientific research, hospitals, sanitariums and asylums. But we must deserve these things before we can have them. We must work up to them, probably by slow degrees. It is difficult to make legislators, and the public whom we try to interest, see how we can make superior physicians out of uneducated people by virtue of a two-year course, or, in fact, any course of study, or initial educational requirements, less than what is required by the recognized schools of medicine.

The times are demanding that the osteopath be a fully equipped physician, ready for any call to duty or any emergency whatever. He must be as ready and able as are medical doctors to answer the call for all the physicians of a town to hurry to the scene of a terrible railroad wreck, or to follow in the wake of a cyclone, where he may have to amputate legs, sew up faces, swathe burns and scalds, or what not. He must be able to probe for the bullet in the dangerous wound, or administer the only possible agent to overcome the unbearable agony of great pain. At present every osteopathic school must have on its faculty a medical man, to do what others are unable or not allowed to do. The osteopath is much more than a manipulator; his fingers and brains are far from sufficient as an equipment for the facing of all emergencies. All these things, and more, must the osteopath of the future be ready to do. These things he must learn to do in our own schools, if osteopathy is to maintain her place as a separate and complete system of medicine.

There is, in my mind, absolutely no question of the greatness and sufficiency of osteopathy, but her future rests entirely with us; none but ourselves can limit her growth. The world is ready to accord us full recognition upon our merits, but we are beholden to the world to move forward, not from where medicine began, but from the place where it leaves off. The greatness of our future can not be estimated, but we must never forget that the responsibility is upon us.

#### CHICAGO VS. ST. LOUIS.

REUBEN T. CLARK, D. O., NATCHEZ, MISS.

Some years ago when Chicago emptied its drainage canal into the Mississippi river, St. Louis contesting that the distance was too short for proper purification of this water, took out on injunction against the "Windy City"



and sued her for a large sum, as a recompense for the disease which might in this way be brought to the city.

A simple law of sanitation is that a body of water, flowing over a given area at a certain current velocity, will in a given time become purified by aeration.

Now let us take this municipal trouble over a sanitary fact and parallel it with nature's therapeutic measure. Consider, then, Chicago as the cause; the River, the (blood) circulation; St. Louis the symptoms; the object in view being HEALTH.

The blood, that limpid tissue in which are suspended the elements of life, flowing through its tortuous course is purified by the organs of eliminations and aeration. Should these organs be inactive due to lazy habits or worn out in the wake of dissipation, the blood must in a measure lose its vital, antiseptic and curative powers to the degree of its degeneration, so also the system must suffer. Again, impure air, water, food, or even wholesome life sustainers when improperly taken, external or internal violence, any of these will undermine the health, stayed for a time by the vitality in store.

A few examples—notice the bookkeeper and cobbler, their lack of exercise and peculiar posture. Consider the dentist how he must bend over his patients and unavoidably inhale a certain amount of exhaled air laden with CO<sub>2</sub>. Has the reader ever noticed how the smoke from a smoker's lips spreads the same with the exhaled air? Attention might be called here to mothers with babies muchly fondled and petted who must of necessity inhale the nurse's breath, its dumb lips must cry, the only voice it has, which the fond mother too often interprets for hunger and stops its mouth with a nipple; so with those who work among chemicals and the smoker who inhales the soothing stimulant, for as nicotine leaves its stain upon the fingers, know then that the tissue of the lungs are discolored. In man nature is seen in its greatest force and highest efficiency for there has been bequeathed to him faculties all sufficient to attain whatever is sane to desire, health may well come under this head and be compared to a bank account which may be overdrawn a few times, but after a while it dwindles down, the drafts must not be so frequent nor so large, for the officer who protests stands guard, the creditors get nervous, bankruptcy follows, but in disease we have no access to bankruptcy law.

Returning to the subject, Chicago vs. St. Louis, viewing it from a prophylactic standpoint would it be best to treat the result of impure water in St. Louis, distill the water or remove the cause by closing this stagnant drainage canal? There is no healing science known which can cure everything and 'tis well there is not, for the world would soon become over-populated and time nearing its end.

Osteopathy has a specific idea in view, the lesion (cause) and its removal, differing therein from all other therapeutic schools.

Every part of the body is controlled by nerves and associated with each other, the eye with the hand, the ear with both; we see the enemy, we raise the

gun, hear the command, fire and the enemy falls—a simple illustration of physiological harmony. But suppose the soldier did not [see the enemy nor hear the command, suppose again he saw and heard, but the command over the motor nerves to the hand was stopped along its cause due to some impingement, the fingers would fail to move, the story is told. Know then that every organ and muscle report through their nerves to some part of the spinal cord, as a study of its segments will show.

As we pass along shaping an awkward truth, touching the minds of laymen, we find their language and mathematics good, but alas, we all know too little of this Temple in which the soul is wont to "Eat drink and be merry."

### OSTEOPATHIC PEBBLES.

DR. J. F. SPAUNHURST, INDIANAPOLIS, IND.

We grow only by enduring and overcoming.

\* \* \*

All things come too late to those who idly wait.

\* \* \*

An osteopath is needed wherever there is suffering.

\* \* \*

There is no superstition, no stupor, no prejudice in the walks of Nature.

\* \* \*

A little elbow grease in osteopathic practice is worth a lot of oily phrases.

\* \* \*

The constant effort of Nature in the body is towards healthful equilibrium.

\* \* \*

The "corridors of time" should echo with laughter rather than with groans and sighs.

\* \* \*

"Give me a clear field," says Nature, "and I will do all that can be done where the surgeon's knife is not required."

\* \* \*

Drugs in the most favorable cases, only suppress the symptoms, whereas osteopathy, skillfully applied, works a cure.

\* \* \*

Nature's laws are no respecter of persons; they are not to be evaded or juggled with; observed, blessings are enjoyed; broken, penalties are suffered.

\* \* \*

The reaction of drugs is to be dreaded; it is usually more baneful than the original disease, while the reaction from osteopathy cannot be other than restorative and life giving.

\* \* \*

Remember none but a thoroughly skilled hand with a cultivated touch, guided by an educated brain should deal with the delicate structure of the human body. Beware of fakirs.

Experience has taught us that Nature will best accomplish a cure when her injured parts are kept clean, properly adjusted and freely supplied with pure blood through osteopathic treatment.

\* \* \*

Osteopathy is demonstrating daily the fact that with perfect mechanical order and harmony throughout the human machinery, with rest and proper food, Nature can best recover from disease without drug interference.

\* \* \*

Four things come not back—the spoken word, the sped arrow, the past life, the neglected opportunity. Safeguard yourself against disease by beginning osteopathic treatment today. Opportunity may not pass your way again.

\* \* \*

Man has outgrown at different times almost all implements as evidenced by his coming from the scythe blade to the modern reaper; from the spinning wheel to the cotton factory; from mule cars to electric trolley cars; from drug therapeutics to the hand-maid of Nature—osteopathy.

\* \* \*

Means of relief change but the structural changes by which cure takes place or diseases develop continue through all the centuries the same. Nature's laws are unchangeable but orthodox treatments of today are constantly changing and become the barbarisms of tomorrow.

\* \* \*

"When you fret and fume at the petty ills of life, remember that the wheels that go round without creaking last the longest." Consult the osteopath; he will make your body machinery run smoothly and without creaking or pain.

\* \* \*

Osteopathy is the legitimate child of Nature and her fundamental principle is "that health is the natural condition of man; that disease or death between birth and old age is unnatural;" that Nature has endowed man with powers and forces unlimited for maintaining that "Natural condition," provided her laws are known, obeyed and aided by skillful mechanical manipulations.

\* \* \*

"I heard today that your son was an undertaker. I thought you told me he was a physician."

"Not at all. I said he followed the medical profession."

\* \* \*

"Nor love, nor honor, wealth nor power  
Can give the heart a cheerful hour  
When health is lost.

