

Osteopathic Truth

April-May 1917

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Osteopathic Truth



A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

Pledged to the *truth* which Father Andrew saw,
No favor sways us, and no fear shall awe.

Volume I

APRIL-MAY, 1917

Numbers 9 and 10

AMERICAN OSTEOPATHIC ASSOCIATION DEPARTMENT OF NATIONAL AFFAIRS

Orange, N. J., May 23, 1917.

DEAR DOCTOR:

THIS IS THE MOST IMPORTANT LETTER YOU HAVE EVER RECEIVED. READ IT CAREFULLY. ACT ON IT QUICKLY! Physicians and dentists are authorized by Congress to serve our armies. Osteopaths are not allowed thus to serve their country. We should make a united effort immediately to secure this right.

Every osteopathic physician and student between 21 and 31 is SUBJECT TO DRAFT AS A PRIVATE and it may be extended to 40, 50 or even 60, as has been done in Europe, and practically every osteopath will be subject to call. All men under 31 must register June 5th, as directed by the President.

Every one of us is ready to do his duty in the trenches or where not, but if we are capable of doing a larger service by restoring thousands of soldiers to efficiency, then we want to do that higher service. But we cannot be accepted by the Government as matters now stand, although the demand for physicians is greater than can be supplied and thousands of injured soldiers will remain invalids if denied osteopathic care.

People in civil life have the benefit of Osteopathy through State legislation. LET US SECURE THE SAME RIGHTS FOR OUR SOLDIERS, BECAUSE EXPERIENCE ABROAD PROVES THE DIRE NEED OF IT.

Every osteopath is, therefore, given an opportunity to aid in securing this right. Those under 31 should fill out the blank for enlistment. Also those up to 40 who wish to volunteer if age limit for physicians can be extended. Every other osteopath should sign the blank offering his services at home. Men

PROCLAMATION OF THE PRESIDENT

"The nation needs all men, but it needs each man ** in the endeavor that will best serve the common good. * * The nation is being served only when the sharpshooter marches and the machinist remains at his levers. * * Each man must play the part for which he is fitted. To this end Congress has provided that the nation shall be organized for war by selection; that each man shall be classified for service in the place in which it shall best serve the general good to call him."—(Extract from order for enrollment.)

and women alike should fill out the other forms including contribution blank and enclose first check by return mail.

Service in the trenches will mean loss of experience, practice and time for our physicians and draft extended to our students will mean closing our schools, while students in medical colleges are rushed to graduation to enter the Army medical service. THIS MEANS ABOUT ONE-THIRD OF OUR RANKS MAY

SERVE IN THE TRENCHES AND IT WILL REQUIRE TEN YEARS TO GET IT BACK TO OUR PRESENT NUMBER.

Considerable money will be needed to pay expenses necessary to passing a law. Are you willing to seize this opportunity to bring the work of Osteopathy to the attention of the Government so that this service may be made available for our soldiers? THIS COMMITTEE WILL TAKE NO STEPS UNLESS YOU ARE INTERESTED AND WILL SUPPORT EVERY EFFORT MADE. WHAT IS DONE MUST BE DONE BEFORE OUR RANKS ARE DEPLETED BY CONSCRIPTION. AID NOW OR IT WILL BE TOO LATE.

This is a crisis for the nation, also a crisis for Osteopathy. Immediate action is needed by all citizens and by us most. The Country expects everyone to do his duty. We BELIEVE WE CAN SERVE OUR COUNTRY BEST BY SERVING AS OSTEOPATHIC PHYSICIANS. Do you believe this? Serve we must—serve we will. How WILL YOU SERVE? Filling out all the enclosed blanks and returning them TODAY will indicate to the committee the kind of service each will render.

Study this letter. Do not lay it aside until you have resolved on your course. Send check and information called for at once.

By order of the Board of Trustees of the A. O. A.

(Signed) H. L. CHILES,
Secretary.

GOVERNMENT SCIENTISTS TEST DRUG MEDICATION

MELVILLE DURANT
(Physical Culture Magazine)

For the first time in the history of medicine, so far as the writer is aware, an official test has been made by Government scientists of the curative value of drugs—and they have been weighed in the balance and found wanting.

The Public Health Service has made this test upon pellagra patients in the United States Marine Hospital at Savannah, Georgia. All of these patients were treated dietetically and part of them were treated with drugs. On the opposite page are given the results of this test as quoted from the official statement in the Weekly Public Health Reports for July 28th, 1916.

The medical profession is slowly but surely being freed from the blind faith in drug medication. But the economic incentive is here a biasing factor. Doctors may treat without drugs, they may freely admit the efficacy of other methods of treatment, but we cannot expect the individuals whose livelihood largely depends upon the drug theory of medication to announce a deliberate and straightforward experimental test of drugs vs. diet in the treatment of disease.

The scientist in Government service, sure of a lifetime job, is about as free an agent for the discovery of truth and the expression of honest opinion as we can expect frail human nature, struggling for survival in a poverty-stricken world, to produce. Therefore, with the growing freedom and importance of our Public Health Service it is to be hoped that old prejudices will be laid aside, and old theories put to the test of actual experiment.

It is enlightening, and somewhat amusing to trace a similar evolution in the government scientist's attitude toward the medication of domestic animals.

In the early days of the Department of Agriculture, most of the officials concerned with the animal industries were veterinarians, and most of the bulletins published by these "scientists" were long descriptions of heaves and glanders, blackleg and blackhead, scabies, hog cholera, gapes, roup and like barnyard maladies.

In those good old days long and fulsome were the lists of drug-store remedies for the ills of man's dumb friends: turpentine for the bots, coppers for the cholera, epsom salts for the blind staggers—we may have it twisted, but the principle is the same. Then too, in that bygone age of twenty years ago, there were the "condition powders," or "stock foods." Stock foods were tonics, cure-alls, panaceas for the entire category of

ills that flesh and fowl fall heir to. Across the double page inside spread of the "Farmer's Guide," and the "Rural Guardian," were those magnificent pictures—rivaled only by "Custer's Last Stand"—where the arch-necked steeds and sleek fat kine and the longwooled sheep and rotund hogs appeared in grand array, surrounding and gazing worshipfully and longingly upon a bucket of stock food. Said elixir of life consisting of powdered charcoal, sulphur, epsom salts, gentian, mustard and other mysterious chemicals and patent medicines compounded into a black and salty mass and labeled "food." One tablespoonful of this wondrous physic, given in the bran mesh, would make fat the hams and sleek the hair. "Twould fill the egg basket, overflow the milk pail and shoo away the spectral vulture of hog cholera that hovers threateningly over the cob-filled swine lot and fills the farmer's heart with the black shadows of despair.

At first the staff of the Department of Agriculture and the Experiment Stations were veterinarians, but later came young men educated in general science in agricultural colleges, and having no professional axe to grind.

And what happened? Someone suggested that they "experiment." The first experiment on the efficacy of drug doping was conducted at the Massachusetts Experiment Station in 1896. To one lot of hens was given plain food, while to the rations of the second was added the potent, stimulating, vitalizing, egg-producing "condition powders," then much heralded in the agricultural press and recommended by the "highest authorities." The hens that had no condition powders laid 195 eggs, and the hens that had the condition powders laid 163 eggs.

At the Iowa Station, in 1902, steers were fattened on corn only, and gained 2.39 pounds per day. But corn alone is not a complete ration, and other lots having various other foods added thereto, gained more. But when to the corn was added "stock food," the steers gained but 2.30 pounds per day, or less than on the corn alone.

In that same year the Indiana Experiment Station made a similar test in feeding pigs, and discovered that the porkers did equally well with or without the "stock food." But we should not judge too hastily—that particular stock food might have been "adulterated" and made out of corn-meal and charcoal.

The Kansas Experiment Station tried the effect of substituting the drug store for the feed store with dairy cows, and with like results. All this information was published at state expense. A howl went up from the agricultural papers, and political pressure unavailingly ap-

plied to stop appropriations for "Cow College."

Ask any young agricultural-college farmer of today what he thinks of drugs as a source of health and vitality for his live stock, and you will receive a reply ornamented by a smile not dissimilar to the one you would get should you ask him if fish would bite on Good Friday, or if the month would be a rainy one because the lunar crescent was tipped to spill the water out.

To return to the human animal, the question arises: Will the Public Health Service confine their testing of the worth of drugs to pellagra, which is conceded to be a disease of dietetic origin, or extend the experimental search for truth into the field of general medication?

If a wrong diet causes pellagra and a correct diet cures it, and the additional use of drug medication hinders that cure, why do the Government scientists tacitly approve the well-nigh universal scheme of drug dosing for the other ninety-nine diseases that have not yet strayed from the apothecaries' fold?

Does it look reasonable that drugs can check the growth of steers, stop hens laying eggs, and interfere with the cure of pellagrins, and yet be "just the thing" for dyspepsia, or grippe, or rheumatism?

If the public mind is to be quickly disabused of these ancient fallacies, their disillusionment must come from the salaried scientist who can investigate thoroughly and speak the truth freely without suffering in pocket.

Do you feel that this is an unfair nation against the man who drives twenty miles through the storm and night to usher you into or out of life? Individual integrity and heroism do not change the conditions of existence. Put yourself in his place. A well-dressed woman comes into your office; she complains of slight headaches and distress after eating. Do you tell her she is a lazy glutton, and let her go to the physician across the street, or do you smile sympathetically and say, "Yes, I know," and take out your little pad and write "aqua saleratus." "Two dollars, please."

But the scientist at Washington has a fair salary and a life job. He can afford to tell the truth.

Dr. C. S. Betts of Huron, South Dakota writes: "You will find that there are a lot more stalwarts than you have listed. We have been called old stand-patters by the state association for years."

"Have just been enjoying the December number of Osteopathic Truth and have found a number of whips for lazy spots. I feel I need a regular course of sprouts."—SARAH C. WARDELL, Asbury Park, N. J.

COLLEGE FORUM

COPY OF LETTER FROM EDGAR S. COMSTOCK, D. O., CHICAGO

"In the December issue I read many articles of much interest, especially those of Dr. Meacham on "What's the Matter With Osteopathy," and statement of A. S. O. Board of Trustees.

In regard to Dr. Meacham's article I would say that I believe his criticism is most perfectly justifiable. However, I believe that there are good and sufficient reasons why these conditions exist.

First: Until our colleges are put on an endowment basis, where they will not be obliged to depend entirely upon tuitions for their support, they will be, to a greater or less degree, dependent upon the gratuitous services of many of their teaching staffs.

Being dependent upon such services, we find it difficult to obtain such services from many in the profession who are most competent to render the same, because those who are best qualified are, as a rule, so busy with their professional practices that they find little or no time or inclination to serve their profession by giving work in the colleges. Thus the students are denied the valuable instruction and influence of these best qualified men and women.

The result is, and has been, that a large percentage of the teaching staffs of our colleges is made up of the more recent graduates; of doctors whose experiences have been more or less limited, and thus are less qualified to give practical instructions in the application of the Osteopathic Principle. Thus, as the years have gone by, the instruction in our several colleges has become less and less distinctly osteopathic and more and more mixed with so-called adjuncts.

I do not, and cannot believe that any college of Osteopathy has deliberately altered its policy so as to become a more or less medical-osteopathic institution. I believe it has been entirely due to the evolutionary changes taking place in our educational institutions of the necessary dependence upon the more recent graduates for our instructors. Each new set of graduates, because of the increasingly limited experiences of their professors in the practical application of Osteopathy in the treatment of diseases, becomes less and less enthusiastic in Osteopathy as a profession, and less and less imbued with the true conception of what Osteopathy is and what it can do.

Thus, I firmly believe, that would our osteopaths who criticize the present conditions in our colleges, and who are within reasonable distance of those colleges, I say, if they would voluntarily offer their services to those colleges, invest a limited

amount of their time in the instruction of our osteopaths-to-be, the whole situation would be altered and again we would have graduated from our colleges the enthusiastic osteopathic disciples that used to be the rule.

This condition does not exist in only a few of our colleges, but does exist in every one. Am I to judge by the conversations I have had with graduates and students of practically every osteopathic college in the country, and all of those of the Middle West? From every college we have those who were so enthusiastic over Osteopathy upon their entrance to the college work, that they have never lost that enthusiasm; and also those who are mentally so thoroughly osteopathic as to be able to sift out the osteopathic truths from their college work; that every college has in the field of practice thorough, dyed-in-the-wool osteopaths and every college also has among its graduates those half-hearted osteopaths that were they to see a sore throat, with high temperature, they would immediately rush away for an antitoxin tube and shoot the patient full of it.

In the second place, I believe we many times misunderstand one another. I believe the great majority of us mean and work for the same ends in our professional work. But we do not always express ourselves clearly.

I feel reasonably sure that we all recognize the necessity of surgery in some cases. I feel certain that we all believe in the use of anesthesia in all such cases. I am sure we all recognize the necessity of toxicology in poison cases, and therefore the legitimate use of antidotes. I am sure all of us, especially those in acute practice, have seen cases where the administration of an anodyne was the only humane thing to be done. I believe that the great majority of us recognize the necessity of regulation of diet in some cases.

If we do all recognize the above conditions, then we are all on the same foundation; for we all do believe, we must believe it or we are not osteopaths at all, that the fundamental, the basic factor in all diseased conditions is a maladjustment in structure or environment and that the adjustment of that structure or environment is absolutely necessary to cure the diseased condition.

For the sake of Osteopathy, for the sake of "Osteopathic Truth" make a careful, painstaking statement of what your position is.

Only Friday I argued with one of our practitioners upon this very score. After reading Dr. Meacham's article he bitterly criticized it because he thought Dr. Meacham believed that manual manipulation was the only treatment necessary in any case whatsoever. I have talked with Dr. Meacham myself on this matter,

and I know he recognizes the necessity of surgery, anaesthesia, toxicology, diet, etc.

I am a through and through lesionist. I believe that adjustment is the absolute essential of health, and that maladjustment, structural or environmental, caused by accident or otherwise, is the essential, fundamental and only predisposing factor to a condition of disease."

EDITOR OF "OSTEOPATHIC TRUTH":

"Several articles in the November issue, namely the ones by Dr. Louise A. Griffin and Dr. Joseph Henry Sullivan and Dr. Nettie Haight-Stingle, have prompted me to voice an opinion, because I happen to be one of the more recent graduates and appreciate the import of their several statements.

When I was being instructed in technique at one of the osteopathic colleges I never saw use made of a skeleton to demonstrate a point and to my recollection a spine was brought to the room just once to demonstrate a lateral curvature.

Our instructor would show us a few movements ("manips") whereby a region of the spine might be "popped" (and I must give him credit, he was ambidextrous, moving any joint in the spine specifically or generally) and then he would retire with the advice to "practice them." To my best memory, I never saw in this class in technique a SPECIFIC LESION, the MOVE for CORRECTION and the LESION CORRECTED.

Now the trouble is not with the schools. The management procures the best AVAILABLE material. Most of the older practitioners in the field, i. e., Dr. Sullivan, Dr. Teall, Dr. Farmer, and the others, acquired their education when the Old Doctor was active in the work of the only school at that time. These men had done for them what only a lover of his work could do, give everything he had to the spreading of a truth to his fellows. Such a man was the Old Doctor and he never tired of showing and explaining. He gave everything to "Osteopathy." Is there such a one in the ranks today? The "Stalwarts," the "Simon Pures," the "ten-fingered osteopaths" are always under-rating the recent graduate, but what will the "stalwart" do for him? Will he give up his ten thousand dollar a year practice and go to any of the various schools and teach "ten fingered Osteopathy" to the present day students as he was taught it and receive \$1800.00 that his ideal "simon pure" variety may be resuscitated?

Is there one of them who is ready to take up the work where "Daddy" left off? I doubt it. If there is, let him come forth and he will see how ready the present day student is to receive him and make the most of his teachings.

The old graduates went out with from a few months to two years training, but that training was along lesion lines. These men went into the field, had laws passed, were given license to practice without examination. Many of them left the plow, the work bench and the shop to take up the work. The recent graduate must have four years of high school, must put in 4 years in college and prepare to pass examinations in from 12 to 20 subjects with a grade of from 70 to 85% so that he can comply with the law that the 6 months to 2 year man made for him.

In all probability, the man or woman who graduates today has a better general training than many of them who "knock" them. Personally, I admire the "Stalwart." I am a "ten-fingered" brand because I believe in the principle of FUNCTION DEPENDENT ON STRUCTURE. I have never felt a drug could do more than my hands in those cases that have come to me and I never intend to use drugs. I am sure that bad osteopathic manipulation is preferable to skillful drug manipulation. If there is any doubt but that the present day student wants the best in lesion adjustment, let one of the older practitioners go to one of the schools, say Kirksville, and organize a special class in technique for ONE MONTH. He would have to rent the local theatre to accommodate the applicants. He'd get them all from freshmen up, and a few field men would doubtless drop in also.

Now I do not want to be thought a kicker, but truly, the recent graduate has a hard time. Every magazine he reads, bears down on him, and in all fairness to him, and the schools too, I have scribbled these lines. Let the "Stalwarts" blaze the trail for the student today as "Daddy" blazed it for them. If they have "the goods," let them share it with their fellows and not keep it locked up in a suite of offices in "The Loop" or in a residence office in Fifth Avenue. Let them show their willingness to do for Osteopathy some of the things they commend in the "Old Doctor." Let them quit knocking the "recent graduate" and the schools, and get busy and boost for both, by giving a little of themselves as instructors at \$1800.00 a year, that the "Old Guard" variety may be perpetuated.

"Stalwarts," "Old Guard," "Simon Pures," it's up to you! What will you do that "pure Osteopathy," which YOU LOVE so WELL, may not backslide? I'll bet you won't do a thing but keep right on kicking. However, "take it from me" until just some such plan is followed, room for complaints about inefficient osteopathic teaching will continue to exist.

We need you—not your money—but yourself to show the younger ones how to "find them and fix them." That's where

we are lame, and if you will do your duty and give yourselves, the "old time" certainty of results will banish the feeling among the younger osteopaths that their science needs s'oreing up with anything but more and more "ten fingered" Osteopathy."

Yours truly,
R. P. BURNHAM, Cleveland, Ohio.

"The Old Doctor's edict to 'Find it, fix it, and let it alone' is one of the fundamental principles of the practice of Osteopathy, but it is operative as well in the investigation of the present situation of the profession. There is a cause for every result; and I am glad to see the Osteopathic Truth publishing articles which are evidence that many of our profession are cognizant of the 'effect' and also recognize some of the 'causes.' The articles by Drs. Griffin, Sullivan, Cave and others in your November number show this. But, as a younger diagnostician, I would put the real cause as 'too much commercialism' in the profession and not sufficient love for the Principles of Osteopathy, and the great movement itself. It is true that many of the 'Old Guard' have been, and still are, working hard, but these are too few. There are too many of the type so aptly illustrated by President Meacham in one of his talks at the Kansas City meeting, who, before he studied and graduated in Osteopathy, had been a telegrapher earning about \$1,200 a year. Through success in his practice he had obtained not only an income many times the former, but he had obtained a position of respect and honor in his location which he might never have hoped for under his former conditions. Still, this man was neither a member of the local, state or national associations, but at one time he had given \$25.00 to the Research Institute. The benefits he had obtained were worth \$25.00 to him. No one can remedy such a condition but the individual himself, and every man and woman in the profession should feel the obligation to give to the profession some return for the continued benefits he is receiving.

But we are not going to consider that the individual practitioner is entirely to blame. For, if you will investigate further and more closely, you will find the cause to be in the very beginning. Our schools in the past apparently have accepted anyone who has had the money to pay his way through. It is a known fact to the writer that in instances this is true. We have therefore, had graduates who have been anything but a credit to the profession, and have accomplished more harm than good. This cites your commercialism in the schools.

Recently a wonderful opportunity for the good of the profession was offered

one of our foremost men to head one of our Eastern Schools; this man had been president of the A. O. A., honored by consultation by some of the foremost medical men, fully competent to demonstrate the merits of Osteopathy and become an influence for a wonderful good in the life of the institution, but the offer was rejected, we are told, because of the pressure of business. Our schools must have teachers of Osteopathy, and we cannot have them unless some of those who are well versed in the subject and successful in practice, competent and willing are going to accept positions to teach. It is the 'Old Guard' who must continue to sacrifice for the good of the Cause and consider it a privilege and duty to do so. We are too young and too few to permit ourselves to become indifferent in this direction.

There is a movement among the profession, and a good one too, to endeavor to increase the number of students, with the best of qualifications, sent to our schools. However, it is my opinion that a better movement would be to improve the schools, and give us institutions to which we can conscientiously send students. Information from students in most of our schools gives evidence of the greatest dissatisfaction regarding the quality of the osteopathic instruction which is being given them. A 1916 graduate from one of our considered A No. 1 schools, who had all the preliminary qualifications to pass the New York State Examination, prided the fact that he had administered calomel and 'salts' in a recent case. Either his instruction was not specifically osteopathic, or else he was permitted to graduate improperly qualified. This condition exists in our schools, deny it as many may, and it remains for each one to recognize the 'find,' and help 'fix' it. And then, we will secure for the future of Osteopathy what the Old Doctor intended, true exponents and successful. Our schools should be operated on a profit-sharing basis, but this basis must not be financial, but educational, and those who know their Osteopathy and have been successful, must share it with those entering the profession, and the best way is through the schools. We must secure control of them, and, as I have suggested before, the better way would be by endowment and through the A. O. A. Let us lay aside personal gain, and make for the best that we can give the profession in work that will better the class of operators who are to take the place of the 'Old Guard.'"

O. C. FOREMAN, D. O., Chicago, Ill.

Almost every journal contains from one to a dozen criticisms of the osteopathic situation and I have looked in vain for suggestions of how to help it. That is

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real, business like, workable suggestions. The "fill-the-schools-movement" is other one single bright exception.

Now my idea is to get some of our good, successful, practical, thinking, osteopaths to agree to take a class lecture in some of our schools for one or two months each year.

I can't see any objection or any reason why we can't get four doctors to give two months each year or eight to give one month to the cause. Any big interested man or woman osteopath that has the ability should deem it a particular privilege to give two lectures a day for say two months on the real practical problems of Osteopathy and the every day practitioner. Then he or she would have plenty of time for rest or for study and it would make a very bright one or two months.

The lectures would relieve the school of the need of a teacher for those periods and some one might say that it is wrong to help a private school in a financial way. Perhaps the school would give something to research. It ought to be worth a good deal to any school to have such an arrangement.

If it should be necessary to raise a fund to carry out such an idea I am one who would sign say four notes for say \$25.00 per year to endow such a chair in one of the schools.

As soon as such a chair was established I would begin to figure on a post graduate course, I know, for it would be a fine experience.

If I were equal to such a thing myself I would be mighty well pleased to have the opportunity to spend a few weeks meeting the students in one of the schools.

Gair, Reid, Farmer, Meacham, Webster Clark, McConnell, Edwards, Bailey, Vastine and a dozen others could certainly do real Osteopathy the best service that has been done it in many a year if they would form such a team or teams. They would get a great fund of information out of it, for the experience of going over

the questions and treatment of different conditions would be as much or more of an education to them as to the classes.

The list of diseases to be discussed before a class could be divided up among the team and it should not be such a hard thing to handle for any one of them.

Is the idea practical or only a dream of mine? We certainly want something more than "The matter with Osteopathy is..." that we hear so much nowadays.

Fraternally,
GEO. M. MCCOLE, Great Falls, Mont.

INDICTMENT

ERNEST E. TUCKER, D. O., New York City

By one of our most faithful and loyal members, at the recent meeting of the New York Osteopathic Society, a severe indictment was raised by implication against the osteopathic schools. A patient of his wanted to take up the study of Osteopathy, and the patient's father, an M. D., also wished it. "To what school can I send this young man where he will be sure to receive a genuine osteopathic education?"

Not once, but fifty times has this come up. Not in form of implication only, but as a specific charge; by not one person but by many. The one who raised the indictment by implication quoted a recent graduate. In the hall, talking over the discussion with another recent graduate, one of the brightest women in the East, she said:

"I did not receive my osteopathic training in the school; I had to come back to the man who sent me there, to get that." (Notice the use of the word TRAINING, not education.)

Time to give the matter the space and attention it deserves. No time for special pleading, for points of view; time rather for calmness, for thought judicious, searching, constructive.

Is there anything in this charge? It was answered from the floor. There

were representatives of each of the four Eastern schools present, and each of them in turn said, "Send your young man to our school, we assure you that he will get osteopathic education at our school. Even if surgery and other things are taught, he will also be taught Osteopathy."

What else could they have said?

The question is not whether they get osteopathic education, but HOW MUCH; what sort; how specific, how much of it is training; what proportion of osteopathic as compared to surgical, and "other things;" how well are the other things co-ordinated with the osteopathic philosophy and osteopathic facts? These are the questions that those responsible for that and other new students want to know.

How could these "other subjects" be co-ordinated with Osteopathy, when they are taught in the main by men who have gotten their training in those subjects from medical schools? Students minds are sensitive. They learn from many sources beside text-books. They absorb from the instructor his mental background as well as his mere instruction. So they demand of us our osteopathic statistics; and they quote to us medical and surgical statistics. Vain to argue

with them; vain to ask where are the statistics that prove the value of medicine, of electricity, of milk diet, of surgery; they reply by quoting statistics on anti-toxin, on pathology, on anything. They have absorbed a wrong mental attitude, tinged with skepticism directed at Osteopathy and its claims for cures.

When you and I entered the school, fellow "Old Grad.," we had had experience with medicine and surgery and we were there because of that experience and because of the contrast of that experience with the work of Osteopathy. We had had experience; and I have observed that it is experience that most of all things brings conviction of the supremacy of Osteopathy.

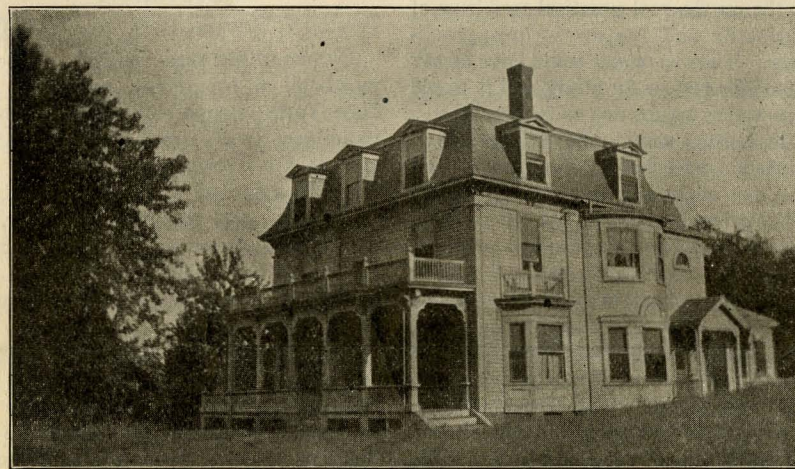
The teachers in our schools are now on the whole abler men than they were. The students now in our schools are on the whole younger, better educated, of a higher standard altogether than the classes made up of us; naturally; they are the ones we have sent, and we plus Osteopathy are a higher class of men than we were before. But they, both teachers and students—lack that one thing—experience; experience that brings the osteopathic state of mind; and whereas we had the faith they have to be given

the faith; and not in all cases are they getting it. To this is added a tinge of skepticism, and to that is added also the bugbear, the horror, the State Board, which dominates the student mind from the time he enters till months after his graduation, when it has been passed. This bugbear dominates not the osteopathic side of their education, but the "other" subjects, and turns all their more serious efforts in that direction.

Does the indictment stand? If so, shall we knock the schools in the head? Nothing to be gained by that. If it is so, let us ask judiciously, carefully, and calmly WHY it is the case, and find some constructive answer.

There are three possibilities. Either our ideals for osteopathic education are too high; or the reports may be exaggerated; or the indictment may be true—it may be true that the standards for graduation for osteopathic students have been raised, BUT NOT IN OSTEOPATHY.

As to the first: Just how much real training did you and I receive in actual application of Osteopathy? Personally I can testify that mine came from being treated, from watching other students treat, from seeing the instructor, across half the length of a long hall, give the



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treatments. It was many months after graduation before I could be sure of lesions that I examined for; many months before I began to develop anything of a technic; years before I had begun to get a grasp of the different diseases in relation to osteopathic doctrines; nor have I after fourteen and one half years attained a satisfactory mastery of any of these branches of the science of Osteopathy. But I did have, and you did have, the conviction based on experience and on personal knowledge that Osteopathy would cure these conditions, and I went after them—even as we do today. That feeling, if not lacking, is qualified now.

As to the second—whether the reports are exaggerated or untrue—we may assume that they are exaggerated, but yet may be sure that they are in part true. That answers also the third query.

The indictment stands; but against whom? Why do the schools not use instructors whose background is osteopathic experience and training? Because we have not prepared such instructors. Why do not the students today receive the instruction in Osteopathy that we in these years have developed? It is because we have not prepared it for them to receive. The Old Doctor cannot be everywhere. We have developed but have kept the development as our personal attainment. We have left the matter of improving the instruction of students to one man, or perhaps two men, in each of the schools. Burdened with the work of teaching, they have done well; but the work cannot be done in that way, or cannot be done fast enough to meet the needs of our growth, hastened as that is by our environment of a million medical research workers.

We have compelled the lengthening of the course from two to four years; but we have not prepared the material to be filled into those extra years; and perforce they were filled with the special subjects taken from medical research. We have raised standards for osteopathic graduates, but not for Osteopathy. We have raised and endowed a research institute to prepare instructors and subjects for us; but this institute we have directed into channels of so-called post-graduate work, and the development of specialties, for the profession, not the schools. The mechanics of the body, the etiology of lesions, the technic of reduction, these have not so much as been touched except by one devoted and clear sighted man, Dr. McConnell, working for the most part outside of the Research Laboratory, at his own cost and for the sake of his own enthusiasm. Those who have gone into the Institute have followed these subjects that they were

especially interested in outside of the institute—by design and purpose of the management; believing, and no doubt rightly, that thus the greatest amount of progress would be made—adding to the resources of the institution the enthusiasm of the individual. But if this is the case, then should those be sought out who have a special bent for mechanics, a special interest in lesions, in bones and ligament and cartilage, and these should be induced to enter the institute. Mechanics is the foundation of Osteopathy. We are building a very high and fine superstructure, but are leaving the hull no larger than it was; and top heavy boats do not need to be submarined.

We have established clinics all over the country; but the ideal of these clinics seems to be the treating of as large a number of persons as possible; whereas their true function should be to study cases, to treat no more than can be handled profitably for the making of proper osteopathic records and the developing of a science on the basis of those records. If we personally are not interested in the gathering of such data, then should it be our care to see that those who are interested and capable should be found and should be induced to accept positions of responsibility in them.

We have established an Academy for Osteopathic Clinical Research; but we seem to have made that too top heavy with erudition, in its early days when the spirit of the profession was not strong enough to bear such a load.

What then?

Assume that we are passing through a period of digestion. It was inevitable from the start. We had to take on the learning of the world—and now we have to digest it. We had to respond to all of the ideals of scientific testing, and now we have to digest and apply them. We shall have to increase the strength of our osteopathic digestive juices. We have eaten rather too rapidly of the fruit of the Tree of Knowledge, and now we need some exercise, some calmness to digest them. As Dr. Still says, every cell has a vote in every drop of secretion. Every practitioner should add his mite to our OSTEOPATHIC knowledge. Our internal secretion of enthusiasm must back up our digestive juices of osteopathic study of cases, OSTEOPATHIC records, OSTEOPATHIC research, OSTEOPATHIC co-ordination of knowledge; so that finally our new students may be properly digested by them. Our concentrated digestive juices have been drawn from other than osteopathic sources, if not wholly, at least in large degrees.

I am not the man to say that we should do these things, without first trying myself to do them. I have done what one man without other genius than faith-

fulness could do. Co-ordination of disease processes with osteopathic fact was attempted in the Anatomical and Physiological Pictures of Diseases. The gathering of statistics was attempted as a Bureau of Statistics for the A. O. A., and was carried out in a tentative way in two subjects, asthma and appendicitis, until the appropriation failed. A study of the mechanics of lesions on purely theoretical ground was attempted in Kirksville, to which I gave up a year of my life; and this has been offered to the A. O. A. Journal. A study of the Mechanical Efficiency of the Body has been undertaken and is ready to be submitted. The Principles of Osteopathy were also formulated so far as possible, and is ready to be submitted. Two of these works, the Principles and the Technic have been offered to the Institute, but have been sidetracked by the more important work of that body on the subjects of blood analysis, germ resistance, etc.

No man may criticize who does not try to help. With apologies for the use of the first personal pronoun, I write the above paragraph simply to show that where I have been criticized, I HAVE tried also to work.

TECHNIQUE

At the Next National Convention

I am planning to give a week's work, in the evening and afternoon hours that will not conflict with the Convention.

The work will cover specific technique and correction of lesions for every articulation in the body.

I have developed this non-painful, immediate correction of lesions and gave some of the work to a small class at the Convention in Kansas City. They were enthused over it and have been requesting me to hold a class at the next National Convention.

We have progressed wonderfully in surgery and digital oral manipulation, but not one new thing was shown in the way of spinal correction.

The cry during the whole Convention last August was for more technique. We have developed it for you.

You can now have something new, that is, less back-breaking and more rational adjustments, which means more specific results.

The average treatment is much shorter. It follows the Old Doctor's maxim, find it—fix it—and leave it alone.

IF THIS APPEALS TO YOU, I would advise you to write at once. The class will be limited, so that I may give each one the required time in which to have the work absolutely perfect.

DR. C. L. THOMPSON
Citizens Nat. Bk. Bldg., Alameda, Cal.

APPLIED ANATOMY

By F. P. MILLARD, D. O., Toronto, Ont.

"The mill can never grind with the water that has passed."

We, who have been to the mill with our grists and have carried away our refined products, have long since formed our perspectives of the old settings. The pictures we drew, imaginary though they were, still linger with us. We promised ourselves that each year we would carry out some special work, characteristic of our own inclinations, and we were sure that in ten or fifteen years we would make our profession that much stronger. The first years were those of worry and less of work, the next, work and less of worry. So time drifted by and we reached the first decade. More years rolled by and we were still not accomplishing all that we dreamed. This, in brief, is the story of the early graduates.

The noble example of our professor, Dr. Marion Clarke, in writing the first book on Applied Anatomy has never been followed up by those who promised themselves that time would find more works of this nature. Some proposed cross-section work. One man did his bit. Others have tried various special dissections to enhance regional work, but through the stretch of years no one has come out in the front and done the work that is most needed. If we are to hold the reputation of being skilled anatomists, we have yet to produce texts that will reflect credit upon our profession.

We are using borrowed books, so to speak. We have left the field of applied anatomy with one single monument, basking in the sunlight of bygone memories. Lack of appreciation and refusal of support has caused a worthy author to lay aside his work, and to dwell in pastures of private resourcefulness. And who would blame this man for so doing?

History repeats itself. The old-time enthusiasm of early days is again approaching in the distance. We are beginning to realize that we have almost lost the "Pearl of Great Price." We watch others publish books that bear not the ear-marks of our special applications. We read no medical texts that refer to the grosser tissue lesions as we do, or that interpret these lesions, as we interpret them. We reason along a line foreign to that of the regulars. How are we then going to improve without text books at school and reference books after we are out in practice?

We have occasion to refer to the region of the neck, for instance, and we pull down our anatomies, Gray, Cunningham, Morris, Quain, etc. Do we get what we want, No! Decidedly no. We long for an exposition of the subject. We know not

where to turn. What are we to do? Simply work out our own connections. This is not so easy as it looks. We are not always within reach of a dissecting room, and if we were it takes time and patience.

Why have we neglected this important phase of the work? No good reason whatever. If we accomplish nothing else at the Columbus Convention than that of emphasizing the importance of Applied Anatomical work, our convention will not have been held in vain.

We have in our profession men who are expert dissectors, men who know applied anatomy. Why not set these men at the task of compiling text books that will reflect credit upon our schools? Is there anything of more importance? How our men would grow in knowledge if they had daily access to a thousand paged book on Applied Anatomy. In the course of a few years our entire profession would become stronger for having become familiar with every phase of this applied work.

The student would grasp at such a work and the graduate would make it his boon companion.

We can only familiarize ourselves with this special phase of our work by daily referring to a work of this nature.

We have the time and the knowledge, but we have not had the courage to tackle the job.

Let us not wait another decade to do what might be done now.

We have men working along the line of specialties who could contribute the chapters on certain special subjects. If several were assigned specific subjects, the work would progress in unison and within two years it could be completed.

PREPAREDNESS FOR PRACTICE

(Philadelphia Evening Bulletin)

Expensive Training For Doctors

A first reading of the address which Dr. Baldy, president of the State Board of Medical Education and Licensure, delivered to the physicians composing the Clinical Society of Mount Sinai Hospital, when he said that the youthful practitioners of medicine achieve a polishing off process in education by killing people, prompts a feverish desire to ring the Doctor up for further particulars. Dr. Baldy was saying that internes in many hospitals—the young medical graduates who get their first practical experience in the wards—are imperfectly trained. "Many will be turned loose," cried he, "to do just what you and I did—kill people while gaining experience!"

A confession like this must involve a shock for those who still cherish a high faith in doctors. The number of medical students in this State is very large indeed. If each vernal medico at the beginning of his career killed only three persons the aggregate of each year's fatalities would compare with that of a good sized drive on the Russian front. But if Dr. Baldy is to be taken literally, and if the defects in medical education in this State are so general, Dr. Baldy's board is manifestly obligated to suggest something definite in the way of reform. The chairman will be expected to act up to his criticism.

Dr. L. J. Bingham, Ithaca, N. Y., says: "OSTEOPATHIC TRUTH is bound to help make better osteopaths of our young graduates and the paper deserves whole-hearted support from us all. I will do the very best I can to contribute something from time to time."

Another Letter From a D. O. Which All Doctors Should Read. It Will Pay Them to Do So.

"Your circular letter was read and approved. I not only prescribe ROMAN MEAL but eat it myself and find it delightful in every way as well as effective. I think you have the ideal health food.

Very truly,

R. V. KENNEDY, D. O.,
Charleston, S. C."

I shall be pleased to mail the circular letter to physicians to which Dr. Kennedy refers or any other information regarding ROMAN MEAL upon receipt of application. ROMAN MEAL positively relieves constipation or we refund its cost.

ROBT. G. JACKSON, M. D.

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TORONTO, CANADA

MENTAL BOOMERANGS

By M. ADDINGTON BRUCE

Abusive words are mental boomerangs. They may at times hit the mark against which they are hurled, but they are far more likely to fly back and hurt the person hurling them.

Nay, it is possible to say more than this. With confidence it may be affirmed that abusive words are always more damaging to the abuser than to the person or objects abused.

They affect the abuser adversely in many ways. For one thing the violence of his language at once brings into question the soundness of his judgment. For another, it drives friends from him in terror lest his abusive tongue may some day be turned against them.

Besides which, character defects multiply with a tendency to be abusive. This phase of the case is well stated by Alfred W. Martin, when he says:

"The temptation to indulge in vituperative epithets is strong and subtle, but it is always a positive detriment to the progress of truth and to the moral development of him who yields to it.

"For not only does this practice develop in him the evil qualities conveyed in his invectives, but it also reduces his capacity for dispassionate judgment, besides making him increasingly unsympathetic, uncharitable and unlovely."

Call to mind your own acquaintances. If there is one among them addicted to abusiveness, and if you know his personal history, you will appreciate how true this statement is.

You will recall that, in younger days, he was more broadminded than at present, more sympathetic, more alive to the good that is in men and to the beauty of life.

He could smile without a touch of sarcasm in the corners of his lips. He did not forever go about looking for things to snarl at, men to sneer at.

But, even then, he was inclined to speak intemperately of men and things he disliked. Gradually this habit grew. With its growth, as you now planily perceive, there was a gradual poisoning of his whole character.

Today he is not a man you admire. You deplore his bitterness of mind and hardness of heart, ugly products of the vice of abusiveness.

Be warned by what has happened to him. If you let yourself become abusive, you may be sure that you will change as he has changed, and in time become a lonely, hard, unhappy man.

You may have occasion to criticize, perhaps even to condemn. But never let your criticism or condemnation, be vituperative. Set yourself on record by well reasoned, careful worded statements of belief, not by the facile, danger-

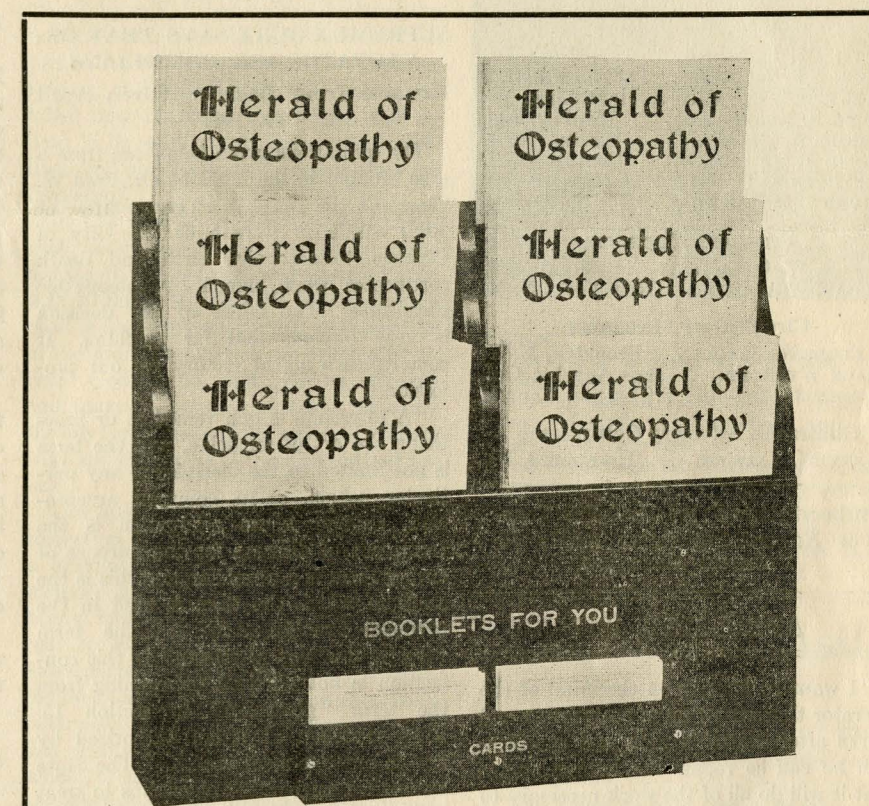
ous, unreasoning method of abusive words.

Abuse seldom carries conviction to other minds. It tends, rather, to create sympathy for the object of the abuse. In this way many men and causes have actually profited by the hard names they have been called.

But those resorting to abuse do not profit. In some fashion there is always a reaction that is harmful to them.

Therefore let abuse have no place in your life habits. If, unhappily, it already has a place, pluck it out. Begin the new year with the firm resolution that henceforth you will abuse no man, no thing.

Stick to this resolution, and you will find yourself expanding mentally and morally as you have not done since first you fell into abusive ways.—BOSTON GLOBE.



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APRIL-MAY, 1917

"I want to impress on the mind of the operator that WHEN HE IS COMPETENT and works after Nature's plan and specification he can so repair the human engine that it will do all of the work necessary to animal life. When you have no surgical wounds or injuries the result will be just what you expect, no more, no less. WHEN YOU HAVE ADJUSTED THE HUMAN BODY to the degree of absolute perfection, all parts in place, none excepted, THEN PERFECT HEALTH IS YOUR ANSWER. Nature has no apology to offer. IT DOES THE WORK IF YOU KNOW HOW TO LINE UP THE PARTS; then food and rest are all that is required.

The osteopath who succeeds best does so because he looks to Nature for knowledge and obeys her teaching, then he gets good results. A few years spent in the school of Nature teaches the osteopath that principles govern the Universe, and he must obey all orders or fail to cure his patients.

"We say DISEASE when we should say EFFECT; for disease is the effect of a change in the parts of the physical body. Disease in an abnormal body is just as natural as is health when all parts are in place.

"We should know the normal places of

all bones, and their uses; how one is attached to another; where blood and nerve supply come from and how. If we do not, we must learn or we will blunder and fail, because no variation will be allowed if we get health.

A. T. STILL.

NOTE: the above is from Dr. Still's book "OSTEOPATHY, RESEARCH AND PRACTICE."

Have you bought your copy yet?

SUPREME COURT SAYS THAT OSTEOPATHS ARE PHYSICIANS

Extracts from Decision Given April 19, 1917

The quotations given below are from a case brought in the name of Dr. Fred W. Gage for the purpose of compelling the Vital Statistics Bureau of the City of Chicago to recognize birth and death certificates when signed by osteopathic physicians. The effect of the decision is very obvious and far reaching. It constitutes a signal victory for our profession.

"A physician is one versed in or practicing the art of medicine, and the term is not limited to the disciples of any particular school.... In common acceptance, anyone whose occupation is the treatment of diseases for the purpose of curing them is a physician and this is the sense in which the term is used in the Medical Practice Act.... The term "legally qualified physician" in this connection is not different in meaning from the term "physician" in section 15. Each means a physician authorized by law to practice medicine.... The State authorizes osteopathic physicians to treat human ailments without the use of medicine and without performing surgical operations, and under such authority they may treat cases of pneumonia, gastritis, rheumatism, paralysis and other diseases.... If such physician is legally qualified to treat the disease there is no reason to suppose that he is not legally qualified to give the medical certificate required by the act. It would be a peculiar provision of the law which would authorize the physician to treat the disease but not to certify the death.... We hold that the word "physician," in the Vital Statistics act, is not limited to any particular school of medicine but includes osteopathic physicians."

Dr. J. C. Garrett of Ypsilanti, Mich. says:

"Three Cheers for Pure Osteopathy, as taught by Dr. A. T. Still, and as heralded by your splendid little paper. I hope it may grow bigger and greater, as the years go by. Success to you."

WAR STATUS NOT WITH REFERENCE TO FITNESS

EDITOR OSTEOPATHIC TRUTH:

I am sending you the enclosed without comment. If you have any suggestions for the further action of the Committee I will be glad to hear from you.

Most respectfully,

E. R. BOOTH.

M. D.'s Have Bottled all Privileges

April 9, 1917.

Hon. Newton Baker, Secretary War,
Washington, D. C.

MY DEAR SIR:—Many osteopathic physicians are volunteering their services in defense of their country. Some of them have already been called to positions in the Medical Department. "Dr. L. S. Meyran of Baker, Montana, was appointed by the Captain of the Militia Company at that place to examine applicants. Immediately word came back from the headquarters at the Capitol that an osteopath could not be accepted as an examiner."

Our people are not seeking those positions but they are willing to serve in any capacity for which they are fitted. Their special training in making physical examinations and their superior success as life insurance examiners, insure aid which our country should not ignore at a time when the best service of every man for every department should be encouraged.

An opinion on this point by the proper authority is most respectfully solicited at the earliest possible moment.

Most respectfully,

E. R. BOOTH,

Chairman Committee on National Affairs
of the American Osteopathic Association.

WAR DEPARTMENT

OFFICE OF THE SURGEON GENERAL
Washington

Dr. E. R. Booth, April 23, 1917.

601 Traction Bldg.,
Cincinnati, Ohio.

DEAR DR. BOOTH:—

In reply to your letter of April 9th addressed to the Secretary of War and received in this office by reference, I am directed by the Surgeon General to inform you that only those persons having the degree of Doctor of Medicine are eligible for commission in the medical service of the Army.

He regrets that under the circumstances the Department will be unable to avail itself of the services of those referred to in your letter.

The Surgeon General wishes me to express his appreciation of the proffered services and the patriotic spirit which prompted you to offer them.

Yours very truly,

R. B. MILLES,

Major, Medical Corps.

THE MOST IMPORTANT MATTER EVER PRESENTED TO OUR PROFESSION—HOW CAN WE BEST HELP OUR COUNTRY?

The circular letter from Dr. H. L. Chiles, under date of May 23rd, reprinted in full upon the first page of this issue, is easily just what he claims it to be,—"THE MOST IMPORTANT LETTER YOU HAVE EVER RECEIVED." The closer the situation is analyzed, the more dangerous it appears, and the future of our profession seems to be resting upon the decision which we make at this time. Either we must go FORWARD to the logical fulfillment of our destiny, and furnish to our Country, in the present crisis, the ministrations which we best know how to give, or we must bow to the power of entrenched bigotry and arrogance and permit ourselves to be forced into places of greatly lessened usefulness. The question is squarely up to us, as a profession. Either we must UNITE upon a national policy, stand squarely behind it and work ceaselessly for its adoption, or we must waste our splendid strength upon individual efforts and finally witness the undermining and possible destruction of our professional organizations and colleges. WHICH WILL IT BE, FELLOW OSTEOPATHS? THIS CONCERNS EACH ONE OF US, AS INDIVIDUALS, AND MUST NOT BE LEFT FOR A FEW TO WORK OUT.

United Effort Necessary

It has been gratifying to find the various State and local associations ready to serve in the defense of their country by so quickly offering their services to the State and Federal authorities. There has never been any question whatsoever as to the LOYALTY of the osteopathic profession toward their country, or their willingness to lay down their lives, when necessary in defense of the flag. No one dares to question it. And no one should have the power to restrict the full usefulness of our profession in times of such national emergency as the present.

The existing medical rules and regulations of the Army and Navy and the National Red Cross effectively prohibit the osteopathic physician from proper participation in the work of caring for the sick and wounded. Not only that, but our younger osteopaths are SUBJECT TO DRAFT FOR SERVICE IN THE TRENCHES, instead of the larger service open to the trained physician. Should the war be continued for several years, the older among our practitioners may also be drafted for regular enlistment and likewise deprived of the opportunity for the greater service.

According to Washington advices under date of May 25th, Mr. Herbert C. Hoover (proposed Food Dictator for the entire

world) says "this country faces a war that will probably last from two to five years." Whether or not this may be true, time alone will tell, but the future is so pregnant with important possibilities that sound judgment demands "preparedness" for all eventualities.

According to the above advices, also, Dr. