

# **The Journal of Osteopathy**

**March 1912**

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# The Journal of Osteopathy

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# The Journal of Osteopathy

EDITED BY A. S. HOLLIS, A. B., D. O.

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## Editorial

**The Merits of Lithia Tablets** We were interested to note in a recent number of the Outlook a discussion upon Lithia Tablets and we believe that it is of sufficient importance—indicating as it does the progressive advance of medicine in the past few decades—to warrant our quoting from it. The article in question reads as follows:

"The changing views of the medical faculty as the result of scientific investigation are well illustrated by the history of the use of lithia in medicine. A good many years ago a prominent physician in England made a series of careful experiments on selected young men in perfect health, and demonstrated that by the use of lithia the elimination of uric acid was greatly promoted. The experiments seemed conclusive, and at once the physicians of Great Britain began prescribing lithia for gout and rheumatism, and as soon as the publication of the experiments got into the medical journals of France and Germany the use of this substance became practically universal. But Dr. Emil Pfeiffer, a prominent physician at Wiesbaden, discovered, to his surprise, that the expected results did not materialize when he gave lithia to the many patients who had come to that city for the waters and for treatment. Not understanding why this was the case, he repeated the English experiments, but, instead of taking carefully selected subjects in perfect health, he chose a number from among his patients who were suffering from the uric acid diseases. TO HIS SURPRISE, HE DISCOVERED THAT THE RESULTS OBTAINED IN ENGLAND WERE ABSOLUTELY REVERSED AT WIESBADEN; THAT LITHIA ACTUALLY RETARDED THE ELIMINATION OF URIC ACID IN GOUTY PATIENTS, AND THAT ITS USE TO THIS EXTENT WAS HARMFUL RATHER THAN BENEFICIAL. After controlling his results in the careful German way, he published his conclusion. At once the medical faculty of Germany began to give up the prescription of lithia. The doctors of

France followed, and after the translation of Dr. Pfeiffer's paper into English the more progressive and younger doctors of America and England gave it up, until its use in medicine has practically ceased. As a consequence, the wholesale price of lithium carbonate has fallen within the last few years from about two dollars to about sixty-five cents an ounce, and were it not for some new uses for this element which have been recently discovered it would probably disappear from the drug-stores and sooner or later from the pharmacopoeia."

We wonder in how many other drugs the same result might not be obtained if equal precautions were taken and equally careful experiments were made, and we would ask "how long will the majority of the people be willing to be deluded by the specious claims of the drug therapists, founded as they are upon incorrect hypotheses?" We would not make exclusive claims for Osteopathy, but we would for truth; and we would plead for the earnest investigation into the fields of therapeutics with the truly scientific spirit of desire for a knowledge of the truth. That but few of the average medical practitioners are willing to give up their pet theories and hobbies in the face of even overwhelming evidence is well shown by the organized effort to oppose the obvious truths that Osteopathy has victoriously heralded.

**The Ignorant Practitioner** The terrible ignorance that characterizes much of the advertising literature of the unqualified charlatan or quack can scarcely be paralleled by the excerpts that we here reproduce and which were sent in from two or three sources, showing that the "Exclusive Dispatch" has been fairly widely circulated.

"Infantile paralysis—the dreaded disease which has reaped a harvest of young and old alike, and for which no remedy has been discovered—has found a master."

This at first sight would seem to be a rash statement to make in so sweeping a manner if the writer had known even the elements of the pathology of the disease, but the reading goes on to state that this "master" is a certain "Dr. Roy O. Bernard, who claims to have discovered the lair of the dreaded germ in the human body."

So far the clipping reads as if the "germ" was some wild animal lurking in the thickets of an African forest. But let us see what procedure is suggested by this "master" of disease. We are told "To exterminate the deadly organism, which causes paralysis of motion in a victim's body within a few hours after it makes its attack, he has discovered a mechanical stimulation treatment." Very delightful that—a mechanical stimulation treatment—so lucid and yet so elusive and showing

such a thorough grasp on the principles of mechanical therapeutics that we almost cease to wonder at his "great success." But he goes on "By a simple method, every vestige of the disease can be eradicated in twelve to fifteen days." Then after referring to a case that is reported to be cured, the master is quoted as stating that "Infantile paralysis is an inflammation of the ANTERIOR HORNS OF THE GRAY MATTER OF THE BRAIN."

"IT" (what "it" is does not appear) "Is a GERM, just the same as pneumonia or typhoid fever. It is deadly in its work and causes the victim to lose ALL power of motion." Some quite interesting anatomical and clinical findings are here recorded.

And now to the great secret of this "master's" success. Again we quote his own words as follows:

"My system is this. I found by dissection that the infantile paralysis germ centered in the THIRD CERVICAL VERTEBRAE OF THE SPINAL CORD. I discovered that it completely destroyed the nerve cells. These control the power of motion."

Again some interesting anatomy; and then too what a wonderful dissector he must be and moreover, he has discovered the secret of the regeneration of a nerve cell; the mechanism of this phenomenon he explains in these words:

"By applying a mechanical stimulation to the single nerve center I found that an equalization of the blood which goes to the gray horns could be obtained."

The only point left is "How does he apply the mechanical stimulation?" There I would not wonder is the real secret of the whole thing, but he dismisses this without a word just ending his lucid and scholarly description with these words. "This is the sole secret of the cure."

**Dr. Wm. Smith** Elsewhere in this number is an obituary notice of Dr. William Smith, M. D., etc., D. O., who died quite suddenly on February 15th, in Dundee, Scotland.

There is no doubt but that more osteopathic students have passed through his hands than through the hands of any other single teacher at the A. S. O., or indeed of any osteopathic college. A most brilliant man, and endowed by nature with that peculiar faculty of teaching, which is so rare, he for many years was the mainstay of the Anatomy department at this school. In his College days he had been under the instruction of Sir John Littlejohn, Sir Joseph Bell (the original of "Sherlock Holmes"), Sir William Turner, and Dr. Daniel Cunningham, and was a college chum of Dr. Conan Doyle. He first met Dr. Still in 1892

and almost at once commenced teaching Anatomy to the few students, who were anxious to learn the science of Osteopathy at that time. We have many a time listened to the tales of his first meeting with Dr. Still and the experiences of those early days, and often have we realized the immense amount of work that he must have put in and the hair breadth adventures that he experienced during his attempts to forward the interests of the Science.

In the summer of 1910 he left this country to set up in practice in Dundee, Scotland, and in a letter received by Dr. Charlie Still on Dec. 20th, the latest reports from him were that he was well located and getting good results. There are probably few who read these words who will not have known of Dr. Smith, either personally or by repute, and we feel that we are voicing the sentiment of all his many friends when we tender to his wife and relatives the sincerest sympathy of the thousands of advocates of the profession he labored so long and so earnestly to serve.

**Dr. Holloway** Dr. Holloway, the new president of the A. O. A., **Visits the** visited Kirksville at the beginning of February and **A. S. O.** at Dr. Charlie's request delivered a fine address to the students in the afternoon. Dr. Charlie introduced the speaker and Dr. Holloway quickly interested the students by telling them of his experiences here as a student and also of the ups and downs that came to him while getting started in the field. He urged the necessity, when starting a practice, of giving every patient the very best care and treatment possible, and above all of being honest with self and honest with the patients, not promising a wonderful cure when the case is one that is incurable, but telling them first what their trouble is and what Osteopathy can do for them. The actual patients might be lost in this way, but they are likely to go away and say "well Dr. so-and-so is honest and did not say he could cure simply in order to get the money. In that way too a reputation will be established that will win out and when people come to such a practitioner they will have more confidence in him from the fact that they know he will be honest with them, and will tell them whether they can be helped or not. That indeed is the only way to make true friends and build up a substantial practice, and when brother practitioners, and also practitioners of other schools recognize this trait in a physician they will be likely to do him a good turn when the occasion offers.

In speaking of the science he stated that there need be no fear of its containing any weak points for he had tested it and it had never failed to come up to the mark so that the more he practiced it the more



DR. J. L. HOLLOWAY

*President of A. O. A.*

he became convinced that it was the most wonderful method of healing human ills that was known today. Its truths are of the simplest because it is in accordance with Nature's laws and Nature does not make mistakes, but does things in the simplest and easiest way possible. In the past he said the healing art had kept just as far away from nature as possible, and it was left for Dr. A. T. Still to break away from theories and to study nature and nature's way of doing things.

He further stated that only a short time ago Dr. Wiley of Washington, D. C. has remarked before a gathering of medical men, that Osteopathy was founded on scientific truths and that there was no use of trying to ignore it and the quicker his hearers acquainted themselves with it the better it would be for them.

Such a statement as this coming from so eminent a man meant much to us.

At the close of his remarks he extended to everyone an urgent invitation to attend the A. O. A. convention to be held in Detroit next summer.

#### **Osteopathy a Practice of Medicine**

At the first glance the decision of the Supreme Court of the United States to classify Osteopathy as a practice of medicine seems to be a momentous victory for our School of Practice, and when we think that the decision was determined by and was the direct resultant of the mechanism of the Allopaths it shows itself in a most curious light. So doubtful was the interpretation of this decision that we had the same clipping sent in from two sources on or about February 20th, the one headed "Pill Doctors Win" and the other "The Osteopaths Win," and in its sphere each one was correct, but to what extent the decision—as it affects the Medics adversely—was foreseen by them, and hoped for by them, with more sinister ideas in view, it will be impossible to say just now. We have been unable up to the present, to obtain an authentic account of the proceedings in full and have had to rely upon newspaper reports for our information, but it would seem, though, that the Osteopathic School had certainly obtained a decided advance in public recognition, and that we have lost nothing, and gained much by this Texas case decision. If we are correct in our interpretation of this decision it must mean but this: That the death knell of the domination of the Allopathic profession has been sounded and that the gateway has been opened for the other schools of practice to be able to demand recognition in all of the public institutions of the United States and the army and navy.

We say this is what appears to be the case, we only too sincerely hope that appearances will not be deceptive and that we shall not find that back of our gains there is the subtle poison of the serpent waiting for us to attempt to take advantage of it to dart its fangs upon us; we can only wait and watch, and the future will decide the result.

#### **What Next?**

The Medical men of Montrose County Medical Society, Colorado, have lately taken a strangely desperate step in the issuing to every Osteopath of that neighborhood the following communication:

"We, the members of the Montrose County Medical Society, resolve and agree that under no circumstances will we have anything to do in a professional way with any irregular practitioner, either as a consultant or by making examinations for them." Exactly what they hope to gain by this procedure we do not know but it is certain that the method of gaining it is a peculiar one. It has surely been proven enough times in the early pioneer days that Osteopathy did not ask for and did not desire the patronage of the medical men; we have a right to stand on our own merits, and if the physician is a worthy one, the results will speak louder to the public ear than any resolution adopted by an insignificant county medical society. Perchance it is a healthy sign—the last desperate death struggle before the end; we do not know, and the best we can do is to surmise, but this we do know that if the people wish for Osteopathic treatments they will get them somehow or other, and as well try to stop the tide as check the wishes of a people. The Montrose County Medical Society have our sincerest sympathy in the struggle against the inevitable and it is more than possible that they only too vividly realize their desperate position, and are making a last faint effort to escape from it.

#### **Flexner Serum**

So much has been said about the great value of Flexner serum in cerebro-spinal meningitis, that, were it not for some direct information one gets once in a while from one who is in the midst of an epidemic and is competent to observe, all of us would be pretty apt to believe everything that the medical and inspired lay press has said about it. As it is, such information is a strong inducement to relegate this serum to the long list of other sera whose merits have been demonstrated principally on paper.

Quoting a letter from Dr. A. C. Hardy, who has been in the midst of the epidemic of cerebro-spinal meningitis in Texas:



"The situation seems to be growing worse instead of better in this place. The M. D.'s hold them down and inject Flexner serum—30 c. c. a shot—two or three times for each case, where the family will permit it. THE HAVE LOST EVERY CASE BUT ONE SO FAR, and the diagnosis of this case is questioned even by some of the M. D.'s themselves."

What a blessing that the "family" still has the right to OBJECT! But this right is in serious danger, as a whole lot of legislation in the various States and Canada, and principally the Owen Bill in the United States Congress, through which it is thought to establish a National Bureau of Health, is aimed at this almost sole remaining privilege. Prominent advocates of this National Bureau have gone so far as to say "people are too ignorant to choose for themselves." Have you any doubt as to what will happen when Health Boards will do the "choosing?" Behold the millenium of the serum manufacturers!