Be timely wise;

With health, all taste of pleasure flies."—Gay.

\* \* \*

The man who postpones treatment till he is bedfast is like the man who waits till his home is burning down before he applies for fire insurance. To-

morrow, or the next day, or a few weeks, or another time hereafter may be too late. That's the human nature of it. Why hesitate? Be wise today. Now's the time to fortify against diseases and osteopathy is the sure and safe way to health.

\* \* \*

It requires not a knowledge of medicine, but a thorough knowledge of anatomy and physiology to repair the human machinery when out of order. The competent osteopath knows perfectly the different parts of the delicate body machinery, their natural position and relation and how to correctly adjust it when out of fix; he also knows that drugs will not assist in this work but usually interfere with the general system and retard recovery.

\* \* \*

"Only a year ago I had a friend,  
Straight and erect as any stalwart tree;  
The cares of life seemed nothing to this man,  
Ever so full of force and vim was he.  
One day, however, suddenly he fell,—  
Paralysis took hold upon his brain  
And many learned doctors shook their heads;  
They said he'd never speak or move again.  
He now walks, and talks, and works with energy.  
You'd know the cure? 'Twas Osteopathy."

\* \* \*

When we consider how slight a cause may interrupt the normal operations of this delicate, highly complex machine, the human body, how careful and watchful of its health we should be. A fall, a cold, a shock, a strain, infection, drugs, physical neglect are causes of mal-adjustment of the various tissues and prevent proper assimilation, nutrition, motive power, or life impulse. It is the peculiar and particular work of the skillful osteopath to overcome these perversions by proper adjustment; stretching muscles, relieving pressure, stimulating nerves, arousing the circulation. Thus the entire system is invigorated and strengthened against attacks of disease.

\* \* \*

Drugs which conceal pain or lull to insensibility destroy the sanity of life. They fasten upon the victim habits for which they will sacrifice everything; self-respect, business, property, and finally mind and body pass into a hopeless state. The disintegration of the moral nature of these drug victims is far more rapid and complete than in case of whiskey users, hence the checking and prevention of the alarming increase in the sale of morphine, opium, cocaine and similar "dope" is the coming problem which confronts the reformer. Osteopathy leaves no drug habits in its wake and will be found the most available and effectual means of combating the drug evil of today.

\* \* \*

In the cure of disease there can be no need of dosing, even as is the cure of the fractured bone or the wound of an amputated limb is accomplished without drugs; there is no science in dosage; as well think Nature's processes needed

drugs when the body was originally developed. Nature requires no drugs for the constructive changes of cell life that take place in the cure of every disease. The fractured bone and the amputation wound have to get well without drugs and the very same law applies to other ailments and disease. The superstition of drugging for the cure of disease is giving way to a deeper insight into Nature's way of healing.

\* \* \*

That every activity of the body is under the control of the brain and nervous system is absolutely undeniable. By knowing the exact location of the nerves and their ganglia and how to reach them enables the skilled osteopath to control the very citadel of health. Here is the stronghold of our science. The brain and the nervous system in conjunction with the circulation of the blood constitute the great machinery with which the osteopath has to deal and their mastery gives him the key whereby he unlocks Nature's forces and utilizes them against disease. The genuine osteopath has learned to rely upon the forces of Nature without question or fear; his great endeavor being to understand them better that he may use them more.

\* \* \*

No other profession has won for itself place and recognition so rapidly as that of osteopathy. It is only twelve years since the first school for training and educating osteopathic physicians was instituted at Kirksville, Mo., by its venerable founder, Dr. A. T. Still, who was its only practitioner at that time. Now there are over thirty five hundred practitioners in the field and osteopathy is famous for its cures the world over. With this host of osteopaths, graduated from a dozen reputable schools, the supply is still behind the demand. Over half of the state legislatures have recognized osteopathy as a distinct system of healing and nearly all states have an organized society of osteopaths. The purpose of these societies is to promote, protect, and subserve the best interests of the profession, and in so doing, safeguard the public against ignorant, unscrupulous pretenders who, in guise of genuine osteopaths, find service and prey upon the afflicted where their lack of skill and intelligence is a menace to life and smirches the good name of osteopathy. The Indiana Society meets this month and their executive committee have prepared a bill to be presented to the Legislature, asking for representation on the State Board of Examiners and requiring registration of all osteopaths. Under this bill the only applicants eligible to registration will be those graduated from reputable schools and who pass a satisfactory examination before the State Board of whom one member is to be an osteopathic physician. In justice to the people as well as the profession this bill should pass without a dissenting vote.

### Just Criticism.

H. B. SULLIVAN, D. O., DETROIT, MICH.

In the last issue of the Journal Dr. Booth takes me to task for what he terms unjust criticism of the actions of the American Osteopathic association when in convention at St. Louis. He characterizes my statements as "misleading," and based upon "incorrect" quotations.

Dr. Booth says he has been connected with a great many conventions and he has never seen "fewer instances" of the spirit of "anarchy and destruction" than "have appeared in the American Osteopathic association the last three or four years." Thus he admits that such a spirit does exist in that association.

Further the Doctor says there was no quarreling with our "illustrious head"; yet he must admit that the educational committee refused to grant the parent school—the school founded by Dr. Still and of which over two-thirds of the profession are graduates, the extension of time which that college asked for in the matter of lengthening its course, and which time was declared absolutely necessary to the safety of the institution by the illustrious founder and the trustees. If this was not a quarrel and if it did not precipitate on the floor of the convention a quarrel that was disgraceful and unprecedented in osteopathic history, it would be interesting to know what Dr. Booth calls a quarrel and what those other conventions were like which he tells us he has been connected with.

Dr. Still did indeed tell us to depend upon our own judgment and "follow up his work," as we are reminded by my friend; but he did not tell us to attack the foundation he laid, and follow it up with a blow at the superstructure, yet this is what the A. O. A. has done in its action on the Code of Ethics and the course question.

Dr. Booth very properly corrects me as to the precise wording of that part of the Code to which I objected. I heartily accept the correction but fail to see how it alters the meaning of the sentence. Section 7 distinctly sanctions "any treatment or operation that may endanger life,—even fetal life," and if DANGEROUS OPERATIONS are not destructive of life; wholly opposed to the

teachings of the founder, osteopathy, the profession, and every law of God and humanity it would be even more interesting to know what Dr. Booth considers a good, healthy, up-to-date illustration of it.

Certainly Dr. Booth is not serious when he holds up the election of Dr. Still's candidate for vice-president of the association as an example of "PROFOUND RESPECT" for the founder; and especially after the association had mercilessly butchered his teaching and reached for his school with eager hands. Surely Dr. Booth is not in earnest when he says, "In my tour of the country inspecting the schools a year and a half ago, I everywhere heard expressions of the highest regard and recognition for the work he alone (Dr. Still) has done and is doing." And even if such a remarkable situation does exist how does it offset the raid on the Old Doctor's principles and school?

This is all there is to answer in the Doctor's charge of unjust criticism, and if the issues were not vital, instead of trival as he appears to contend, there would be no desire on my part to prolong the discussion thus far. The association, Dr. Booth admits, DOES harbor a spirit of "anarchy and destruction"; and if the last convention, in its attitude on the matters discussed above, did not openly manifest and exalt that spirit, it will be well hereafter to keep everything of value in osteopathy where "reformers" cannot get at them, and to call out the state troops of Colorado when the American association assembles there next year. If the annual convention is to be merely a professional "rough-house" for recreation or amusement let it be so and we'll all "play" together as Dr. Booth wishes, but let us first be sure that our osteopathic valuables are safely stored away where they belong.

\* \* \*

### Diagnosis in Pneumonia.

The mortality rates in pneumonia by different doctors show differences too great to be accounted for by the difference in treatment. I will assume that diagnosis is the weak point and note what recent science shows concerning it.

In the light of recent discoveries in bacteriology, we are justified in holding that the pathological conditions arising in a true

case of pneumonia are due to bacterial activity. Pneumonia is a germ disease.

Two conditions enter into determining the multiplication of bacteria, the virulence of the germ and the degree of depletion of the tissue forming the medium of the germ's activity. Active congestion of the lungs soon depletes the vitality of the tissue involved, and if the diplococci pneumoniae are present they rapidly multiply and soon give rise to pathological manifestations, these latter being true pneumonic symptoms. If no germ is present at any time, or if present in a too attenuated state to overcome the tissue resistance, the case passes through the usual stages of congestion, which is then near pneumonia. Such cases may be aborted at any time.

The solution would seem to be in differentiating between symptoms due to congestion and symptoms resultant from the activity of Fraenkel's diplococcus. It is left to the bacteriologist, primarily, to obtain this differentiation definitely, and he will have to break away from some of the diagnosis of the past. The doctor who loses such a small per cent. of such cases treats mostly congestions or kindred lung affections; the doctor who saves so few excludes in making his diagnosis, all else than true pneumonia.

A. R. WATERS, D. O.,  
Chico, Calif.

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#### Ohio Society.

The Ohio Osteopathic society will hold its seventh annual meeting at Columbus, Ohio, January 7th, 1905. A program of unusual interest is being arranged which ought to attract every osteopath of the state. Ohio claims to have some of the best osteopathic talent in the profession. However, she does not propose to stop at this, as we expect outside help from osteopaths who have won recognition in the national councils of the profession. More definite announcement will be made later. In the meantime, as secretary of the society, I would be pleased to have the application for membership of every osteopath in the state who is not now a member of the state society. Don't neglect this.

Isolated as we are, having little opportunity for professional and social intercourse,

too many of us gradually fall into a narrow rut from which it is almost impossible to extricate ourselves. Let us get together and help each other out of the ruts.

M. F. HULETT, D. O.,  
Secretary.

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#### Cases We Met In The Field.

1. Party fell through elevator shaft and dislocated his hip—suit followed for \$4,000 damages. Can't afford to have it set yet as my suit has not yet been settled—may lose the suit.

2. Old lady fell and sprained ankle—never heard of osteopathy—don't understand what it could do for my foot—contented to sit around and moan.

3. Young lady with Pott's disease of ten months' standing, took two treatments; operator failed to cure her so she paid him off.

4. Say doctor a niger got drowned in in de water down here in de riber, he's dead now! hurry up and come.

5. Patient—Doc I feel like a two year old today since your treatment—but say how you reckon you caused these lumps to come out on my neck and face—guess I'll go up to the druggist and get some axle grease and put on.

6. Young lady dislocated fibula, went to Hot Springs; comes back feeling better, but can't walk—wants to know if osteopathy can diagnose case and do her any good.

7. Doctor do you charge any thing for examination? O, you don't! well, I'll get you to examine me! Yes! that's just what the other Dr's. say! Thanks! Good day.  
E. E. T.

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#### Notice to the Members of the Indiana Osteopathic Association

This will notify you that the Indiana Osteopathic association will hold its regular annual session at Indianapolis on the 11th of November, 1904. There are several matters of importance which are of interest to all members and which must be disposed of at this meeting, namely:

1st. The adoption of a new constitution and by-laws, which the chairman of the committee appointed to formulate same informs us will be ready for presentation.

2nd. The discussion of, and agreement to, a bill for an amendment to the medical law drafted by the association's legislative committee.

3rd. The election of officers of the association for the ensuing year.

In view of the fact that the meeting will be engrossed with so much business the program committee have been instructed to have a very short program so that the educational feature will be short.

We cannot say at this time that we will have any visitors of note present but hope that Dr. Hildreth, of St. Louis, will favor us, as he is an honorary member of the association.

However, the business to be transacted at this meeting is of so much interest to all concerned that we feel sure you will need no greater inducements to attend. We would like to impress upon you that by your presence and advice you are aiding in advancing "Osteopathy", the greatest of all methods of healing, and withal the most beneficent contribution to medical science the world has ever known.

Is it necessary to urge that it is your duty to be present and assist in making this meeting, an historical event? The opportunity presents, take advantage of it.

—PROGRAM—

Claypool Hotel

1. Discussion and adoption of new Constitution and By-Laws.

2. Discussion and agreement upon a bill to be presented to the next session of the legislature, which is to be held this year.

3. Election of officers for the ensuing year.

4. Paper by Dr. J. F. Spaunhurst. Subject, Rheumatism.

5. Paper by Dr. Ella McNickoll, subject to be announced later.

GEO. TULL, D. O., Pres.

FRANK H. SMITH, D. O., Sec'y.

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#### San Francisco D. O's. Meet.

The regular quarterly meeting of the osteopathic society of San Francisco was held Wednesday evening, September 21, 1904, at the California College of Osteopathy, President Wm. H. Ivie, D. O., in the chair. The special features of the program were reports from the National Convention

at St. Louis; one on "Clinics" by Dr. Effie E. York, and one on the "Three Year Course of Study" by Dr. Frank L. Martin. Both of these doctors, by the way, are at present post-graduate students at Kirksville. These papers were ably supplemented by Dr. Ivie who gave also a resume of the more important business transacted by the A. O. A. The attendance was good, and a fine program for the rest of the year has been planned.

MARY V. STUART, D. O., Sec'y.

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#### Indian Territory D. O's Organize.

Indian Territory has organized an osteopathic association with the following officers: President, Dr. H. C. Montague, Muskogee; vice-president, Dr. J. W. Mahaffy, Ardmore; secretary, Dr. Bertha L. Thomas, Muskogee; treasurer, Dr. M. E. Miller, Wynneville.

BERTHA L. THOMAS, D. O.,  
Secretary.

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#### Texas Osteopaths Hold Annual Session.

The fifth annual session of the Texas Osteopathic association convened in Dallas, Texas, Oct. 10th, in the offices of Dr. D. S. Harris, Wilson Bldg. In the absence of the president, Dr. Paul M. Peck, vice-president, Dr. D. S. Harris presided. A good attendance was had from every portion of the state and the meeting was especially marked for the interest, enthusiasm and good feeling which prevailed among its members.

The Mayor of the city, Hon. Bryan P. Barry, gave the address of welcome, his remarks being timely and distinctly laudatory of the good work osteopathy is accomplishing. Mr. James Johnson Collins, a prominent citizen, was also introduced to the association and among the many good things he said was his belief that the practicableness and essentialness of osteopathy would very soon place its simpler principles along with the elements of physiology to be taught in the public schools of our country.

The following papers were read and discussed by different members present:

"A Not Infrequent Cause of our Failures," by Dr. Aughey Virginia Spates, of Sherman; "Some Observations of the St. Louis Meeting," by Dr. T. L. Ray of Ft. Worth; "What

Success I Have Had in Venereal Diseases," by Dr. D. S. Harris, of Dallas.

A number of clinics were presented which proved of interest and profit to all present.

The Constitution as prepared by the committee was voted upon and approved.

The following were appointed as state delegates and alternates to the National Convention at Denver in 1905: Drs. T. L. Ray, J. F. Bailey, Aughey Virginia Spates and J. S. Crawford.

From the campaign we are preparing to make before the next session of the legislature I think we will most likely get our wants in a legal way before that body.

The association adjourned at 4:30 Monday to meet next fall at Ft. Worth.

CLIFFORD S. KLEIN, D.O.,  
Sec'y. and Treas.

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#### Sioux Valley Osteopaths Hold Fourth Annual Session.

The fourth annual meeting of the Sioux Valley Osteopathic association was held in the office of Dr. Charles Ray, Lemars, Ia., October 6th.

The program as carried out follows:  
Opening Address, Dr. A. E. Hook, Cherokee.

Paper, "Osteopathy and Obstetrics," Dr. Ella Gilmour, Sheldon. Discussion led by Dr. Putnam.

Clinics, Dr. Charles Ray.  
Address, "Osteopathic Surgery," Dr. Parish, Storm Lake.

Paper, "Epilepsy," Dr. M. A. Hoard, Cherokee. Discussion led by Dr. D. M. Brown of Sioux City.

Paper, "Eye Troubles Treated Osteopathically," Dr. Putnam, Sioux City. Discussion led by Dr. F. G. Cluett, Sioux City.

Paper, "Fever Treated Osteopathically," Dr. Therese Cluett, Sioux City.

Address, "What Constitutes Genuine Osteopathy," Dr. G. H. Gilmour.

There was a good attendance and one of the most interesting and profitable meetings in the history of the society.

New members enrolled were: Drs. Parish, Therese Cluett and Marcus Brown. The former officers were reelected: President, Dr. A. E. Hook, Cherokee, Ia.; vice-president, Dr. Lena Enebo, Canton, S. D.; secre-

tary and treasurer, Dr. Ida E. Peterson, Hawarden, Ia.

It was voted to hold a two days session at the next annual meeting which is to be held in Storm Lake.

IDA ERFORD PETERSON, D. O.,  
Secretary.

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#### A. S. O. Alumni Hold Meeting in Michigan.

A preliminary meeting of A. S. O. State Alumni society, was held in the parlors of Hotel Burdick, Kalamazoo, Mich., Oct. 15, 1904, for the purpose of organizing the A. S. O. State Alumni society.

Those present were: Drs. R. E. McGavock, S. R. Landes, H. Landes, H. B. Sullivan, W. S. Mills, D. A. Mills, H. E. Bernard, W. D. Greene, Emilie L. Greene, R. A. Glezen, I. A. Beebe, L. C. McMillen.

Dr. H. B. Sullivan presided, and after stating the object and need of organization, he was on motion elected temporary president. Dr. Emilie L. Greene of Detroit was appointed secretary, pro tem, by the chair.

On motion a committee was appointed for the purpose of drawing up a constitution.

The chair appointed Drs. W. D. Greene of Jackson, I. A. Beebe of Battle Creek, and W. S. Mills of Ann Arbor.

Dr. W. E. Cully, of Flint, was chosen as the candidate of the alumni for the office of president of the state association for the ensuing year.

Chair appointed Dr. H. E. Bernard as nominator and Dr. W. S. Mills as seconder.

Meeting adjourned subject to call of the president.

EMILIE L. GREENE, D. O.,  
Secretary pro tem.

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#### Michigan State Association Held Annual Session at Kalamazoo, Oct. 15.

—PROGRAM—

9:30 a. m. Invocation: Followed by Address of President.

10:00 Paper—Dr. Della Renshaw, Detroit

10:30 Paper—"The Innominate Osteopathically Considered," Dr. E. E. Schwartz, Coldwater.

Discussion led by Dr. Geo. O. Smiley, Grand Rapids.

11:00 Clinic—Conducted by Dr. G. H. Snow, Kalamazoo.

#### NOON DINNER.

1:00 p. m.—P usiness.

2:00 "State Organization," Dr. E. Ashmore, Detroit. Discussion led by Dr. W. H. Jones, Adra' a.

2:40 "Osteopathic Examination and Diagnosis," Dr. O. B. Gates, Bay City. Discussion led by Dr. Wm. S. Mills, Ann Arbor.

3:15 Clinic—Conducted by Dr. R. A. Glezen, Kalamazoo.

4:00 Paper—"Bright's Disease," Dr. S. R. Landes, Grand Rapids. Discussion led by Dr. R. E. McGavock, Saginaw.

7:30 Paper—"Finances in Practice," Dr. H. E. Bernard, Detroit.

8:00 Paper—"Backache," Dr. J. M. Church, Detroit.

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#### Greater New York Osteopathic Society in Session.

At the regular meeting of the Greater New York Osteopathic society held at the Fifth Avenue Hotel, Oct. 21, the following program was carried out:

8:00 p. m.—Called to order.

8:20—Clinics, Dislocation of the Hip Joint, (not congenital,) conducted by William West, D. O., New York, Harry M. Still, D. O., New York.

8:55—An Address, Elmer Lee, M. D., New York, The Therapeutic use of Electricity.

9:20—An Address, Mason Pressley, D. O., Philadelphia, Osteopathy.

TEN O'CLOCK.

Adjournment.

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#### Physiological Action and Morbid Effects of Coal-Tar Products in Fever.

Sajous (MONTHLY CYCLOPEDIA OF PRACTICAL MEDICINE, May, '04), shows that fever is physiologically the result of the efforts of the system to rid itself of microorganisms and their toxins, and that the coal-tar products of which antipyrin is mentioned as the type, materially inhibit this process, for the following reasons:

1. Antipyrin promptly causes marked vasoconstriction.

2. The vasoconstriction, both of the arteries and veins, may be sufficiently marked to obstruct the circulation in, and cause engorgement of, capillaries.

3. Very large doses, small doses too fre-

quently repeated, or small doses in subjects whose adrenal system is abnormally sensitive may cause sufficient vasoconstriction of the arteries and veins to greatly reduce their caliber. The arterial blood in the capillaries is then exposed to the reducing action of the surrounding tissues sufficiently long to become transformed into venous blood, thus causing cyanosis.

4. When the adrenal system is unable, owing to congenital, acquired, or temporary susceptibility, or an organic lesion of either of its component parts, to withstand the violent stimulation to which antipyrin subjects it, the functions of the adrenals may suddenly cease under the influence of even small doses of the drug, and the symptoms of adrenal failure appear.

5. Antipyrin, in the stage of depression, reduces the temperature by causing adrenal insufficiency. The resulting dilatation of the great central vascular trunks causes depletion of the peripheral capillaries and the internal temperature is thus raised, while that of the surface is lowered.

6. Antipyrin should not be used during toxemias, especially when fever is present. It only acts as an antipyretic by causing excessive hyperemia of the adrenals—a condition exposing the patient to general collapse, even when small doses are administered.—  
DETROIT MEDICAL JOURNAL.

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#### President's Address to the New Jersey Osteopathic Society.

F. P. SMITH, D. O., MONTCLAIR, N. J.

FELLOW OSTEOPATHS AND FRIENDS:

It is with great pleasure and pride that I call to order this the fourth annual meeting of the New Jersey Osteopathic society. We all have reason to feel proud of our organization, one of the best and most energetic in the profession; free from all dissension, and all striving in unison for the same goal—the recognition of our beloved profession and the elevation of its standard.

This harmony among us I hope and pray may continue, for the time is approaching when we must fight for our existence in this state, and there is nothing more demoralizing to an organization, or a cause, than internal strife at a time when its energies are required in another direction.

During the past year we have had no special work to do. We have been on the alert for signs of trouble, and on several occasions thought we saw them, but up to the present time nothing alarming has developed. The case of Dr. E. M. Herring, of Asbury Park, with the particulars of which you are all familiar, comes up before the Court of Errors and Appeals during the month of November. This case has been taken up by the society and will be vigorously pushed. We have retained Mr. Herring's lawyer, Mr. S. A. Patterson of Asbury Park, in whom your committee has every confidence. Mr. Patterson also feels confident he can carry the case to a successful issue. Should we possibly lose in the Court of Errors and Appeals, we must carry the case if possible to the Federal Courts at Washington on the ground of infringement of personal rights. Should we win in the Court of Errors and Appeals we must then follow up our advantage by demanding recognition by legislation, either by an amendment to existing laws with representation on the state board of examination, or by a separate bill of our own. In many respects the latter would be much preferred. This year should settle the status of osteopathy in the state of New Jersey, and especially so if this case is decided in our favor.

Traditions and sentiments reaching down through the struggles of years, and the habit of applying fixed rules of interpretation and of thought, all give to a profession known and inalienable qualities, from which must follow in their ultimate action, like results for good or bad. Those traditions and sentiments have been followed by the old school of practice for ages. New experiments have also been lauded for a time, only to be lost sight of through their inability to bring about the desired result. Up to the present time there are very few specific drugs in the pharmacopeia, and these few must certainly work, to a great extent, besides by their specific action, differently upon different subjects, for there are no two constitutions just alike, and again, as similarity of superficial symptoms does not necessarily imply similarity of disease, it is readily seen that drug medication necessitates daily

experimentation. This accounts, in a great measure, for the failure of the old schools of practice, but more especially so to the fact, that the mal-adjustment of bodily tissues producing disease, has never been recognized by the other schools of medicine to the extent that it is recognized by the osteopathic school.

Fellow osteopaths, we possess a great truth. All honor to that grand old man, Dr. A. T. Still, for his great courage in breaking away from these same traditions and using his "good horse sense," which has brought to us and to the world the science of osteopathy. Let us practice it in its pure simplicity, not defiling its good name as many are doing by substituting adjuncts when they fail to recognize osteopathic pathology, thus detracting from osteopathy and Dr. Still the great credit justly due it and him.

We do not deny that other schools have men of courage, honesty and ability; on the other hand, they have many, and great credit is due them for their researches which have enabled us to study the human body and its functions with some degree of certainty; but we do assert, with confidence, that above all others, by the influences which gave it birth and have maintained its life, by the cause for which it has striven, the ideals it has followed, that osteopathy, through Dr. Still's work, has acquired a knowledge of the human body, its functions, its diseases, a method of diagnosis and treatment, far in advance of any known system, fully in accord with Nature, never denying her immutable laws, but assisting her in maintaining functional equilibrium or restoring that equilibrium when lost.

Not many of us measure up to Dr. Still's standard, but, striving as a whole, and by practicing osteopathy in its purity, our beloved profession cannot fail to work, in the spirit of the founder of osteopathy and in loyalty, to great ideals.

\* \* \*

WANTED:—An experienced osteopath (gentleman), graduate A. S. O., desires salaried position. Will contract for six months or longer. Address L, care Journal of Osteopathy.

## The Journal of Osteopathy.

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The vibrator promotor continues to bob up serenely at intervals and ought to be commended for his zeal in pushing an uphill business, if for nothing else. Members of the profession continue to get regular installments of "literature" extolling the wonderful merits of the machine, which according to the last batch sent out is now able to do better work at such business as adjusting ribs than those osteopaths who use only their hands for this purpose. Several months ago it was modestly claimed for the machine that it could do the work only as well as the skilled manual adjuster but with less exertion to the operator, but that it seems was not strong enough to make the stock on hands go. With a little boost in an editorial in the October number of the A. O. A. Journal, and an announcement that the editor of said Journal has his office equipped with one of 'em, the vibrator man gets new wind in his sails and now comes forth with the claim that the vibrator can do better work than the hand—undoubtedly a false claim, a ridiculous assertion.

\* \* \*

"An Ohio Woman in the Philippines" is the title of a very interesting book recently published by Emily Bronson Conger of Akron, Ohio. Mrs. Conger needs no introduction

to the readers of the Journal as her work in the Philippines in connection with osteopathy and her association with osteopathic affairs in general have made her one of the best known members of the profession. The editor has read the book with pleasure. It contains an account of her sojourn in the Islands, a history of the people and conditions as exist there today, and a chapter on "Osteopathy" which adds to the interest of the book. It is a remarkable production, written by a remarkable woman. Mrs. Conger's style in writing, like her pleasing manner as a conversationalist, is earnest, straightforward, lively, never lacking in interest. It is in reality a most valuable narrative and cannot but be of intense interest to anyone who desires to know the true relations as they exist there between our government and the inhabitants of our new possessions—their modes of living, religion, customs, habits, etc. The price of the book is \$2.00.

\* \* \*

It is with deepest regret that the JOURNAL announces the untimely death of Dr. Guy Dudley Hulett, professor of the Principles and Practice of Osteopathy at the American School. For the first time in the history of the institution death has made its unwelcome visit to the faculty of the school, selecting from its number a man beloved and highly respected for his true and noble qualities. Dr. Hulett's death occurred Saturday, Oct. 29, after a severe and prostrating illness of typhoid fever lasting three weeks. He had been in poor health for a number of weeks and in his effort to keep up with his school work he was completely prostrated at the time he was forced to give it up. He had passed through the crisis of the fever without serious complications and hope had been entertained of his recovery, but in his weakened condition he was unable to rally.

Dr. Hulett was born at Edgerton, Kansas, thirty years ago last January, he was educated in the public school of his state and at the State Agricultural College at Manhattan from which institution he graduated in 1898. The following fall he entered the American School of Osteopathy, graduating with the June class of 1900. Since his graduation he has been a member of the

faculty of the school and has at different times filled the chairs of Physiology, Principles of Osteopathy, and Practice of Osteopathy with credit and honor to himself, to the institution and to the science of which he was a devoted and conscientious disciple.

His work on the "Principles of Osteopathy," which he recently published and which has had a wide sale in the profession will stand for years to come as a monument to his energy, ability and sincerity of purpose in developing the scientific side of the science he lived to serve.

Loved for his honor, respected for his scholarship, his name will never cease to be connected with the science of osteopathy as one of its ablest and truest exponents.

The example of his noble life, the services he rendered the cause in which he wrought, are proof that he lived for humanity—to make the world better and brighter.

As a fitting tribute to his memory the entire student body, the faculty, and others friends assembled in Memorial Hall on Sunday at 3 p. m. where the funeral services were conducted by Rev. Lusk of the Methodist church. On Monday following the remains laid in state in Memorial Hall from 2 p. m. to 10 p. m. at which time the body was taken to the Wabash station, accompanied by students and faculty, where final preparations were made for the journey to Edgerton, Kans., where burial took place. His sorrowing friends are consoled by the memory of his life which stands for devotion to duty, simplicity of living, and work well done.

G. M. L.

\* \* \*

The position of the Osteopathic Physician, as expressed in the October issue, on the vibrator question is to be heartily commended. The editor in his last acrobatic feat has landed with both feet squarely on the osteopathic platform. We always believed that Dr. Bunting had the best interests of the profession at heart and that he would in due time line up with the rank and file of the profession on fundamental questions. That's right Harry, get right with osteopathy and we'll all give the O. P. a boost.

The position of the Journal with reference to the use of adjuncts of all kinds by the osteopath is too well known to be restated. We have always opposed them on the ground that their use is detrimental to the best interests of the science—not that they were in all cases without some merit. The principal business of the osteopath being to adjust abnormal tissues, we have contended that this can be done more successfully by skillful manual treatment than by any other method. The vibratory method has no doubt done some good things, so has massage and other methods, but have those methods done anything that osteopathy pure and simple could not do? They are too limited in their field of applicability to complete with the osteopathic system.

Can a vibrator set a cervical vertebra? Can a vibrator set a rib? Can a vibrator set an innominate? Can a vibrator adjust a curvature? These are questions that come to us in the discussion of this question, as those who practice the system as taught by Dr. Still are called upon in their daily practice do this kind of work, and it is by doing such work that they get results.

\* \* \*

#### Dr. A. P. Hibbs Wins Victory in Utah.

Dr. A. P. Hibbs, the osteopath, may now practice his profession without hindrance from the courts. The case against him prosecuted by the State was yesterday dismissed by the Supreme court. The ground for the dismissal was that, in the judgment of the court, it had no jurisdiction.

Dr. Hibbs was prosecuted for practicing medicine without a license. He was found guilty in the City court and submitted to a nominal fine. A test case was made out of the matter and it was appealed to the District court. Judge Morse, who heard the case, decided in favor of the osteopath on the ground that he does not practice medicine of surgery within the meaning of the law and therefore does not need to be examined by the State Board of Medical Examiners.

The State then appealed to the Supreme court, with the result as stated above. Attorney D. N. Straup, represented the osteopaths, all of whom, residing in Utah, are highly elated over their victory. The reg-

ular physicians and surgeons are not so pleased, as it was at their instigation that the prosecution was set on foot against the osteopaths. Attorney-General Breeden represented the State.—Ogden Times, October 12th.

\* \* \*

#### North Carolina Osteopaths Organize.

The osteopaths of North Carolina met at Greensboro, Oct. 8th, and organized the North Carolina Osteopathic association. The first movement was a recommendation that each member join the A. O. A.

Our officers are as follows: Dr. C. H. Grainger of Winston-Salem, president; Dr. H. F. Ray, of Charlotte, vice-president; Dr. W. B. Meacham of Asheville, secretary and treasurer. We have decided to try to get a law in favor of osteopathy in this state at the next session of the legislature. It will be a hard fight I suspect, but we have every hope of winning. I am chairman of the legislative committee, and will in due time make a report as to the course we will pursue. We are expecting the medical men to bring up a bill regarding us here. We will have to meet it of course, and will introduce a bill in favor of osteopathy before they get theirs in if we see that they are going to try to shut us out. North Carolina is one of the best states in the South for osteopathy, and right at this very next legislative meeting will be, I think, the very time to strike. We have nine osteopaths in the state, and they are all good ones, too, and will fight for their rights in this state. We ask for an earnest interest and co-operation of all the schools and osteopaths of the United States in this work that we are now undertaking. We are willing to receive advice and suggestions from any one. We must not lose the state.

H. W. GLASCOCK, D. O.

Raleigh, N. C.

\* \* \*

#### Dr. F. G. Thomas Dead.

The sad news was recently received here that Dr. Frank G. Thomas had died suddenly in Memphis, Tenn., at the home of his brother, Robt. L. Thomas. For several months Dr. Thomas had been quite ill from nervous trouble and had been a great sufferer. He went to Hot Springs and sought

relief there but his malady grew worse. He came to Tupelo two months ago and under the tender nursing of his devoted wife and mother he had apparently improved. It was deemed advisable to put him under the treatment of a specialist and for this purpose he was taken to Memphis. The announcement of his death was a great surprise to both his family and friends.

Frank G. Thomas was reared at Shannon where he is best known. Just as he reached manhood he went with his father to Memphis and for several years was in business in that city. Last June he graduated from the American School of Osteopathy at Kirksville, Mo., but on account of his illness had never engaged in the practice. Two years ago he was happily married to Miss Maude Brown, a lady of culture, who survives him.

Dr. Thomas was a young man, of fine intelligence and possessed a kindly heart. He was universally popular and made friends among all classes. His death is regretted by everyone. The interment took place Wednesday at Shannon under the direction of the Masonic fraternity.—Tupelo Miss. Journal

\* \* \*

#### New Jersey Osteopaths in Fourth Annual Session.

The fourth annual meeting of the New Jersey Osteopathic society was held in Newark, N. J., October 22nd.

The routine business of the society was disposed of during the morning session. In the afternoon, papers and cases were presented by Drs. R. M. Colborn, Melbourne Monroe, J. C. Howell, Laura A. Leadbetter, Chas. E. Fleck, and O. J. Snyder.

The election of officers for the ensuing year resulted in the re-election of Drs. F. P. Smith, Montclair and Geo. D. Herring, Plainfield, for president and secretary-treasurer. Dr. Laura A. Leadbetter, Orange, was elected vice-president, Drs. S. H. McElhaney, R. M. Colborn and Melbourne Monroe, of Newark, as executive committee.

\* \* \*

#### Dentistry From an Osteopathic Standpoint.

BY A. T. STILL.

The work of the dental surgeon has not received the attention of osteopaths that its importance to the health of the body merits.

As a matter of fact, dental surgery ranks

ahead of operative surgery as the operative surgeon only removes defects, while the dental surgeon's work is to care for the mouth and keep it in the best possible condition for speech and mastication.

Proper mastication of food is essential to the health of the body, as digestion, assimilation and nutrition are dependent upon it.

This calls for a thorough knowledge of the muscles of the face and jaws, with their nerve and blood supply, as well as a knowledge of the teeth and maxillary bones.

The neck should also receive the careful attention of the dentist, for in the neck the track of life is laid. Here pass the nerves that supply every part of the body the head

The neck should also receive the careful attention of the dentist, for in the neck the track of life is laid. Here pass the nerves that supply every part of the body below the head, furnishing the force necessary to the proper functioning of every organ in the body, thus accomplishing their duty of supplying sensation, motion and nutrition to the organism.

To the student of anatomy and physiology it is undebatable that the health of the body depends upon a perfectly normal neck; thus the importance of a knowledge of the bones, their form, position and how they support the head. With this as a foundation, it is but reasonable and just that we insist that our dental surgeons know the anatomy of the whole body and the ill effects of displacements in the neck and how to correct any injuries he may accidentally inflict in his work of extracting teeth.

In extracting a large tooth, the dentist gets his left arm about the patient's head to steady it, while his right hand holds the forceps which give an additional leverage to the arm of from four to six inches. He pries and pulls until the tooth comes out, when there is an abrupt disconnection between the tooth and the jaw. At that instant occurs the danger of dislocating the neck at some point. The patient feels no pain only at the tooth, so pays the fee and goes away happy, thinking his sufferings are permanently relieved.

But the next morning, all is changed. He gets up with a headache and dizziness; or he tries to read and finds the letters blurred.

Occasionally, a patient finds one side of his face drawn out of shape. The family doctor is called in, who says, "You have had a stroke of paralysis." The doctor does not know enough of anatomy to tell his patient that the dentist has dislocated his neck. The dentist is also blissfully ignorant of what he has done. His school has not demanded a thorough knowledge of the anatomy of the human body, neither has the public realized his need of it.

It is the purpose of this brief article to call the attention of the student of osteopathy to the dangers to the patient from employing an ignorant dentist and the possibility of injury to the nerves of the face, neck, lungs, heart and abdominal viscera, causing disease, either local or constitutional

Can you slip an atlas to the right or to the left, backward or forward and not compress a nerve or blood vessel going to or from the brain? Can you slip any bone of the neck and not compress an important nerve? If not, then you have the cause of enlarged tonsils, goitre, tumors of the neck, diseases of the tongue, mouth, trachea, oesophagus, heart, lungs, and the more common effects of enlarged lymphatics, eruptions on the face and loss of hair. For example, a slip in the neck might put a pressure on the cardiac nerves producing a confusion, manifested by increased, intermittent or decreased heart action. Or the displacement might disturb the nerve to the respiratory system resulting in stagnation of fluids in the lungs.

Should we continue our investigations, we would find that there is no part of the body but would be effected by a cervical displacement. Then how important it is, that any one having anything to do with the care of the body, be he an osteopath or a dentist, should know when the neck is normal and how to correct it when it is abnormal.

But it must not be inferred that I consider the dentist responsible for all neck dislocations. I am only emphasizing the fact that he has unwillingly had a part in their production; a part that has too long been unnoted by osteopaths. In other cases of dislocations of the neck, osteopaths are accustomed to get a history of falls, sudden jerks, running against wires or slips

on ice. But I have found that in addition to these accidental causes, a great per cent. of the cases can date the beginning of their illness from the time they required a dentist's services. I have had many cases of facial neuralgia, loss of sight or hearing, facial paralysis and dislocations of the inferior maxillary and cervical bones, that could be traced to the dentist. And how frequently do we hear of a broken drill being left in the cavity of a tooth which is afterward covered up with a filling and left to torture the patient and cause abscesses, or a necrosis of the bone?

In conclusion, I wish to say a few words further in regard to the mechanical duties of a dentist. Of all mechanics, he should be the most accurate; but it seems he too often thinks more of the polish and the appearance of a set of teeth, than he does of the fit, comfort and use. Should the sufferer complain, he is told to be patient, that the mouth will soon become accustomed to the use of the plate.

What would we think of a carpenter, who was called to fit a board in an opening in the floor and should leave one end of the board above the level of the floor and should say, "Never mind; the floor will adjust itself to the board in the course of a few months?" The dentist would discharge any carpenter that would do such imperfect work on his floor.

But the carpenter's course would be just as rational as that too often pursued by the dentist in making a plate for a patient that fits imperfectly and when asked to improve on it, says, "Just keep right on wearing it and your mouth will soon get accustomed to it." Is he unreasonable enough to suppose that the jaw will change to fit the plate? On the contrary, I affirm from over thirty years experience with crippled jaws, that a plate should be so well fitted that a patient may go home and at once be able to eat his dinner, comfortably instead of living on broths for six months. But all too frequently, the patient goes on suffering month in and month out from the ill-fitting plate, the result of the unpardonable ignorance and stupidity of the dentist. At last, his patience is exhausted and he puts the plate away in the bureau drawer; and it is only

after he is dead that he is able to wear it permanently.

In this day of scientific investigation, the dentist should remember that he is before the grand jury of progressive intelligence, which may report a true bill of indictment for anatomical and physiological ignorance as the cause of an unlimited number of diseases following injuries received in his office.

\* \* \*

#### Idaho D. O's Organize

The osteopaths of Idaho met at Boise, Oct. 20, 1904, in response to a call issued by the osteopaths of Boise, and formed the Idaho State Osteopathic association.

The following officers were elected: President, S. R. Rightenour, Boise; vice-president, T. K. Walsh, Nampa; second vice-president, R. L. Maxwell, Boise; secretary, J. H. Bodle, Boise; treasurer, Mary A. Kingsbury, Boise. The object of the association is for the mutual benefit and closer relations and acquaintance of its members, and for the advancement of the science of osteopathy.

J. H. BODLE, D. O.,  
Secretary.

\* \* \*

#### Foot Ball.

The foot ball team of the A. S. O. played its first regular game on Oct. 1st versus Amity College. The game resulted in a score of 6 to 0, in favor of the osteopaths.

The team work showed much improvement over the practice game played with the State Normal earlier in the season. The work done by Norton, Roberts and Rust was up to the usual standard.

On Oct. 22, the osteopaths played Gem City Business College at Quincy, Ill. The game was fiercely contested throughout and the osteopaths won by a score of 5 to 0. The team work of the A. S. O. was greatly hampered by the people crowding in the field when we were in possession of the ball and fast playing was next to impossible. The G. C. B. C. plays at Kirksville on Nov. 11, when the Kirksville team will probably make a better showing.

Oct. 28th, the osteopaths beat the Chillicothe Normal team by 38 points, not allowing Chillicothe to score. This team while lighter than the Kirksville team put up a gritty fight to the finish.



On November 4th, the A. S. O. played the National Business College of Quincy at Kirksville, defeating them by a score of 34 to 0.

The Thanksgiving day game will be played at St. Louis against the Christian Brothers College of that city.

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Sometime ago we reprinted an article from the Chicago Ophthalmologist in regard to Houston Brothers Co. of Chicago, a house dealing in physicians' supplies. It appears that the article in question takes the Houstons to task for advertising for sale an abortion curette. The advertisement in question, it is claimed, appeared in the Chicago Clinic as follows:

#### Houston's Abortion Curette

is worth its weight in gold in those early cases of gestation (6 to 10 weeks) that give every physician so much trouble. We sell it on a positive guarantee. Money refunded if satisfaction is not given. A few of the advantages of this new instrument are: (1) No dilatation even in cases of intense rigid cervix. (2) No anesthetic. (3) Absolute certainty of removing the entire contents. Price, \$2.00

In the comment of the ophthalmologist, the position is taken that such instruments are too frequently used for immoral purposes and that the houses that offer them for sale take advantage of this demand for them to increase their sale. There is without doubt a legitimate use for the curette in certain cases of abortion—other legitimate instruments may be used for immoral purposes; the house selling them is not at fault unless their use for immoral purposes is encouraged. We desire to deal justly and fairly with the Houstons and therefore very willingly publish their statement as follows:

"The facts are that we have been doing a physicians' supply business for about 18 years, handling only the finest quality and doing a strictly legitimate business in every detail. We are not under obligation to the so-called, "regular" profession, as the writer of the libelous article appears to think. A very large portion of our business comes from the osteopathic profession among whom we count some of our warmest friends.

Whilst we carry absolutely everything used by physicians, we have for many years made a specialty of the newer surgical inventions, among which we are very proud of our Huston Centrifuge, our Portable X-Ray outfit, and our Manikins. We have absolutely nothing of an immoral or illegitimate character and we fail to see how any one who is at all familiar with human anatomy and with any instrument that we have ever sold, could make such an accusation against us."

\* \* \*

#### Wayne County, Michigan, Alumni Society.

A number of A. S. O. graduates gathered at the residence of Dr. H. B. Sullivan in Detroit on Saturday, Oct. 1st, and organized a county alumni society. The objects are to cement more firmly the bonds that exist between them; renew college spirit and loyalty; promote social intercourse among A. S. O. practitioners; and to further the interests of orthodoxy in osteopathy.

The meeting was in every way a success and much enthusiasm was shown.

\* \* \*

As we go to press a message from Steubenville, Ohio, announces the death, from typhoid fever, of Dr. A. J. Bumpus of that city.

\* \* \*

WANTED:—To buy office furniture, etc. in good town in Mississippi Valley, or trade with one wishing to change location. Address, J, care Journal of Osteopathy.

\* \* \*

WANTED:—Salaried position by lady, graduate of A. S. O., in South or West. Experienced, excellent references. Address, M. H., care Journal of Osteopathy.

\* \* \*

FOR SALE:—My established practice in Cincinnati, Ohio. Also the famous W. Scheidel & Co. X-Ray coil, Light frequency apparatus, etc., 110 volt direct current. Cost \$365 a year ago, will sell for \$185 cash, very little used and guaranteed in first-class order. Illness of wife, necessitating her continued residence in the southwest, is the cause of this move.

DR. JOHN SWANSON,  
705 Commercial-Tribune Bldg.

#### A. S. O. Alumni Meeting to be Held at Kirksville.

The regular meeting of the Alumni association will be held at Kirksville, Jan. 27th and 28th, as provided by Section I. of Article IV. of the Constitution.

As plans will be formulated having in view the organization of county and state branches of the association and the general strengthening of the alumni as a factor in osteopathic affairs you are urgently requested to be present.

The program of the meeting will be published in the December Journal.

\* \* \*

WANTED.—The following copies of the JOURNAL OF OSTEOPATHY: January and March 1898, July and August 1899, March and June 1900.

E. R. BOOTH,  
Traction Bldg., Cincinnati, Ohio.

\* \* \*

#### Personal Mention.

Dr. C. H. Gano of the last graduating class, has located at Washington, D. C. He has offices in the Home Life Bldg.

Dr. Beth V. Hall of the June class of 1904, has recently located at Whittier, Cal.

Dr. Lewis A. Meyers of the June class 1904, announces his location at the Hellman Bldg., Los Angeles, Cal.

Dr. Paul Shoemaker announces his location at 215 Main St., Jamestown, N. Y.

Dr. G. W. Krohn, who has had charge of Dr. H. M. Vastine's practice at Harrisburg, Pa., during the past summer, announces his new location at 55 W. Louthier St., Carlisle, Pa.

Dr. G. M. Hester, June class 1904, has located at Armour, S. Dak.

Dr. J. S. and Nannie R. Baughman announce their new location at 901-2 Loan & Trust Bldg., Washington, D. C.

The partnership heretofore existing between Drs. Davis and Campbell of Beaumont, Texas, has been dissolved. Dr. Davis will remain in charge of the practice at 99 Weiss Bldg., Beaumont, while Dr. Campbell will seek a new location.

Dr. Katheryn Talmadge, recently a member of the operating staff at the A. T. Still Infirmary, has located at Washington, D. C. She has offices in the Colorado Bldg.

Dr. C. H. Hoffman of Des Moines, Ia., was recent visitor at the A. S. O.

Dr. Lamar K. Tuttle of the last graduating class, has opened an office for the practice of his profession, at 38 W. 33rd St., New York City.

The partnership heretofore existing between Dr. J. H. Overton & Dr. J. L. Holloway at Dallas, Texas, has been dissolved by mutual consent. Dr. Overton will remain at the old location 401-2 Slaughter Bldg.

Drs. Holbert and Carlson of Sedalia, Mo., have dissolved partnership. Both will remain in the practice at Sedalia, Dr. Holbert having offices at 213 W. 6th St. and Dr. Carlson at 212 Hoffman Bldg.

The partnership existing between Drs. Taylor & Boyer of Peoria, Ill. has been dissolved. Dr. Taylor will remain at the old location in the Masonic Temple, while Dr. Boyer has taken offices in the McDougal Bldg., in that city.

Born, to Dr. and Mrs. S. W. Longan of Kansas City, Mo., on Oct. 15th, a daughter.

Born, to Dr. and Mrs. E. H. Cosner of Upper Sandusky, Ohio, Oct. 23rd, a son.

Born, to Dr. and Mrs. C. E. Shifflett of Coffeyville, Kans., on Oct. 1st, a son.

Married, on Oct. 10th, at Brookfield, Vt., Dr. A. L. Bean and Nina Maude Carpenter.

Drs. Genevieve Evans and Bertha Buddecke of St. Louis, Mo., have formed a partnership for the practice of their profession. They have offices in the Carleton Bldg.

Married, on Oct. 4th, at Marietta, Ohio, Dr. E. G. Housman of Mountain Home, Idaho, and Dr. Blanche McLaren of Marietta.

Married, on Sept. 9th, at St. Cloud, Minn., Mr. Arthur E. Morgan and Dr. Urania T. Jones, both of St. Cloud.

Dr. G. S. Hoisington has gone to Pendleton, Ore., where he will open an office for the practice of osteopathy.

Married, on Sept. 6th, at Grand Rapids, Mich., Dr. J. Carey Edwards, of Wallace, Idaho, and Miss Bessie Gulliford, of Grand Rapids.

Dr. W. A. Cole has recently located at Burlington, Iowa, for the practice of his profession.

Married, on Oct. 20th, at Indianapolis, Ind., Dr. Francis W. Hanna and Miss Mabel Helen Bogert, both of Indianapolis.

Born, to Dr. and Mrs. H. E. Penland of Eugene, Ore., Oct. 4th, a daughter.

Dr. E. E. Tucker, formerly of Akron, Ohio, is now located at 204 Camp St., New Orleans, La., for the practice of osteopathy.

Drs. J. L. Huntington and Grace Stratton of the last graduating class, have formed a partnership for the practice of osteopathy at Omaha, Neb., They have offices in the N. Y. Life Bldg.

Dr. J. B. Kinsinger of Rushville, Ind., informs us that he has just moved into his new residence and sanitarium, which he has built to accommodate his large practice.

Dr. A. T. Still spent ten days in October visiting Chicago friends.

Drs. C. M. T. Hulett of Cleveland, Ohio, and M. F. Hulett of Columbus, Ohio, attended the funeral of their brother, Dr. G. D. Hulett, at Kirksville, Oct. 30th.

Dr. Ida A. Bush, who for the past three months has been assisting Dr. Still in the preparation of the manuscript of his new book, "The History of Osteopathy," has gone to Idaho Springs, Colo., where she will open an office for the practice of her profession.

Dr. W. W. Steele of Buffalo, N. Y. made the A. S. O. and his old Kirksville friends a brief visit during the latter part of October. It was the doctor's first visit to his Alma Mater in nine years. He addressed several of the classes while here and gave them a number of good points on work in the field.

The following alumni visited the A. S. O. during the past month: Drs. Fred Gage Chicago, Ill.; Thomas Ashlock, St. Louis, Mo.; J. Carey Edwards, Wallace, Idaho; Charles McCoy, Ogden, Utah; M. C. Robinson, Joplin, Mo.; Geo. Parks, West Plains, Mo.; Lucy K. Peel, Findlay, Ohio; Mary J. Magers, Seymour, Iowa; R. W. Cain, Pagosa Springs, Colo.; Eva M. Hunter, Livingston, Mont.; John F. Holsclaw, Albia, Iowa; Julia L. Hickman, LaGrange, Mo.; Alice A. Holland, Albia, Iowa; S. R. Meeker, Auburn, N. Y.; Theodocia E. Purdom, Kansas City, Mo.; Martha Petree, Oregon, Mo.; E. G. and Rebecca Magill, Peoria, Ill., and Fannie B. Laybourne, Denver, Colo.

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#### Removal Notices.

Dr. Guy C. Hudson, from Syracuse, Nebr., to Juliaetta, Idaho.

Dr. J. C. Herman, from Magnetic Springs, Ohio, to Daytona, Fla.

Dr. M. C. Hollister, from Orange, N. J., to 929 Marcy Ave., Brooklyn, N. Y.

Dr. Emery Ennis, from Petersburg, Ill., to 403 Capitol Ave., Springfield, Ill.

Dr. C. D. Berry, from Hornellsville, N. Y., to Granite Bldg., Rochester, N. Y.

Dr. Anna K. Aplin, from 397 to 354 Jefferson Ave., Detroit, Mich.

Dr. S. C. Robinson, from Williamsport, Pa., to Auburn, Ind.

Dr. J. G. Leslie, from Eugene, Ore., to Florence, Ore.

Dr. Geo. Cleary, from Provo City, Utah, to Boise, Idaho.

Dr. G. E. Hassmann, from St. Louis, Mo., to Springfield, Ill.

Dr. W. C. Harding, from Detroit, Mich., to Seattle, Wash.

Dr. N. B. Barnes, from Mexico, Mo., to Hammond, Ind.

Dr. W. E. Dwiggin, from Attica, Ind., to Bakersfield, Cal.

Dr. Clara M. Covert, from Kansas City, Mo., to Neodesha, Kans.

Dr. Stanley Pemberton, from Springfield, Mass., to 144 Carroll St., Paterson, N. J.

Dr. Margaret Carleton, from Barre, Vt., to P. O. Blk., Keene, N. H.

Dr. W. I. Joss, from Newark, N. Y., to 816 Columbia Ave., Philadelphia, Pa.

Dr. C. I. Poole, from 90 Franklin St., to 292 Pine, Fall River, Mass.

Dr. C. A. Camp, from Lincoln, Ill., to Bloomington, Ind.

Dr. Anna Hadley, from No. 119 Montague St., to The Arlington, 64 Montague St., Brooklyn, N. Y.

Dr. Harriet A. Whitehead, from White-water, Wis., to Wausau, Wis.

Dr. L. E. Downs, from Joplin, Mo., to Honey Grove, Texas.

Dr. S. Virginia Crawford, from Revona, Pa., to Swab Bldg., Harrisburg, Pa.

Dr. Madeline Stravens, from St. Charles, Mo., to Salem, Ore.

Dr. M. Hook, from Hutchinson, Kans., to Kingman, Kas.

Dr. S. H. Runyon, from 228 N. Pine, to 211 W. Montgomery St., Creston, Iowa.

Dr. E. E. Talbott, from Lathrop, Mo., to Cameron, Mo.

Dr. G. C. Maxwell, from Huntington, Ind., to Columbia, Miss.