It may be argued that this serum is harmless, but its uselessness is sufficient to condemn it. It is only another instance which bares the viciousness of all compulsory legislation in this direction. Did you ever see a health board which was not a political creation? Isn't it reasonable to infer that far too often its members are much better politicians than doctors? But you may be spared the trouble to "infer." The thing is practically demonstrated in almost every City and State in the Union. If the majority of these men were only real scientists, there would remain at least one ray of hope and consolation—our misfortune might prove to be a godsend to others. As it is, these sera would be about as safe in the hands of almost any other variety of politician with practically unlimited license to force people to submit to them at so much per shot.

Surely the advocates of Flexner Serum could not ask for a better opportunity to demonstrate its real value than is afforded by this epidemic. That it is proving of little or no value in a real, practical test, is another instance showing the folly and viciousness of all compulsory medical legislation and the establishing in authority of a medical autocracy whose arrogance and tyranny know no human bounds. Time goes on shattering idols, and it seems the medical junk pile is more than keeping pace with the rest.—JACOBS.

## The New Insurance Company

As probably ninety-five per cent of those who read this Journal will have received, during the past month or so a letter from Dr. Charlie Still announcing the formation of a new Insurance Company under the caption of the "American National Assurance Co.," it will be unnecessary for us to do more than most heartily endorse the underaking in its every particular. As is so well known the old Line Companies are continually turning down the osteopathic practitioners as examiners and making a compulsory examination by the older schools of practice a necessary prerequisite to an insurance policy.

We understand that his new company will be organized for one million dollars and along Old Insurance Lines, it being hoped by the organizers that the majority of the stock will be subscribed by the osteopathic practitioners in the field, and the prospects look bright that the investment will be a most safe and profitable one. The Insurance Department is to be looked after by one of the best known Insurance men in this country, Mr. William Parsons, who until recently was connected with the Franklin Life Insurance Co., of Illinois., having previously acted as general agent for the Prudential Life Insurance Co. for eight years, while the actuarial and legal work will be under the direction of Mr. J. C. Harvey and Mr. J. C. Jones, respectively, each of whom is considered unequalled in his line of work. The financial part of the undertaking will be under the direction of Dr. H. M. Still, the President of the Citizens National Bank of Kirksville, Mo., who is so well known in the profession as having a most extensive knowledge of finance. The funds received from the subscribers will, we understand, be deposited in the Merchants-Laclede National Bank, one of the leading financial institutions of St. Louis, and under a contract assuring full return of money to the subscribers in the event of the company not being organized.

We believe that the plan is a thoroughly sound one and it has already received the enthusiastic endorsement of a number of osteopaths in practice, which shows that a wide-spread need for it is felt. We feel assured that the project will meet with the success that it deserves, and are very glad to see it started.—Editor.



DR. WM. SMITH

---

## Dr. William Smith

On February 15th at his home in Dundee, Scotland, died Dr. William Smith, for so many year a familiar figure to the students and inhabitants of Kirksville. Born on May 21st, 1862, Dr. Smith as a young man entered the University of Edinburgh, and received therefrom his medical degree.

He was a licentiate of the Royal College of Physicians and Surgeons of Edinburgh, and of the Faculty of Physicians and Surgeons of Glasgow, also a member of the Medico-Chirurgical Society of Edinburgh, and later was appointed Honorary Member of the New York Medical Society.

His first acquaintance with Osteopathy was in 1892, when he was traveling in the states for his health, and made Kirksville on his trip.

He received the first Osteopathic Diploma ever issued, and for many years was the anatomy teacher at the A. S. O. It is probable that to no single man in the world, outside perhaps of the "Old Doctor's" immediate family does Osteopathy owe more than it does to Dr. Smith for his help in establishing the science on a sound basis and forcing its recognition in the states.

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## Reasons for Urging Academic Revision of the Principles of Osteopathy

Paper read by Earle Scanland Willard, D. O., before the Osteopathic Society of the City of New York, February 24, 1912.

By academic revision of the principles of osteopathy, I mean not only restatement of the anatomical facts and physiological principles fundamentally and directly related to osteopathic practice but also elimination from accredited expositions of osteopathy of all abstract, irrelevant, foreign and non-essential matters, that is to say, all matters that serve to mislead, mystify and confuse the reader rather than to convince him of the rationality and soundness of the osteopathic therapeutic position. Let me state at the outset that the views herein set forth were not arrived at only recently. On the contrary, they are firm beliefs that I have held and acted in accordance with for many years. To show that they are older than this occasion I ask you to read the editorial on Principles of Osteopathy, which appeared in the "Philadelphia Journal of Osteopathy," August 1909.

As previously stated, I have acted in accordance with these beliefs concerning osteopathic fundamentals for many years. As my students in osteopathic practice will attest, I have for over six years taught, in direct opposition to generally accepted or established teachings, that PRESSURE UPON A SPINAL NERVE—a condition that obviously will be followed by serious consequence—is seldom found in practice and is not an etiological factor in disease. In other words, that the pernicious effect of spinal perversions or "lesions,"—conditions that every osteopath finds many times each day in practice,—is not brought about and maintained in the vast majority of clinical cases, as taught from the beginning in our profession, by "pressure on nerves," that is to say, pressure resulting from vertebral displacement. Likewise I have taught in elaborating this contention, that the baneful circulatory disturbances associated with pathological conditions of the spine is not, as generally believed, due to direct arterial or venous obstructions, i. e., obstructions occasioned by a displaced vertebra; but the articular perversion, when it exists, involves the microscopic tissues of the muscles and ligaments

adjacent to the immobilized vertebral joint, and, thereby, retards or impedes the circulation or flow of lymph in all nearby structures, including the sympathetic ganglia and the nerves emanating therefrom. In the practical application of this theory, I have laid great stress upon articular immobility as the most constant and conspicuous physical sign of spinal lesion. (In the following articles I have specially stated my views and findings regarding the diagnostic significance and importance of spinal joint mobility as well as immobility: "Lectures on the Practice of Osteopathy," copyrighted 1908; and "What Osteopathy Proposes For The Prolongation of Life," a paper read before the Maryland Osteopathic Association, October 10, 1908.)

These theories, which I have taught in the class room for the past six years, were elaborated in a series of four articles which appeared in the Journal of The American Osteopathic Association, the first of the series beginning in the December 1909 issue. For a succinct statement of these views I refer you to this series; March 1910, Journal, beginning on page 286, col. 2, 10th line from the top.

I have cited here certain passages in former writings of mine because conclusions expressed in them have been established as basic principles by findings made in the laboratory of the A. T. Still Research Institute, so that I can conscientiously regret that they are not set forth today in accredited or authentic expositions of osteopathy. Nor am I alone in this, they have been endorsed by the highest scientific body in our profession. And let me emphasize further, that two years have elapsed since the announcement was first made by the Research Institute of these findings that should have revolutionized didactic handling as well as popular explanations of osteopathic principles.

As we all remember, Dr. Carl P. McConnell, at an impressive and representative gathering of osteopaths in New York, March 26, 1910, announced the result of six years research conducted by him and Dr. Frank C. Farmer, under the auspices of The Research Institute. His conclusions, given at that time, appear as follows on page 321 in the April 1910 issue of the A. O. A. Journal. "In conclusion the following points are submitted bearing upon the theoretical and practical interpretations of the osteopathic lesion. It seems that the explanation of the lesion rests upon something more than mere pressure of mal-adjusted tissue upon nerve fibre or vascular channel; this at best can be only part of the physiological disturbance of the muscular, fascial, ligamentous, and osseous tissues which causes interference with the normal afferent influence to the spinal cord centers, AND THIS IS MORE OR LESS PERMANENTLY MAINTAINED BY THE LACK OF FREEDOM OF THE JOINT MOVEMENTS.

\*\*\*\*NEITHER MACROSCOPIC OR MICROSCOPIC FINDINGS IN THE TISSUES PASSING THROUGH THE SPINAL FORAMEN WARRANT THE ASSUMPTION THAT THE OSTEOPATHIC LESION IS THE RESULT OF MECHANICAL PRESSURE IN THIS REGION." These words of Dr. McConnell (the capitals are mine) need no comment as they are themselves sufficient indorsement of the position I have all along held regarding the clinical physiology of spinal lesion. To illustrate that those high in authority in our profession appreciate the revolutionary nature of these views, I quote from an editorial that appeared in the same magazine with the foregoing conclusion—

"Dr. McConnell has come and gone and his visit has left an imprint on the public mind like no other event in our history. He gave in outline his six years work,\*\*\*\*As a result of Dr. McConnell's work our ideas must undergo a change, for our old explanations will not stand."

To summarize: Thus far I have pointed out many vulnerable points in our arguments generally advanced in support of osteopathic practice. I have quoted from an editorial that appeared in the A. O. A. Journal nearly two years ago, to show that the official organ of our profession has long recognized that revision of our principles generally is necessary. And yet,—nowhere can we find evidence of revision taking place. Thus, we are forced to realize that our profession at large not only needs a firmer, clearer, and more comprehensive grasp of fundamentals, but fails utterly to rise to a sense of the duties and responsibilities that devolve upon it in placing before the public mind explanations or expositions of fundamental osteopathic matters.

Thus we are brought face to face with a question of great practical importance, to-wit: "What is to be done to arouse the profession as a whole to a broader acceptance and interpretation of the principles of osteopathy, or, in other words, to rehabilitate the vital issue in osteopathy, namely, ground principles?"

In the December 1911 issue of the A. O. A. Journal there is an editorial appeal for the publication of more books treating of osteopathic principles and practice, although in the same breath the editor confesses that, with the exception of Dr. Still's books, "few of them have gone over one or two editions of 500 or 1,000 copies, and many of them are now out of print." In other words, the great majority of osteopathic books are failures; and this despite the fact that osteopathic books are everywhere needed; as the editor admits, the cause of this failure does not lie with the osteopaths themselves: they are, he says "liberal buyers of medical books." On the other hand the fault does not rest entirely with the publications in question, for as we all know, many of our

osteopathic books are works of considerable merit. Nevertheless, the fact remains that the profession at large, including our colleges and our practitioners everywhere, refuse to look upon the matter contained in these books as practical and helpful. In other words, the profession as a whole lacks confidence today in the books, meritorious though they may be, written by individual practitioners; and I fail to see how the situation can be materially changed by bringing forward other writers to share possibly the fate of their predecessors. The remedy, I believe, lies in another direction.

In the last few years I have questioned hundreds of osteopaths concerning our text-books, and I find existing a strong and growing sentiment favoring the production of an osteopathic book on ground principles, not by some one busy practitioner, but by a number of men, eminently qualified, collaborating in the work. Thus, as the prevailing sentiment had it, there is more likely to be presented views that are broader in their application than would be the case if one man alone handled the subject from an individual point of view.

Now, I believe that this is a matter that the A. O. A. should give serious thought to, with the end in view, if deemed practical, of selecting a number of capable men to collaborate in writing such a book. I think that a book written by a number of our ablest practitioners, and published by the A. O. A. would carry tremendous weight not only among our own brethren but throughout the therapeutic world as well. For it would be a book that would not need the endorsement of use in any particular college to insure its sale; it would be the one book to contain the authentic and accredited Principles of Osteopathy treated in a manner acceptable to the leaders of thought everywhere in our profession.

For five years I have been collecting and arranging material for a text book on "The Osteopathic Rationale." I have had much to encourage me in the preparation of this work and have received several flattering offers from well known publishers to bring out the book. But now that I have the manuscript nearly completed, this question constantly confronts me: "Is it fair to Osteopathy for me or any other man to label personal thoughts and opinions, 'Principles of Osteopathy,' when the most that could reasonably be expected of me or any one man working alone, would be an elaboration of merely one aspect of the question?" I believe anyone taking a broad view of the situation will answer in the negative.

To repeat: I urge that those high in authority in the American Osteopathic Association consider seriously the matter of academic re-

vision of the principles of osteopathy; and that as a practical means of bringing about such revision, The American Osteopathic Association invite all experienced writers in our profession to assist in this work. In other words, I urge that we at once take steps toward establishing in the A. O. A. a permanent body of qualified men, whose duty it shall be to put before the world the Principles of Osteopathy on a broader and more comprehensive plan than obtains in the profession today. I urge that we make this a united effort, regulated and controlled by our official organization because, as every true philosopher of the common life will understand, the most that one man can accomplish in any reform is at best only a small part of the work needed to insure the permanency of the movement.

To still further emphasize, and to better illustrate my position, I cite the following resume of natural phenomena discussed in my "Lectures on the Principles of Osteopathy."

#### Chapter I.

The Innate Weakness and The Developed Deformity Of Every Man's Spine.

#### Chapter II.

The Rational Criteria of Normality of the Spine; And the Relation of Curves and Contour To Health.

#### Chapter III.

The Connection Or Relation Between The Defensive Mechanism, The Nervous System and The Spine.

#### Chapter IV.

Pathological Findings That Demonstrate The Existence And The Nature Of Spinal Involvement In Disease.

#### Chapter V.

A Working Definition of Osteopathy.

#### Chapter VI.

Spinal Immobility As a Cause of Active Organic Congestion.

#### Chapter VII.

The Clinical Physiology of Certain Pernicious Reflexes That Have Their Origin in Perversions Of Spinal Tissues, e. g.—  
 Spinal Joint Displacement as a cause of reflex disorder.  
 Spinal Joint Sprain or Strain a cause of reflex disorder.  
 Spinal Joint Immobility a cause of reflex disorder.

Foreign deposit around spinal joints a cause of reflex disorder.  
 Spinal Muscular perversions as a cause of reflex disorder.

#### Chapter VIII.

The Clinical Physiology of the Spine in the Acute Infections.

#### Chapter IX.

The Clinical Physiology of Pain and its Etiological Relation to Congestion The of Spinal Tissues.

#### Chapter X.

Local Manipulations to Promote Lymphatic Drainage, Increase Metabolism and Regulate Blood Flow Generally; And The Reflex Effect of Such Procedure Upon Spinal Perversions.

#### Chapter XI.

A Discussion of Therapeutic Stimulation and Inhibition of Spinal Nerve Centers.

Now, all will agree that these captions state vitally important truths that are essentially osteopathic in nature. And yet—as I have elsewhere elaborated them, they treat of matters not prominently and clearly set forth in osteopathic text-books. NINE OF THE ELEVEN CHAPTERS MENTIONED ABOVE TREAT OF MATTERS NOT TOUCHED UPON IN ANY EXPOSITION OF OSTEOPATHY HERETOFORE MADE. Why, then, is it not reasonable to suppose that there are many other men throughout our profession who have done work of an original nature, which, if understood and accepted by the profession at large, will strengthen our therapeutic position; but which, if not officially incorporated into the osteopathic rationale will be made practical use of by other schools of curative practice.

As a matter of fact, we all know that the medical profession today is everywhere making practical use of our distinctively osteopathic methods, without giving to Osteopathy any credit whatsoever for their discovery. And so I urge, not only for the welfare and repute of Osteopathy, but also for our own self-preservation as individuals in a new field of practice, that an academic body be empowered to act in recording as well as in disseminating all accredited matters pertaining to osteopathic principles and practice.

Apropos of the matter of authenticating original discoveries, and of acquainting the practitioner as well as the public with accredited osteopathic findings, is the fact that those high in authority in our profession are entrusted with the vigilance of all matters pertaining to research and investigation. In a general way, there is reposed in these men the

duty of stimulating and encouraging original thought and observation among practitioners everywhere. And we are all so familiar with their efforts in behalf of Osteopathy, that I need not dwell upon that aspect of the subject. But notwithstanding their zealous, vigilant, skilful and unselfish handling of the situation, our profession as a whole has made a deplorable display of indifference to scientific advances made in our own ranks. This has been true, please remember, despite the fact that the conclusions and findings in question, many of them revolutionary and fundamental in character, have been set forth clearly and prominently in our leading periodicals. In other words, the fault has not been failure on the part of our journals to publish all such writings; it has been want of concerted, continued, and specially directed effort in impressing upon individual practitioners the importance and practical value of the advanced interpretations of ground principles.

As a result we find that, on the one hand, unwarranted, extravagant, and often ridiculous claims have been sent broadcast without occasioning so much as a word of protest; on the other hand, findings of a practical and helpful nature likewise have been ignored; and, worst of all, there is no provision in Osteopathy today whereby we can hope for any departure from this prevailing, loose, incomplete system that permits of practices that withdraw so much from the dignity and success of our profession. Our colleges, local organizations, state societies, National Associations, Research Institute, and professional and scientific magazines and journals have their own individual functions to perform; but none of them have been organized and maintained for the specific purpose of putting prominently before the world the discoveries we ourselves have made. And in consequence of our not having this stated task assigned to some official body, many of our original conclusions and findings have passed unnoticed, while the credit and honor for priority in these matters have not been placed where they rightfully belonged. Indeed, many of the discoveries made within our ranks have served chiefly to enrich medical literature, and thereby our own literature has suffered inestimable and irreparable loss.

In conclusion then, I propose that there be inaugurated a movement for the establishment of an academic body whose duty it shall be, first, to investigate and to pass upon the claims of all research workers, and, second, to act in recording as well as in disseminating all accredited matters pertaining to osteopathic principles and practice. Thereby will our practitioners at large be dealt with fairly so that the profession as a whole may broaden and develop its theoretic conception and strengthen its position in practice.

## The Early Diagnosis and Treatment of Pulmonary Tuberculosis

BY EDWIN R. LARTER, D. O., NIAGARA FALLS, N. Y.

It shall be my attempt in this article to deal more with the details of the different methods used in the examination of a patient suspected of being afflicted with pulmonary tuberculosis, rather than to treat of the general technic of the customary way of reaching a diagnosis.

We sometimes see a physician who slights his examination of a patient and appears to be satisfied with going through the form of a complete search for the symptoms without carrying out each separate act in the process which will give evidence of the presence or absence of disease and the nature of the disease.

Perhaps we do the best anyone could with the means we have at hand. But human life is too valuable on the one hand and osteopathy on the other hand cannot afford to be trifled with by any of its practitioners giving the patient anything but the best that science and invention have devised.

By the expression "The best that science and invention have devised" I mean to include only those procedures which are osteopathically practical and to exclude those which are liable to be detrimental to the health of the patient without giving any absolutely definite results; such as the use of Koch's Tuberculin.

Therefore the selection of the diagnostic instruments which suit best is of importance and although one person may be able to do better work with a certain kind or make of instrument, it does not necessarily follow that this particular kind of instrument is the best for everyone. We must select the instrument which after trial shows the best efficiency from the personal standpoint.

And too, there are cases where some of us can make fairly good diagnoses without the aid of instruments. For instance our great benefactor, Doctor Andrew Taylor Still can readily tell very accurately the temperature of a patient by the sense of touch, without the aid of a thermometer. Some of us can auscultate fairly well without the aid of a stethoscope or other instrument for magnifying sound. But even in the face of these facts I think we should be open to conviction and give up

the methods which after good, conscientious, comparative tests have been found inefficient.

There is another great requisite which is necessary to the making of correct diagnosis of incipient tuberculosis; that is, practice and experience. These are in a way accomplishments, for we can achieve large practice and thereby acquire a world of experience if we but apply ourselves. One who has had a wide experience with this disease in its mildness and its fury can gather more at a glance, than a novice could discern with an extensive and tiring examination.

The history of the life of a patient has some bearing upon a successful diagnosis, but I would prefer to give the weight of value to the facts which are evident at the time of examination rather than to rely too much upon the story told by the patient.

Post-natal environment causes more infections than pre-natal.

I think it was Doctor Woods Hutchinson who made the statement that we inherit but five or ten per cent (I have forgotten which) of the characteristics of our immediate ancestors and that the balance of ninety or ninety-five per cent comes from those more remote. If we consider this statement thoroughly we must realize that it is one of value as else the world would soon become depopulated.

The only part of the history that should be considered of value is "Has the patient been in the environment of consumptives all or part of his existence?" The state of the patient's nutrition is important, as is also the condition of the blood. Much can be gathered from the clearness or hoarseness of the voice. Fever though not absolutely diagnostic is of assistance in reaching a conclusion. I have several times found the tubercle bacilli in the sputum early in the disease, though some authorities say it cannot be found until the disease has progressed.

This one point in the diagnosis of incipient pulmonary tuberculosis is worth many of those which are not definitely discernible, and although the germ has been found in the non-tuberculous, the coupling of its presence with just a few of the other important findings will elicit an exact diagnosis.

It may not be out of place to say right here that it would help the cause greatly if all osteopathic physicians were equipped with a microscope of sufficient magnifying power to differentiate the various micro-organisms.

In the cities where a good bacteriologist is employed it is just as well to have him make the sputum examination. There is no doubt one who does much of this work can do it more thoroughly than he who does it only occasionally, and if your bacteriologist is fair, you can get

good information as to the viciousness of his findings. But usually one has to be satisfied with a simple positive or negative statement and in such a case it would be more satisfactory to be one's own bacteriologist.

In the examination of the chest and lungs we must remember that with incipient tuberculosis we are assuming a case in which there is little pathological lesion and it is going to be a hard matter to detect anything abnormal in the breathing sounds. For that reason it is absolutely necessary that the room in which the examination is to be made should be absolutely quiet. This precaution is one which is often not taken and is accountable for some failures. In this examination it does not do to depend too much upon the stethoscope or phonendoscope for with the ear unaided the sound is slightly different and often one can determine differences better than with the instrument. Quiet is also necessary in percussing the chest and a good light, artificial or natural should be had in inspection.

There is often trouble in early reaching a conclusion when we have a case which appears to be an attack of pneumonia and upon careful search and watching we find it the pneumonic form of tuberculosis. This will also apply to broncho-pneumonia and the broncho-pneumonic form of the disease. In such cases we should not fail to make an examination of the sputum from day to day until it has been demonstrated conclusively that the bacillus is present or absent.

There is another point which is valuable in differentiating these conditions, namely, in tuberculosis there has been a previous run down period or a period of overwork and although not in any way conclusive this point may be helpful in making a diagnosis.

After children have recovered from infectious diseases we should be watchful and suspicious of any cold that is contracted, as at this time they are more prone to contract tuberculosis than at others when the vitality has not been depleted.

The first infection of the lungs usually occurs in the apices. For this reason much time and care should be spent in the examination of these areas.

Next in importance are the inter- and sub-scapular spaces. In the examination of this region much good can be accomplished if the patient is made to put his arms in such position as to bring the scapulae as far toward the side of the thorax as is possible. Then by listening over the subscapular area we may be able to detect sounds which are otherwise obscured.

In the A. O. A. Journal, June 1910, there appeared an article by Dr. W. Banks Meacham, in which he refutes the flattened chest as a

causative or constant factor in pulmonary tuberculosis, and firmly states that the most constant osseous maladjustment is a posterior lower dorsal and upper lumbar spine.

He severely criticises those osteopaths who attempt to diagnose this disease from thoracic maladjustment in preference to using those means which divulge the condition of the thoracic contents.

Since the publication of this article I have worked along the lines suggested by its author and have found that these deformities of the upper lumbar and lower dorsal do exist and that it is very probable that the nutrition of the patient has much to do with the disease.

As far back as April 1908 in the A. O. A. Journal, Doctor L. S. Brown makes this statement: "Malnutrition always precedes tuberculosis among my patients. The latter comes from the former." He then divides the course of pulmonary tuberculosis into four stages of malnutrition before it is commonly known as tuberculosis.

This division appeals to me as the best one to adopt as a means of preventing or curing the disease, for if such can be done after it has progressed far enough to manifest itself by rise of temperature, display of tubercle bacilli in the sputum and a definite readily auscultated pathological lesion of the lung tissue, a great deal more can reasonably be expected and accomplished if we attempt by dietetic means and a judicious adjustment to build up the general nutrition.

It may not be out of place to mention here that in those cases, (and there will be some), which will not give a clear diagnosis, it is better to assume that the disease exists and give the patient the benefit of the doubt by treating him as though he were afflicted until such time as he can be informed that he is well.

The sum of the results of all medical experimentation up to the present in pulmonary tuberculosis amounts to this. The patient must have plenty of fresh air, plenty of good food, and rest. Drugs are of no avail.

Although these measures are the results of medical experience they are as purely osteopathic as any means which we call to our aid in any condition. But let us add to them the adjustment of any bony, ligamentous, muscular or visceral lesion that may exist and we have a therapeutic system which stands head and shoulders above any which has as yet been devised.

I consider it a crime to signify in any way to the patient that he is afflicted with tuberculosis, for by so doing you destroy all chance of the psychic influence for good that may exist, besides making life one of constant fear and discouragement.

It is your duty to notify the relatives or guardian, but with the precaution that the patient must not know it. There are, however, some people though they are in the decided minority, who perhaps would make a better fight if they knew their condition, so it remains with the physician to weigh the characteristics of the patient and be guided by the most complete deduction he can make. In regard to rest, we usually find that it is necessary. But here too there have been cases which have been cured without the enforcement of rigid rules in this respect and there is another division of the treatment in which the physical peculiarities of the patient must have due consideration and in some cases it is necessary to try light exercise and watch its effect. Only in the slowly progressive cases is it reasonable for the afflicted to carry on a regular occupation in which there is much tax on his vitality. The more serious cases should be under the eye of the physician and the exercise should be more like play, and not in the least exhausting.

The dietetic treatment must be considered thoroughly and here again the personal equation is an important factor.

The object sought in all cases is the same but the methods of attaining it vary greatly. Study the effects of different foods, note the likes and dislikes of the patient and make an occasional examination of the feces that there may not exist too much of the unappropriated fats. Fats in quantity are necessary but too great a quantity may be a burden. This applies to carbo-hydrate foods as well and a complete urinalysis repeated from time to time is essential that the real condition of the kidneys and the metabolism shall be known at all times as a consideration in the treatment and that we may keep the diet as close as possible to the capacity of the patient's digestion and assimilation.



## Spinal Curvature and Twisted Pelvis

CAROLYN SHELDON, D. O.

The maladjustment of the skeleton is an abnormal condition the correction of which is evidently osteopathic, and osteopathic only. It is in this line of work that the osteopaths ought to shine so brightly that no other school would DARE to enter the work. As a matter of fact curvatures are a stumbling block to the greater number of osteopaths. Many only make them as much worse as they relax the contracted muscles which nature has tensed to counteract the swerve. Others only add to the pressure which precipitates the curvature by pressing the spinous processes of the vertebrae. Others succeed better than any other school, yet feel that they are helpless to correct certain forms of curvature. Every school and convention of osteopaths is discussing this subject and this shows that the osteopaths feel that the results of their methods are not satisfactory.

The author of this article was recently called upon to discuss this subject at the Ohio Osteopathic Association. It developed that her methods were entirely new to the association although the principles taught at the A. S. O. of Kirksville, Mo., furnished the basis of the chain of thought that developed the method. The method has succeeded in every case handled. Complete cures in from one month to one and one-half months have resulted in rapidly developing cases with resultant ill health. The first treatment often straighten up a marked curvature so that the straightening is very apparent even to a layman who does not know the subject is being treated.

In a case treated before the Association a marked curvature of fourteen years standing was visibly bettered in fifteen minutes treatment. Compound curvature and lateral upper dorsal curvature yield to the same treatment. In fact, every kind of curvature so far tried yields equally well.

The "Old Doctor's" method of sinking the spine in with both hands while the operator stands in front of the patient, exaggerates the curvature, and then pulls in a direction to switch the bodies of the vertebrae toward the median line, was taught the author. Dr. M. E. Clark taught that most curvatures were started by a torsion about one point.

The present writer was called, during her first summer's office work to treat a seven year old child having cerebral palsy. The child's spine was very weak and the processes in every direction. Apparently there was so little order to the spinous processes that there seemed no way to adjust one small group without getting others out of line worse. The operator thought fast. The mother laid the child across the bed, face downward and the feet toward the operator and left the room. My head felt as inadequate for the situation as the child's spine was for its support, and it was a veritable hunch back. "One torsion about one point" came to my vacuity. "How can that be in such a fumbled mass as this," thought I. I caught hold of the child's lower limbs placing my forearm beneath them, and rotated them in the direction to switch the bodies of the vertebrae in the lowest group toward the median line. In an instant, almost, I saw the whole spine in motion. I could see all the spinous processes. I turned on. They seemed to be moving into line. There was no friction. The motion was steady and easily obtained. I was almost breathless with amazement, but I turned on steadily for a few minutes. The spines were then in perfect line. I stood back gazing at it and wondering. The little back was far too weak to remain straight, but the wonder of it never left my mind.

A fifteen year old girl with a marked compound curvature came to me for treatment. I used the same method with marked success. The second treatment made all her neighbors wonder what had been done to straighten her so much. I have used it ever since with better success in the final outcome than I had in these cases. For, simple as the method seems, it is very easy to make a case worse with it if one does not apply the force correctly. Then one must know when and how to use a brace, and what kind of brace to use in each particular case. It has taxed my ingenuity to the utmost. I examine my case after every few turns to see if I am making the curves greater or less. No matter how hard the labor I use only my hands and arms to make the body move in order that the muscle sense may guide me. In compound curves, work on the lower curve as though there were no other except to make pressure on the angles of the ribs, perhaps, in the other curve on the convex side. As to the fixed point, if there is any rule for it, it would be to lightly fix the highest point of curvature, or the farthest deviation in the upper curve. Make rather deep pressure on the projecting ribs of the most prominent convexity.

Do not give a relaxing treatment before rotating all one can with one treatment. The more relaxation the less pull of the bodies in the

right direction is generally obtained. Use a much greater sweep of the limbs to affect a pull in the upper dorsal than in the lower dorsal or lumbar.

Pay attention mainly to the lower curve till that is straightened. Then you may increase your sweep. Do not forget to stand your patient every few sweeps and examine the curvatures carefully.

Many of these cases have one hip much higher and more prominent than the other, with tenderness at the lumbo-sacral articulation. In these cases there is a torsion at the lumbo-sacral articulation. In fact most twisted pelvises are caused by this defect. Stand such a patient in an open door. Make him stand with one foot close to the door cheek and the hip fixed in the door cheek. The left hip is generally high and posterior. If so, fix the right hip, the patient standing on the right limb and swinging the left. Then have the trunk weight fall on the patient's left arm, which is braced on the opposite door cheek. Then rotate the free left limb forward. Let the patient then turn and free the right limb taking a similar position. Rotate the right limb backward unless the curve is such that it tells you to rotate it forward. This adjusts the pelvis and gives the right base to work on.

If the patient is too short to reach the opposite door cheek, the trunk weight must be thrown on the operator's shoulder by the pressure of the patient's free hand. The limb being operated upon must be relaxed so that the operator carries the whole weight of it. These measures will relieve the soreness and straighten the pelvis and even the iliac crests when they are out of line the most I have ever found them. It often does it in one treatment.

If the spine and hips do not remain about as the operator leaves them till the next treatment use a brace that will support the spine and at the same time fix it and hold the high hip down. Remove the brace at night or on lying down. A well fitted corset with suspenders often acts well as a brace.

An interesting case was one of a fifteen year old girl who looked to have no lesion but the twisted pelvis. But work on the hips alone made the apparently compensatory curve in the spine greater. The third treatment I treated for spinal torsion and also gave the hip movement with the result that the spine straightened in part and the hips perceptibly evened. I used a corset with suspenders to hold the ground. Sometimes it did not hold the ground, but the girl would not wear any other brace. There was marked anaemia, nervousness, headache and eye trouble. Flooding at one time lasted for two months before I got the case. The womb was so congested that there appeared to be no cervix

to it. The M. D.'s. wanted to curette and perform Alexander's operation. They made guesses of polypus, etc. The point of torsion was probably at the segment where the nerves to the ovaries originate, as there had always been an anterior appearance there. Twenty-two treatment affected a complete cure. The girl is doing fine high School work and practicing on the piano a great deal. She looks and seems to be in good health, although her recovery began to appear only two weeks before school began.

While demonstrating before the Columbus Osteopathic Association I was asked if the pressure anteriorly and posteriorly upon the ribs did not make rib lesions. I have never had this occur. I was asked if I would adjust rib lesions before making the rotations. I would if possible. I was asked if it would not be difficult to adjust the ribs over the convexity. I have never had to adjust one there. The spinal rotation seems to adjust them.

## Inoculation

Inoculate for smallpox,  
 Inoculate for tetanus,  
 For fevers, chills and other ills  
 That daily seem to threaten us!  
 Inoculate with owl lymph  
 To stimulate the brain;  
 Inoculate with goat-juice  
 To make us young again!  
 Inoculate for bunions,  
 Inoculate for bald heads,  
 And eke for nervous slumps;  
 Inoculate for typhoids,  
 Inoculate for spavin—  
 Its just as good as any way—  
 To waft our souls to Heaven.  
 But some fine day the laity  
 Will move in self-defense  
 To inoculate the doctors  
 With a little Commonsense.

C. HILTON-TURVEY.

## Forum

EDITOR JOURNAL OF OSTEOPATHY, Kirksville, Mo.

Dear Doctor:—This letter might come under the caption of unsolicited testimonials, but on the encyclopedia matter I wish to write these few words in view of Dr. Galsgie's reference in your last issue, to the latest edition of the Encyclopedia Britannica. While the last edition of the Encyclopedia Britannica does not belong in the cheap, almost worthless, class of publications, such as the 20th Century Encyclopedia, to which I referred in your February issue, it is in no sense what we should expect it would be. It is not characterized by that virility, independence and exhaustiveness which characterizes the handling of mooted subjects in the old 9th edition of the Britannica.

I think if osteopaths, wishing to purchase a reference work will investigate it, they will find the latest edition of the Americana to be the most valuable reference work in every respect of its kind, which is now placed before us.

While my own experience with reference works has given me this opinion I voice it also as being the opinion of a number of scientific and literary friends of standing in their lines whose opinion is much more valuable in such a matter than mine.

I express the above at this time because the encyclopedia people seem to be among us in great numbers just now and will be during the coming year. Under the spell of a suave agent we sometimes buy a reference work without sufficient investigation. We get stung and later have to buy a good one. Then when some osteopathic work comes out we feel too poor to get it. Judging from the fewness of osteopathic works on some D. O.'s shelves this has happened frequently.

Fraternally,

ASA WILLARD.

(We are glad to publish Dr. Willard's views upon this matter, but fear that we must decline any further remarks upon this subject.—Ed.)

Storm Lake, Iowa, Feb. 17, '12

EDITOR OF JOURNAL OF OSTEOPATHY:

I noticed in the January issue of the Journal an article by Doctor S. S. Still of Des Moines concerning the legislative situation in Iowa, and I trust you will print this in an early issue as in some measure answering the Doctor's remarks.

I have not the time nor would you allow me the space to take up the article line by line, nor will I at this time endeavor to review the the Iowa situation from start to finish, though I should like to do so providing that all of it would sound good on paper. I will now however only notice a few of the Doctor's remarks. He says no reason has so far been given for abusing the present Iowa law. Here again I can not at this time give all of the reasons which have been given in the past and which it will be possible to give in the future, why our present law is an abomination, suffice to say that it is neither one nor the other, neither a composite board law nor an independent board law; we take our examination from it and are dictated to by it but have no representation upon it and never will have as it is composed entirely of medical men and they take advantage of every technicality possible to keep good osteopaths out of the state, and as I said before the law neither is one nor the other, simply a mongrel at which the medics laugh, and which no one but 17 osteopaths out of 189 in Iowa will own.

Dr. Still says that the 17 look with contempt upon the enemies of our law, I suppose that by the 17 he refers to the 17 who last year voted against an independent examining board, and the enemies of the present law I suppose are the 172 who voted for the independent board and who backed up their votes by working when the legislature was in session to secure such board, while the aforesaid 17 sat in the shade.

I am very sorry that the Doctor used that expression "contempt" because it does not make for harmony, I do not believe that the 172 look upon the 17 with contempt, we simply think they are mistaken, we believe that they are mistaken in regard to the kind of law Iowa should have, and also in the attitude they take towards the majority. The majority have always been open and above board in what they have done, and I am sure have not made themselves contemptible as the Doctor would have us believe.

He also believes that we should have "horse-sense" and stop when we have been licked several times. all I can say to that is that so long as a majority of the osteopaths of Iowa want an independent board, I am in the game to help get it, when they want something else I will help get that, the only person that I hold contemptible is a quitter.

Fraternally,

U. S. PARRISH, D. O.

(This communication must be the last that we shall be able to publish along this line.—Ed.)

## Legal and Legislative

**Judge Holmes' decision in the Texas case.**—A decision of the United States Supreme Court handed down on Feb. 20th states that Osteopaths must be considered as medical practitioners. The opinion was written by Justice Holmes, who said, in handing down his decision, that the osteopath undertakes to be something more than a mere nurse or masseur and should be recognized as a medical practitioner.

The point arose when Ira W. Collins, practicing osteopathy in El Paso, was arrested on a charge of practicing medicine without a license. Collins' reply was that practicing Osteopathy was not practicing medicine, because no medicine was administered.

The above decision is in conformity with many State Supreme Court decisions which have been handed down from time to time. It matters not what method of healing is practiced, whether osteopathic, allopathic, homeopathic or eclectic, all these practitioners are physicians and are practicing medicine, which means the healing art and not the administration of drugs.

**Case against the "Medical Masseurs."**—The following details of the case mentioned in the February Journal may be of interest:

Homer J. Pellette, 33 years old, of No. 26 Savannah street, who is said to claim to be a mechano-therapist, was tried before Justice Chadsey and jury in police court on February 23rd, on a charge of having practiced medicine without being duly licensed and registered under the state law. The charge against Pellette is based on the state health law. The prosecution, which was backed by the American Osteopathic Association contends that Pellette had practiced medicine and that in doing so he had committed a misdemeanor. The jury found the Savannah street man guilty. He was paroled to report to Agent A. J. Marters for a year.

Pellette and Hans L. Weilbye, a Monroe avenue therapist, were arrested on Jan. 13th last. At the trial the first witness, a Mrs. Carrie H. McDonald testified that she had been employed by the John C. Hayden Detective Agency to obtain evidence against Pellette. She said she went to the latter's office in the Mercantile building and told Pellette she wanted to take the treatment.

Witness said she told the man she had a pain in her left side and that it extended up to and over her shoulder. She said he told her the pain was due to stomach trouble and indigestion.

After the treatment Mrs. McDonald said she paid Pellette \$2 and departed. She said she made the visit to Pellette's office on November 1st last. She said Pellette told her he was not an osteopath, but was a mechano-therapist.

Pellette told the stand in his own behalf. He said he was a graduate of the Mechano-Therapeutic Institute of Chicago, and that he had a diploma. He said he took his course of instruction by correspondence. He admitted that he thought he knew about the diseases of men and women, and what sort of treatment should be given. He denied that he had practiced medicine in the strict sense of the word.

The prosecution declared that in Mrs. McDonald's case Pellette had actually diagnosed her ailment, and that in doing so he had undertaken the functions of a physician and had practiced medicine.

Attorney Scott declared that inasmuch as Mrs. McDonald admitted she had trumped up a fictitious illness, Pellette had indeed not violated the law, as the woman was not ill. The jury was out fifteen minutes, and found Pellette guilty. Mercy was recommended, and the Court paroled him.

**Proposed Bill to regulate Osteopathy in Rhode Island.**—An act was introduced on February 21st, for the purpose of regulating the practice of Osteopathy and creating a board of registration and if it becomes a law, it will, it is claimed, insure to Rhode Island as high a class of practice in Osteopathy as in any of the 41 states in which this branch of medicine is now legalized. The requirements of the act are as strict as the provisions now governing admission to practice in the other schools of medicine.

Under the act as presented, the applicant must have an education equivalent to a four-year high school course and must be a graduate of a college of osteopathy requiring an attendance of four years of not less than eight months each. In addition, he must pass an examination in the subjects of anatomy, physiology, physiological chemistry, toxicology, pathology, bacteriology, diagnosis, hygiene, obstetrics, gynecology, and the principles and practice of osteopathy.

It provides that even practitioners who are already practicing in the State shall not be admitted unless they are graduates of an osteopathic college requiring an attendance of not less than two years of 10 months each. The act also provides against practice in the case of certain contagious and infectious diseases, and provides that all persons licensed under this act shall affix to their titles designations showing that they are practitioners of osteopathy.

The act provides for the election of an examining board of five members to be appointed in the customary manner, allows them only such compensation as results from fees for examinations, which fees are fixed by statute, and requires an annual report for them.

**Bill for Independent Board in S. C. approved.**—The bill of Representative Aiken of South Carolina to regulate the practice of osteopathy in the District, which provides for the establishment of an independent osteopathic board of examination, having no connection with other medical or examining boards, has the approval of the District Commissioners. In a report on the measure forwarded to Chairman Johnson of the House District committee the Commissioners urge that it be enacted into law.

It is provided by the bill that the Commissioners shall select an examining board of five members from a list of ten practitioners of osteopathy, the names to be furnished by the president of the Osteopathic Association of the District of Columbia. Persons, in order to practice osteopathy, must obtain a license, following an examination by the board.

In their report the Commissioners say that eighteen states have independent osteopathic boards of examination and that they are advised that the National Osteopathic Association is composed of graduates of reputable colleges who are members of state organizations of osteopaths.

**Thirty-five osteopaths pass the Missouri board.**—The Missouri State Board of Osteopathic Examination and Registration passed on thirty-five applicants for cer-

tificates to practice osteopathy, on February 7th, in the offices of Dr. A. G. Hildreth in the Century building. Members of the board present were: Drs. John A. Bell, president; James B. Cole, Columbia, Mo., secretary; B. H. Greenwood, Buffalo, Mo., vice-president, and A. G. Hildreth. Dr. W. J. Deeming of Brookfield, Mo., was the only absent member.

**Illinois State Board Examination.**—The regular quarterly examination of the Illinois State Board of Health for all Physicians eligible to examinations under the law of July 1, 1899, will be held at CHICAGO in the COLISEUM ANNEX, Wabash Avenue and Sixteenth Street, on April 30, May 1 and 2; and for all "Other Practitioners" and Midwives at the same place on May 3 and 4. All applicants for the physician's examination should be present at 9 o'clock A. M., on Tuesday, April 30, and all "Other Practitioners" and Midwives, at 9 o'clock A. M., on Friday, May 3.

The order of examination for the first day will be as follows:

**PHYSICIANS:** Chemistry, Etiology and Hygiene, Physiology and Neurology, Anatomy and Surgery.

The order of examination on May 3 will be as follows:

**OTHER PRACTITIONERS:** Chemistry, Physiology and Anatomy.

**MIDWIVES:** Physiology, Hygiene and Antisepsis, Anatomy, and Care of Mother and Child.

All further particulars may be obtained from Dr. J. A. Egan, Springfield, Ill.

**Reciprocation by Oklahoma Board.**—It has lately been announced that the Oklahoma State Medical Board of Examiners reciprocate with any Board from any State whose requirements are equal to the requirements of Oklahoma, provided the applicant has been registered upon diploma, and has had five years practice, or upon diploma and examination, and is a member in good standing and recommended by the State or County Association.

There is no rose

Without its cruel thorn.

No pleasure glows

Without some grief to fill us;

In words of bliss

There still lurk tones of scorn—

In every kiss

Hides some doggoned bacillus!

## Associations

**Boston Osteopathic Association.**—Dr. Kendall Achorn of Boston is performing duty with the Massachusetts militia at Lawrence where a textile strike is in progress. Dr. Achorn is a prominent member of the First Corps of Cadets popularly known as the Governor's Guards.

At the February meeting of the Boston Osteopathic Society held on the 17th, Dr. Emily G. Wilson read a very interesting paper on "Venereal Diseases from a Women's Standpoint." Dr. Wilson gave the members present plenty of food for thought, and a discussion followed, by Drs. Francis A. Cave and Helen G. Sheehan. An open parliament in technique was then held with Dr. F. A. Dennette as the leader. A discussion of the work as set forth by leading Osteopaths at the A. O. A. Convention in Chicago last summer followed and some exceptions were taken as to certain lesions especially those of the anterior dorsal. Taking part in this program and demonstrating their ideas on live subjects and on the skeleton, were Drs. John J. Howard, G. E. Smith, Mary A. Small and Kendall Achorn.

Arrangements for the eighth annual convention of the New England Osteopathic Association are rapidly being completed. The program has been filled and among those who will talk Osteopathy to the Eastern Osteopaths are some of the best in the profession. Application for rooms at the Hotel Vendome, where the convention is to be held are being received daily and the committee of arrangements will leave no stone unturned for the comfort of all those who attend the convention. From the present outlook this meeting promises to be by far the best ever held by the New England members and a large attendance is expected from New York, Pennsylvania, New Jersey, Maryland and other states. The convention will open Friday noon and continue all day Saturday, closing with a banquet in the evening. The banquet will be conducted differently from those of other years. Doctor Mark Shrum of Lynn, one of the best known Osteopaths of the country will talk on Typhoid Fever. Dr. Lallah Morgan of Providence, will have charge of the Gynecological Clinic. The other features of the program will be announced later.

Dr. Mark Shrum was the host at the A. T. Still Osteopathic Association of Massachusetts at its February meeting held on the 24th, in Lynn. Dr. Shrum presented a case of gastralgia and outlined the diagnosis and treatment of the same. A discussion then followed on diagnosing lesions and each member was required to examine the case, find the lesions, write them on a piece of paper, fold it and lay it down. After all present had made their examination in this manner notes were compared so as to see how many agreed by using this method. At the suggestion of Dr. Shrum it is proposed at each meeting to follow it out so that each member may become more skilful along Osteopathic lines.

A good-sized delegation of New England Osteopaths attended the New York State meeting in Albany, March 9th. They feel well repaid for that trip for the N. Y. Osteopaths always put up a scientific and attractive program and their hospitality is supreme.

**Meeting of the Osteopathic Society of the City of New York.**—The regular meeting of the Osteopathic Society of the City of New York was held at the Astor House, New York, February 24th, about ninety being present. The program consisted of an address by Dr. Earle S. Willard, and a clinic by Dr. J. Ivan Dufur, both of Philadelphia, Pa.

The subject of Dr. Willard's address, "Reasons for Urging Academic Revision of the Principles of Osteopathy," is one of much importance to our profession, and his conclusions in favor of this proposed revision were followed with keen interest by all. The able discussion following his address was an evidence of the vital import of this subject. The following members were the speakers: Dr. L. Mason Beeman, New York; Dr. John A. DeTienne, Brooklyn; Dr. Ernest E. Tucker, New York; Dr. Horton F. Underwood, Brooklyn, and Dr. Charles Hazzard, New York.

Dr. Dufur conducted a clinic in nervous diseases and diseases of the heart. He gave a very able demonstration of osteopathic and physical diagnosis in presented cases of scoliosis complicated by a pre-existing empyema, spinal irritation following complete hysterectomy, and hysterical epilepsy. The demonstration of mitral insufficiency in the second case presented was made with the help of a special multiple stethoscope, enabling sixteen of the members to hear the abnormal heart sounds at one time.

The meeting was a very successful one in every way. The continued large attendance at these meetings is an evidence of the desire of our practitioners to work together to advance the interests of osteopathy in every way through our society's endeavors.—Norman D. Mattison, President.

**King County Osteopaths have regular meeting.**—The King County Osteopathic Association held their regular monthly meeting in the Hoge Building, Tuesday evening, February 20th. Among the many things of interest was the paper on the osteopathic treatment of Mumps and Measles delivered by Dr. James T. Slaughter.—Roberta Wimer-Ford, Cor. Sec.

**Northeast Missouri Osteopathic Association has monthly meeting.**—The regular meeting of the Northwest Missouri Osteopathic Association, was held at the Robidoux Hotel, St. Joseph, Mo., January 11, 1912, with an excellent attendance, considering the extreme weather. An interesting program was carried out consisting of several good papers and clinical demonstrations. At 6 p. m. the members and guests had dinner in the banquet room with Mayor A. P. Clayton and Mrs. Clayton as guests of honor. The St. Joseph Osteopaths are to be congratulated on their hospitality and the success of the meeting. After dinner Dr. Deason, of the A. S. O., gave a very interesting and instructive paper on the study of bony lesions. The next meeting will be held in Kansas City, Mo., Kupper Hotel, April 11, 1912. All Northwestern osteopaths make an effort to be present. We want a full attendance. Remember the date, place and meeting.—Zudie P. Purdom, D. O., Sec. N. W. M. O. A.

**Los Angeles Osteopaths meet.**—The regular monthly meeting of the Los Angeles County Osteopathic Society was held Feb. 19th, and following the regular business Dr. C. A. Whiting presented the subject "Psychology of Dreams" as it might be used in diagnosis. An article from Freud was very ably discussed.—L. Ludlow Haight.

The Women's Faculty Club of The Pacific College of Osteopathy met at dinner at Christopher's on March first. Dr. Anna Clark, the retiring president, called

the meeting to order. Dr. Barbara Mackinnon read an interesting paper on "Pelvic Lesions." The relationship between the bony lesions of the pelvis and lesions of the pelvic viscera were discussed freely by all the members present.

The following new officers were elected; President, Dr. Helen Cunningham; Vice-Presidents, Dr. Lillian Whiting and Dr. Mary E. Crowell; Secretary, Dr. Barbara Mackinnon; Treasurer, Dr. Grace Shilling; Reporter, Dr. Louisa Burns.

**Western New York Osteopaths discuss Sanitarium proposition.**—The western New York Osteopathic Association held its regular monthly meeting at the Satler Feb. 10th at which the project of an osteopathic sanitarium was discussed and progress reported. There was a round table discussion of the Colles' fracture, its diagnosis, and treatment followed by a paper by Dr. F. C. Lincoln on the use of various instruments for determining blood pressure and their value for diagnostic work. Dr. A. B. Floyd spoke on "Therapeutic Lights."

Plans are under way for the annual meeting to be held next month and the election of officers. The meeting was preceded by a dinner with Dr. Lincoln, president of the association, occupying the chair.

**Interesting meeting of the Western Michigan Osteopathic Association.**—The Western Michigan Osteopathic Association held its regular monthly meeting on Feb. 6th, in the offices of Dr. Shoemaker, president of the association, in the Porter block. The meeting was featured by the technically prepared paper of Dr. Watkins of Muskegon on "The Upper Dorsal Imperfections relative to pneumonia and pleurisy." About twenty practitioners from all over western Michigan were present, and matters pertaining to the medical vocation and the business of the association were discussed.

**Combined meeting of Washington Osteopaths.**—The annual session of the Eastern Washington Osteopathic association will be held in Spokane April 5 in conjunction with the annual convention of the Washington State Osteopathic association.

The meetings of the state organization will be held both April 5 and 6 while the session of the eastern Washington body is to last but one day.

Fifty delegates from various parts of the state are expected to be present, and an elaborate program of addresses, as well as features of a social nature, is now being arranged.

At a meeting of the entertainment committee Tuesday in the offices of Dr. I. F. Rupert in the Kuhn building it was decided to give a box party at the Orpheum for all delegates, and also a big banquet at Davenport's.

The two days' meeting will probably be held at the assembly rooms of the Old National Bank building.

In charge of the entertainment for the visitors are: Dr. John Hartson, Dr. T. M. Wilson, Dr. I. F. Rupert, Dr. T. C. Morris, Dr. Carrie Benefiel and Dr. L. L. Garrigues.

**Address to the St. Louis Osteopathic Association.**—Dr. O. S. Miller addressed the St. Louis Osteopathic Association at the Marquette Hotel on Feb. 2nd on "Postural Defects." Dr. Armintha Bailey also spoke. Dr. H. F. Goetz presided.

In his talk Dr. Miller advocated physical examinations for school children. He said that a careful examination of the fourth dorsal bone of the spine would in many cases prevent the spread of tuberculosis.

Dr. Miller declared that in many children this bone was out of position, and that it gave the tuberculosis bacilli chances for growth. He added that in every post-mortem case he had examined where tuberculosis had been the cause of death an unnatural position of the bone was found.

**First Regular Meeting of Miami Valley Osteopaths.**—The Miami Valley Osteopathic society, which was recently organized, held the first regular meeting Thursday evening, Feb. 1, at the office of Dr. E. H. Cosner, in the Reibold building. Dr. Cosner read a very interesting paper on "Osteopathy in Confinement Cases," after which there was a general discussion of the subject.

Those in attendance besides the Dayton osteopaths, were Drs. Linville of Middletown, Sackett of Springfield, Martin of Xenia, Emley of Troy, Clark of Sidney, Gravett and Hoskins of Piqua and others.

The next regular will be held in Dayton on March 7.

**Sacramento Valley Society has interesting meeting.**—The Osteopathic physicians of the valley met in Sacramento on Feb. 17th and listened to addresses by several members of the society, among whom were Dr. C. E. Fenner, who read a paper on Hydrotherapy, Dr. E. B. Palmer who talked on the subject of Hysteria, and Dr. E. Sisson of Oakland who made an address. Dr. L. R. Daniels made a demonstration before the members. A banquet was held in the Hotel Sacramento at 6:30 o'clock.

An election of officers was held and resulted in the following being named to serve during the coming year: Dr. L. F. Daniels, Sacramento, president; Dr. E. B. Palmer, Sacramento, vice-president; Dr. C. E. Turner, Sacramento, secretary; Dr. Carrie Slater, Sacramento, treasurer, and Dr. J. L. Snare, Modesto, Dr. H. F. Miles, Sacramento, and Dr. W. C. Williams, Lodi, trustees.

A clinic demonstration was given by Drs. H. F. Mills, E. B. Palmer, W. A. Willi and L. R. Daniels.

Dr. Ernest Sisson of Oakland was toastmaster at the banquet in the evening which was held in the Sacramento hotel. There was a demonstration of technique by Dr. L. R. Daniels.

Out of town members present were Dr. Ernest Sisson, Oakland; Dr. and Mrs. J. C. Rule, Stockton; Dr. Seymour, Stockton; Dr. Pinero, Auburn; Dr. E. B. Jones, Oroville; Dr. W. C. Williams, Lodi.

The Association made arrangements for the meeting of the State Osteopathic convention in Sacramento on May 16th and 18th of this year.

**Baltimore and Maryland Associations have Banquet.**—The Baltimore and Maryland Association of Osteopaths held a banquet on Feb. 17th to which a number of visitors were invited and made interesting talks.

Former Congressman George H. Shibley, of Illinois, discussed the relation of osteopathy to sociology and arrived at the conclusion that osteopathy helped society because it prolonged life. Mr. Shibley's wife is an osteopath.

Former Mayor Mahool declared that he had been an osteopath for the past twenty years, as in that time he had taken no medicine. This statement was loudly applauded. Mr. Mahool also spoke at length on the great good to be done the city by the incorporation in the city government of the merit system.

Dr. Henry A. McMains reviewed the history of osteopathy and said there were 6,000 practitioners at present scattered in all countries. He told of the founding of the eight osteopathic schools in America and predicted a great future for osteopathy. Other speakers were Miss Anne Rothwell, Stewart, Dr. O. J. Snyder, Dr. Charles Hazzard, Dr. E. L. Quarles and Dr. Grace McMains.

The convention opened in the afternoon in the Emerson. Dr. H. A. Leonard, president of the Baltimore body, presided. The Mayor's Secretary Robert E. Lee made a speech of welcome, after which Dr. Hazzard told of the evils of auto-intoxication or poisoning by the harmful secretions of the body. He declared that his worst trouble in dieting patients was that girls persisted in eating forbidden chocolates.

Dr. Snyder spoke on the methods and possibilities of osteopathy.

**Gulf States Osteopaths meet and Mississippi Representatives organize.**—The Gulf States Osteopathic society which is composed of the osteopaths in the states of Alabama, Florida, Georgia, Mississippi and Louisiana, convened in Gulfport, Miss., on Feb. 19th. The following program was carried out:

9:30—Address of Welcome, City Attorney, J. D. Heise. 9:45—President's address, Dr. C. G. Hewes. 10:15—"The Removal of Gall Stones and Renal Calculi". Dr. R. W. Conner. 10:40—"Lumbar and Sacral Lesions and Their Relation to Women's Diseases," Dr. Ollie C. Farthing. 11:00—Report of cases of post-typhoid neuritis, Dr. E. M. Sasville. 11:20—"Osteopathy for the World," Dr. A. L. Conger. 11:50—"The Conservation of Osteopathy," Dr. H. A. Price. 1:45—"Innominate Lesions and Possible Sequelæ," Dr. Ralph B. Ligon. 2:15—"The Need and Means of a Wider Publicity," Dr. Percy H. Woodall. 2:50—"Torticollis," Dr. C. G. Hewes. 3:10—Business meeting and election of officers. 4:10—Trolley ride on shipping pier visiting vessels. 6:15—Dinner, Great Southern Hotel. 8:15—Public lecture, "The Evolution of Medicine," Dr. Percy H. Woodall.

The convention adjourned at 4 p. m., after choosing Birmingham as the next place of meeting. Officers were elected for the ensuing year as follows: President, Dr. Grace Bullas, of Gulfport; vice-president, Dr. J. Marshall Phillips, of Hattiesburg; secretary, Dr. P. H. Woodall, of Birmingham; treasurer, Dr. E. M. Sasville, of Montgomery.

Following the adjournment of the Gulf States Osteopathic Society the representatives from Mississippi organized the Mississippi Osteopathic Association. Dr. J. Marshall Phillips was elected president and Dr. E. B. Feathers of Laurel, secretary-treasurer.

**Detroit Osteopaths Entertain.**—Preliminaries to the making of extensive plans for the annual convention of the National Association of Osteopaths at Detroit next July were completed on the evening of Feb. 10th at a meeting and banquet held at Hotel Pontchartrain. Members of the Detroit Osteopathic society entertained the officers and executive committee of the national organization and several other Michigan members of the profession and their ladies.

The national officers were present to look over the ground and to make suggestions which would enable the Detroit osteopaths to put their best foot forward in the entertainment of the 2,000 delegates who are expected to attend the convention in Detroit July 22-27.

The visiting officers were Dr. J. L. Holloway, Dallas, Tex., president; Dr. H. L. Childs, Orange, N. J., secretary, and Drs. A. G. Hildreth, St. Louis; C. A. Upton, St. Paul; O. E. Smith, Indianapolis; M. F. Hulett, Columbus; H. H. Fryette, Chicago, all members of the executive committee of the National Association of Osteopaths. Other guests were Drs. O. B. Gates, Bay City; G. M. Smith, Mt. Clemens; C. Classen, Ann Arbor; F. J. Harlan, Flint; J. W. Baird, Battle Creek; D. J. Hunt, Ionia, and W. Jones, Adrain.

The visiting officers discussed plans for the convention in detail with the chairmen of the local committees, including Drs. H. B. Sullivan, G. A. Ford, W. W. Stewart, T. L. Herroder, H. Bernard, Ansel Hobson and Charles Bennett. Addresses were made by members of the national executive committee and by Drs. Sullivan and Ford of the local committee.

**Meeting of Hudson River Society.**—Two meetings of the Hudson River North Osteopathic society are reported; the first on Feb. 3rd, when the members met with Dr. Mary W. Lord in Troy, N. Y., at which Dr. Alice A. Brown of Troy read a paper on "Lung Diseases," which was followed by a discussion. Several Albany osteopaths attended the meeting; and the second Friday evening, March 8, when Dr. H. D. Sweet, of Glens Falls, and Dr. E. E. Tucker, of New York read papers. The Hudson River society also entertained the members of the State society at this meeting.

**New York Osteopaths Meet in Albany.**—The New York Osteopathic society held its regular mid-winter meeting at the Ten Eyck, Saturday, March 9, when the following program was carried out: Saturday, March ninth, 1912. 9 a. m.—Call to order. Business session. 10 a. m.—Symposium, Heart and Circulation. Anatomy, Dr. J. B. Arthur, New York City. Physical Diagnosis, Dr. Charles Hazzard, New York City, normal and abnormal heart sounds. Discussion, Dr. Robert H. Graham, Batavia, N. Y. Arterio-Sclerosis, Dr. E. C. Link, Stamford, Conn., (Diagnosis Sequel.) Discussion, Dr. William Craig, Ogdensburg, N. Y. Blood Pressure, Dr. Claud Bancroft, Pen Yan, N. Y., (Demonstration of Apparatus.) Discussion, Dr. Fred C. Lincoln, Buffalo, N. Y. Physical Care, Dr. J. A. DeTienne, Brooklyn, N. Y. Discussion, Dr. George V. Webster, Carthage, N. Y. Osteopathic Treatment, Dr. C. C. Teall, Fulton, N. Y. Discussion, Dr. L. J. Bingham, Ithaca, N. Y. Luncheon. Afternoon session—Vasomotors, Dr. Carl P. McConnell, Chicago, Ill. Stereodiagraphs, Dr. S. A. Ellis, Boston, Mass. Open Parliament, Dr. H. L. Russell, Buffalo, N. Y.

**Osteopaths in Session.**—The one day annual session of the San Francisco Bay Osteopathic Association, at the St. Francis on Feb. 11th was devoted principally to clinic work, an interesting feature of which were demonstrations by Dr. Otis Akin of Portland. Among these was an operation on a five-year-old child for congenital hip dislocation performed in the blue room of the St. Francis Hotel during the afternoon, to an audience of more than one hundred osteopathic physicians. Among the others who took part in the demonstrations and scientific discussions were Drs. Charles F. Ford, T. W. Sheldon, J. L. Near, H. F. Miles, J. C. Rule, W. W. Vanderburgh, D. C. Fairham, N. R. Rundall and William H. Ivie.

In the course of the business meeting Dr. J. Leroy Near of Berkeley and Dr. W. W. Vanderburgh of San Francisco were appointed on a committee to present resolutions at the annual gathering of the State association at Sacramento next May, urging that preparation be made for the national convention of osteopaths in San Francisco in 1915.

The session concluded in the evening with a dinner at the Hotel Steward, at which Dr. Mary V. Stewart and other lady "D. O's" discussed modern surgery.

**Announcement from the New England Osteopathic Association.**—The eighth annual convention of the Association will be held at the Hotel Vendome, Boston, Friday and Saturday, May 24th and 25th, 1912.

There will be sessions Friday afternoon and evening and all day Saturday, closing with a banquet in the evening.

For several years the convention has been held away from Boston and now that the executive committee has decided to come back this year to the birth place it augurs well for a big meeting.

Preparations have been going on for several months and it is proposed to make this convention go down in history as one of the best held by the Association.

Leading osteopaths from various parts of the country will contribute to the program.

Practical work will be a distinct feature.

The banquet and post-prandial exercises will be of a different nature than heretofore.

The management of the Hotel Vendome has given us a rate of \$4.00 per day, American plan, room with bath 80 cents extra. Parties sharing rooms or suites will be able to get a reduction.

The Vendome is one of the best hotels in Boston, centrally located, and it is noted for its conservative management.

The American Bar Association and the American Pharmaceutical Association held their convention there last year. The Boston Chamber of Commerce nearly 5,000 strong, holds a big banquet there this month. The Daughters of the Revolution precedes our meeting with a week's convention and the Ninth International Otological Congress will convene there next summer.

It is urged that you make this hotel your headquarters while in the city, for the management will do everything for your convenience and comfort.

The officers ask for the co-operation of every osteopath in New England to make this meeting a success both by suggestions and your presence.

Remember the dates and plan now to be with us.—George W. Goode, President.

**Annual Meeting of the Kansas Osteopathic Association.**—The members of the Kansas Osteopathic Association will hold their 11th annual meeting on Friday, and Saturday, April 5 and 6, and the following program will be carried out:

#### FRIDAY

10:00 A. M. Opening Meeting. 12 noon. Luncheon. 1:30 P. M. Address of Welcome, Hon. Joseph Waters. Response by Dr. R. W. Bell, Independence. 2:15 P. M. Address by President Dr. J. H. Bower. 2:45 P. M. Reading of Minutes. Report of Secretary-Treasurer, Dr. G. B. Wolf, Ottawa. Report of Trustees. 3:30 P. M. Paper: Is Osler Drifting Away from Medicine Toward Osteopathy? Dr. F. M. Godfrey, Holten. 4:00 P. M. Question Box. Consideration of Dr. Pellette's trial and preparation for same. Dr. Pellette will be with us. Dinner. 8:00 P. M. Demonstration by Dr. Conner, Kansas City.

#### SATURDAY

9:00 A. M. Report of A. O. A. Committee by Dr. Benneson, Clay Center. 9:30 A. M. Report of Legislative Committee at A. O. A. by Dr. Shearer, Abilene. 10:00 A. M. Talk on Legislation by Dr. Hulett, Topeka. 10:15 A. M. Legislation. General Discussion. 11:00 A. M. Address: Subject, The Present Day Osteopathic Belief and Education, Dr. George Still, Kirksville. 12 noon. Luncheon. 1:30 P. M. Election of Officers. Business Meeting. 2:30 P. M. Questions by Dr. George Still, Kirksville. 4:30 P. M. Adjournment. Railroad Fare Pooled.



**Resolution from Osteopathic Society of the City of New York.**—A cablegram was received at Kirksville recently announcing the untimely death of Dr. William Smith, at Dundee, Scotland. Perhaps there are those here who in recent days had intimate knowledge of his condition and knew that the end was imminent. But to thousands of his friends on this continent the sad message came as a painful shock. Your committee is not in possession of data for a proper obituary, but desire to bear testimony to the esteem and affection in which a great teacher, physician and friend is held in loving memory.

Dr. Smith was truly a pioneer in the growth of Osteopathy having been the first demonstrator and lecturer on anatomy in the beginning of the American School of Osteopathy and having distinction of having received the first diploma conferred upon anyone by the first Osteopathic School ever established.

In the early days when the work was necessarily chaotic, Dr. Smith with rare versatility and ability as an organizer, with his brilliant intellect, radiant enthusiasm and tireless energy, proved to be the man for the hour. With those rare gifts in such abundance he was an ideal teacher and fortunate indeed was the student privileged to attend his lectures. He unselfishly and unstintedly gave himself to the work of the school with untiring devotion, even jeopardizing his personal liberty in his efforts to make possible at that early date the work of dissection in the college. Every Osteopath, of every age, owes him a lasting debt of gratitude.

Therefore, be it resolved:—That in the early death of Dr. William Smith, the world has lost a man of rare intellect and princely attributes; the cause of Osteopathy a most ardent defender, and every practitioner of Osteopathy privileged to know him, a deep personal loss.

Resolved that, a copy of these resolutions be spread upon the minutes of this Society, and copies be sent to the different Osteopathic publications and to the members of his bereaved family.

CHLOE C. RILEY  
ERNEST W. ROBSON  
CECIL RUFUS ROGERS, Committee.

**January Meeting of Boston Osteopaths.**—The first meeting of the Boston Osteopathic Society for the new year was held January 20th. There was a good attendance. Dr. Frederick H. Williams formerly of the Michigan State Board of Osteopathic examiners gave a very interesting talk on "Rectal Diseases." After the lecture Dr. Williams presented a clinic and gave practical demonstrations and outlined the needs of the case.

## Book Reviews

**Memoranda on Poisons.**—By Thomas Hawks Tanner, M. D., F. L. S. Tenth Revised Edition By H. Leffmann, A. M., M. D. Professor of Chemistry in the Woman's Medical College of Pennsylvania; Pathological Chemist, Jefferson Medical College Hospital, etc. Philadelphia: P. Blakiston's Son & Co., Walnut Street. Price, Cloth 75 cts.

This little book is characterized by several noteworthy features, which are brevity, accuracy and clearness of presentation. The necessity of reprinting the edition gives evidence of the favor with which the work has been received among the medical profession and others interested along the lines that it deals with. We note that there have been inserted into this latest edition several new points that are important such as formaldehyde poisoning and antidotal methods for snake bites, and we also see that there has been a complete substitution of modern chemical nomenclature for any obsolete terms that were to be found in earlier editions. Moreover the toxicology of poisonous food has been presented quite fully making the little manual essentially a useful one.

**Diseases of the Nose and Throat.**—Comprising affections of the Trachea and Oesophagus. A textbook for Students and Practitioners. By St. Clair Thomson, M. D., F. R. C. P. (Lond), F. R. C. S. (Eng.). Physician for Diseases of the Throat etc. in King's College Hospital; Physician to King Edward VII.'s Sanatorium etc. with 18 Plates and 294 Figures in the text. New York. D. Appleton and Co. 1912.

The author of this work has had a wide personal experience and the book is the result of the fruits of his individual investigations and practice. The attempt has been made to write the book that it may be of use as a guide to senior students and also that it may prove a volume of ready reference for those engaged in the exercise of their profession and we believe that to both of these classes it will be a work that will be found to be of very great value in every way. A special stress has been laid on the clinical and pathological bearings of the subject and on the natural methods of defense and repair to which aspects of the subject so many text-books attach undoubtedly an insufficient importance. There is given a full description of symptoms and of diagnosis and the very free use that has been made of diagrammatic sketches does much to elucidate the details of examination and treatment. A full description of

almost every operative measure is given in detail as it is thought that only in this way can the general practitioner gain a comprehensive study of the whole subject that he may be helped to determine what is amiss with his patients, what he himself can do and what cases should be referred to a specialist for assistance. The book is a valuable one and we would recommend it thoroughly.

## The School Boy of 1921

Teacher—"Sterilized Steven, do you bring with you a disinfected certificate of birth, baptism and successful vaccination?"

"Yes, ma'am."

"Have you had your lower left forearm inoculated with correct cholera serum?"

"Yes, ma'am."

"Have you had your vermiform appendix removed?"

"Yes, ma'am."

"Have you a Pasteurized certificate of immunity from croup, cold feet and cholera morbus?"

"Yes, ma'am."

"Do you promise yourself, your heirs and assigns, for all ages, to use sterilized milk?"

"I do."

"Do you solemnly covenant to soak your slate in sulphur fumes?"

"I promise."

"Will you abjure every companion that sniffles?"

"I adjure."

"Do you promise to use an antiseptic slate sponge and confine yourself to individual chewing gum?"

(Sadly) "Yes, ma'am."

"Then extract that one remaining milk tooth, tie a formaldehyde bag 'round your neck, and make your will. Come tomorrow, and you will be assigned an insulated seat in this sanitary schoolhouse, and may God help you to live.—Life.

"overconfidence frequently begets carelessness, and as Spring approaches with its semblance of balminess so with it come those cases of Chest, Bronchial and Inflammatory Throat affections as a result of exposure from rushing the season.

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"The Inhibitory Action of Listerine," a 128-page pamphlet descriptive of the antiseptic, and indicating its utility in medical, surgical and dental practice, may be had upon application to the manufacturers, Lambert Pharmacal Co., Saint Louis, Missouri, but the best advertisement of Listerine is . . . . .

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## Personals

**Joins Wife at Twin Falls, Idaho.**—Dr. H. W. Sawyer of Jan. 1912 class, A. S. O. went to Twin Falls, the first of February to take up the practice of osteopathy with his wife Dr. Beulah Sawyer, who has practiced there since her graduation last June.

**Resumes Practice After Operation.**—Dr. Arthur T. Seymour of Stockton, Cal., who has been visiting in Los Angeles and San Diego while recovering from a recent operation, has returned to his home.

**Passes Arkansas State Board.**—Dr. A. E. Freeman of Russellville, Ark., has passed the State Board examination.

**In Kirksville for Short Visit.**—Dr. J. H. Hastings, Gallatin, Mo., called at the Journal office Feb. 19th while in Kirksville for a few days' visit.

**Married in Florida.**—Miss Mary R. Freeman sister of Dr. E. A. Freeman, Russellville, Ark., was married to Mr. Earle Wright at the home of Drs. Darrow and Darrow at Jacksonville, Fla., Feb. 1st.

**Brought Patient for Operation.**—Dr. C. C. Dalin of Shenandoah, Ia., brought a patient to the hospital for an operation, Feb. 19th.

**Removal Notice.**—Dr. L. E. Staff, formerly of Burlington, Io., has removed to Hannibal, Mo., where he has entered into practice with Dr. Jesse Edmonson.

**Returns to Practice After Rest.**—Dr. Emma Purnell of Lancaster, Pa., has returned to her practice after a year's rest on account of ill health.

**Osteopath Ill with Pneumonia.**—Dr. C. R. Clemens of Boston, Mass., is ill with pneumonia in the Commonwealth Hospital. Dr. Potter and Dr. Ralph K. Smith are treating him.

**Member of Chamber of Commerce.**—Dr. George W. Goode of Boston, Mass., has been elected a member of the Chamber of Commerce an organization of 5,000 men.

**Brother of Osteopath Dies.**—The brother of Dr. Margaret T. Finneran of Boston, Mass., died Feb. 5th.

**Conducted Clinic at Meeting of Association.**—Dr. A. F. McWilliams of Boston conducted the clinic at the January meeting of the A. T. Still Osteopathic Association of Massachusetts, held Feb. 27th in Boston. He presented a case where a Cesarean operation had been performed and outlined the treatment of the case. He also presented a case of ovaritis which was very interesting. He gave some excellent diagnostic osteopathic points. At this meeting applications were received and action was taken on the "Owen Bill."

**Will Spend Vacation in California.**—Dr. Augusta Brewer of Seattle, Wash., is leaving shortly for several months' rest in California.

**Dies at Telephone.**—Dr. W. M. Watson, of Mound City, Mo., dropped dead February 16th, 1912, while talking over the telephone in his office. His death was caused by heart failure.

The doctor was treating a patient, when his phone rang and he went to the telephone, took down the receiver to answer—the heart instantly stopped and he sank to the floor and expired. He is survived by a wife and three children, two of whom, a son and a daughter, are at home, and a married daughter residing at Savannah. He was about 58 years of age.

# New and Revised Editions

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By JAMES TYSON, M. D., Emeritus Professor of Medicine in the University of Pennsylvania, and Physician to the Hospital of the University; Physician to the Pennsylvania Hospital, etc. Fifth Edition. Revised and Enlarged. 5 plates and 245 other Illustrations, 13 in Colors. Octavo; xxv-|-1438 pages. Cloth \$5.50.

This edition contains a number of new illustrations and has been increased in size by 125 pages. It includes a Special Article on Animal Parasites and the Conditions Caused by Them, by ALLEN J. SMITH, M. D., Professor of Pathology, University of Pennsylvania. x

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**Sells Practice and Takes Vacation.**—Dr. W. R. Munger has sold his practice at Salisbury, N. C., to Dr. F. M. Thomas, and after visiting various places in Georgia, will spend some time at Silver City, N. M.

**Going to South America.**—A party of Syracuse people, including Dr. and Mrs. Francis J. Beall, will leave to-day for New York, whence they will sail on Thursday by the steamship Victoria Louise for Cuba, Porto Rico, Colon, Jamaica and other Central and South American ports, making seventeen ports in all. The voyage will occupy about four weeks. The party plans to be back in Syracuse on Tuesday, April 2.

**Will Open Branch Office.**—Dr. H. W. Olds, an osteopathic physician, who is located in Marinette, Mich., at present, expects to open an office in Menominee in the near future. Dr. E. M. Olds, who is a brother, is located in Green Bay, Mich.

**Visits at Pocatello, Idaho.**—Dr. Leo G. Feilder, member of the January 1912 class of the A. S. O., stopped for a few days visit with Dr. Chas. E. Rogers, a former schoolmate, at Pocatello, Idaho, while enroute to Seattle, Wash., where he will practice with his father.

**Changes Name and Address.**—We do not know the particulars, but we have been requested to change the name and address of Dr. Clara J. Laughlin, Decatur, Ill., to Dr. Clara J. Hutchinson, Duluth, Minn.

**Takes Charge of Practice.**—Dr. J. R. Witham of the January 1912 class, A. S. O. has gone to Brookings, S. D., where he has charge of the practice of Dr. E. W. Forsee, who is in the South.

**Locations of January Graduates.**—We have been able to secure the addresses of the following A. S. O. graduates: Dr. C. D. Sawtelle, King City, Mo.; Dr. Annette Alexander, Columbia; S. C.; Dr. H. T. Cook, Bricknell Bleg., Ft. Atchinson, Wis.; Dr. T. V. Anderson, Galt, Ont.; Dr. F. H. Martin, Troy, Kansas; Dr. W. K. Jacobs, Freeport, Ill.; Dr. C. E. Medaris, Rockford, Ill.; Dr. R. M. Wolf, Webb City, Mo.; Dr. A. W. Kitchell, 308 Washington St., Newark, N. J.; Dr. Annie R. Murphy, 6433 Engle Ave., Chicago, Ill.; Dr. L. G. Feidler, Seattle, Wash.; Dr. J. R. Witham, Brookings, S. D.; Dr. W. R. Archer, 140 So. 13th St., Lincoln, Nebr.; Drs. G. H. and Mable Payne, Corydon, Iowa, Dr. Geo. R. Westgate, 803-4 Waldheim Bldg., Kansas City, Mo., Dr. M. P. L. Macdonald, Erlsmere, Greenock, Scotland, and Dr. Chas. A. Rose, Humboldt, Tenn.

**Osteopath Dies.**—Henrietta Alice Stevenson, D. O., died at Reading, Pa., Feb. 1, 1912, while undergoing an operation at hospital. Besides her husband, J. F. Stevenson, D. O., and her daughter, Mrs. H. L. Maxwell, D. O., of Reading, Pa., she leaves a brother, L. B. Potts, of Louisiana, and two grand children. Mrs. Stevenson was a graduate of the American School of Osteopathy and class of June, 1901, and practiced very successfully with her husband for a number of years at Harrisburg, Pa., but of late has resided at Trappe, Pa., near Philadelphia. She was a member of the Axis Club and during her active practice, a member of both National and State Osteopathic Associations and was an earnest believer in Osteopathy. Interment took place at her old home, Sherman, Texas, February 6, 1912.

**Brought a Patient to the Hospital.**—Dr. O. H. P. Myers, Ottumwa, Iowa, brought a patient to the hospital, Feb. 29th. She called at the Journal office while in Kirksville.

**Returns from Vacation.**—Dr. Walter Jay Ford of Seattle, Wash., has recently returned from a California trip where he spent several weeks resting and studying.

**Buys Practice.**—Dr. W. H. Clark of San Luis Obispo, California., has bought the practice, home and office with furniture and fixtures of Dr. S.V. Harvey at Upland, California. Dr. Clark will take charge of the work at Upland about May 1st.

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**Locates After Finishing Post Graduate Course.**—Dr. J. D. DeShazer, after having completed a five months' post graduate course at the A. S. O., has located at 201-202 Neave building, Cincinnati, Ohio. Dr. DeShazer formerly practiced at Durango, Colo.

**Forms Partnership.**—Dr. W. Ammerman, formerly of Franklin, Tenn., has become associated with Dr. C. L. Rider in Detroit, Mich., for the practice of their profession.

**Marriage of an Osteopath.**—The wedding of a graduate of the 1908 class, Dr. J. Axton Malone of Victoria, Texas, took place at Beeville recently. Dr. Axton married Miss Enola Craven and the wedding is reported to have been the prettiest ever witnessed in Beeville.

**Called at the Journal Office.**—Dr. Florence O. Schaepe of the June 1911 class A. S. O., called at the Journal office February 28th, while in Kirksville for a visit of several days. She has been practicing since June at Johnson City, Tennessee.

**Will Spend Summer on Grain Farm.**—Dr. O. L. Daniel of Corydon, Ia., having left Drs. Geo. H. and Mabel Payne in charge of his practice has gone to Brooks, Alberta, Can., to spend the summer on a grain farm. Dr. E. C. Brann who has been associated with him since last June has located in Oswego, Kansas, for practice.

**Dislocated Shoulder.**—Dr. Joseph Sullivan of Chicago, Ill., member of the first class of the A. S. O., fell recently, dislocating his shoulder and at last reports has not been able to attend to his practice since.

**Travels through California and the South.**—Dr. C. N. Maxey of Seattle, Wash., is spending his vacation traveling through California and the South.

**Changes Location.**—Dr. J. Stanislaus Logue has removed from Germantown, Pa., to Atlantic City, where he will be joined by Dr. Beeman in the summer.

**Another Osteopath Dies.**—Dr. Estelle T. Smith, Los Angeles, Cal., passed quietly to her long home, January 25. The passing of this gentle, helpful soul came as a great shock to the people of Pico Heights, many of whom knew nothing of Dr. Smith's sudden illness when her death was announced. Stricken with pneumonia in an aggravated form, no loving skill was great enough to avert the end. Dr. Smith was a native of Pennsylvania and was sixty years of age.

A few weeks ago she nursed the son who survives her through an illness, little dreaming he would so soon return to find her stricken from him.

The years since Dr. Smith, her husband, passed away, Dr. Estelle has continued in her profession, an osteopathic physician, of high standing. She has, as she was heard to say only a few before her illness, tried to smother the lonely feeling by her work. A quiet, loving spirit she has always been discovered doing a kindness, helpfully here and there where the noisy multitude never guessed. No one did an act the world terms wrong that Dr. Smith could not excuse it as a mistake due to conditions. She will be greatly missed by those who knew her.

**Handsome Copy Given Free.**—W. B. Sanders Company have just issued a new (16th) edition of their illustrated Catalogue which describes some forty new books and new editions published by them since the issuance of the former edition.

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**Passes Indiana State Board.**—Dr. J. E. Derek of Ft. Wayne, Ind., recently passed the Indiana State Board examination. He took fifteen medical subjects including the regular's Surgery and Specialties of Eye, Ear, Nose, and Throat besides Theory and Practice and Principles and Technique of Osteopathy. Dr. Derek is the only four year graduate from Kirksville in the State of Indiana.

**Osteopath Held for Practicing without a license.**—Dr. Julia D. Chase, an osteopathic physician, having an office on Islington street, was arraigned before Judge Simes several weeks ago charged with practicing medicine without a license. The defense was that she did not require a license, inasmuch as osteopathic treatment does not require the use of medicine, and after having the matter under consideration for several weeks, we hear that Judge Simes of the police court has given a decision in the case.

From the testimony given, the court found probable cause and ordered that Dr. Chase be held for the grand jury at the April term of superior court in the sum of \$100. Bail was at once furnished by two prominent gentlemen. We quote the following from a letter written by Dr. Chase: "My sign is this: Dr. Julia J. Chase, Osteopathic Physician. Marschall called and ordered me to stop practicing medicine without a license, and on refusing to stop practicing or take down my sign I was forced into court. The Medical Board had made formal complaint to State; so the action comes through letter received from State Secretary."

We wish Dr. Chase the very best of success in her fight for her rights and feel assured that she will win out.

**Back at Work.**—Dr. Louis R. Fechtig is again able to resume his practice in New York and Jamaica after a severe attack of pneumonia.

**Passes Nebraska State Board.**—Dr. W. R. Archer was successful in passing the Nebraska State Board Examination. He made fine grades, averaged over 94% on all papers and obtaining 100% for the paper of osteopathic principles and practice. We hear that he has a finely fitted up office and a most complete laboratory equipment.

**Osteopathy and Pneumonia.**—"Girl, age 14. On Jan. 31, 1912, ate hearty supper and went to bed feeling as well as usual. Awoke one hour later with chill, nausea and vomiting. Was restless and thirsty remainder of night. I was called in the following morning to see the case. Found patient much depressed, cheeks flushed, sharp pain in right side of thorax, with some cough. Temperature 104 pulse 120, respiration 34 with expiratory grunt. Called in Dr. Gerding, who diagnosed the case as lobar pneumonia of the right lower lobe. Treatment consisted of thorough relaxation of spinal muscles, raising upper six ribs on both sides, with special attention to heart area on left side and good splanchnic treatment for elimination. Treated four times per day first two days, three times next two, remainder of time twice per day. Plenty of water and fresh air having room well ventilated from outside. On Feb. 14th diarrhea developed, bowels moving five times between 8:30 and 12:30 o'clock a. m. This was checked by a single treatment, otherwise bowels moved regularly once and twice per day throughout the course of disease, without the use of enema or cathartic. On Feb. 8th, beginning of 8th day, fever ended by crisis dropping from 103 to 98 1-2. Three days later patient was up with complete recovery. Fever ranged from 102 to 104 4-5, pulse 110 to 122, respiration 30 to 36. Patient has a very bad irregular spine throughout upper dorsal region."—W. A. Wood, June '12.

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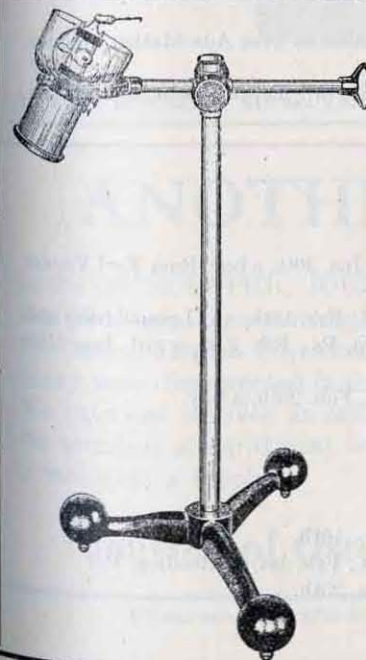
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At Beeville, Texas, Dr. J. Axton Malone, of Victoria, Texas to Miss Enola Craven of Beeville.

At Hayden, Colo., June 1, 1911, Dr. Lillian Davis of Hayden, Colo., to Mr. J. A. Berry.

At Hannibal, Mo., Feb. 1st, Dr. Florian J. Kaiser to Miss Ada Mather Maddox, both of Palmyra, Mo.

At the Baltimore Hotel, Kansas City, Mo., Feb. 3rd, Dr. Millecent Smith to Mr. H. H. Ross, both of St. Joseph, Mo.

## Born

To Dr. and Mrs. M. H. Good, Hamilton, Ont., Jan. 30th, a boy, Ross Earl Vernon Good.

To Drs. J. F. and Daisy Walker of Quincy, Ill., Feb. 15th, an 11 pound baby girl.

To Dr. and Mrs. H. C. Kirkbride, Norristown, Pa., Feb. 21st, a girl, Jane Mills Kirkbride.

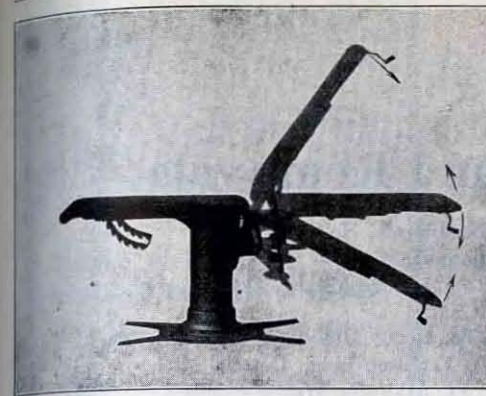
To Dr. and Mrs. F. L. Antes, Detroit, Mich., Feb. 25th, a boy.

## Died

Dr. W. M. Watson of Mound City, Mo., Feb. 16th.

Dr. Henrietta Alice Stevenson, of Trappe, Pa., Feb. 1st, at Reading, Pa.

Dr. Estelle T. Smith, Los Angeles, Calif., Jan. 25th.



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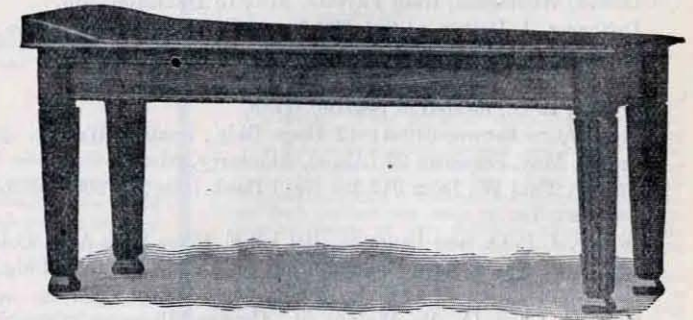
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 With eyes that are tender and brown;  
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 But the wonderful part of my doggie,  
 Whose beauty, I ween; has no peer,  
 Is his loyal, unwavering love—  
 Ah! that is what maketh him dear!  
 And if love is the spirit's expression,  
 And never can perish, then who  
 Shall care to assert that my doggie,  
 Who loveth as I or as you,  
 Is only a soulless creation,  
 Who dieth, and that is the end;  
 Who lives for a day, and is naught,  
 Yet his life he would give for his friend!  
 Nay, if love maketh ME live forever;  
 If love, of a soul, is the breath,  
 Then love saves the dog from extinction—  
 The dog who loves e'en unto death!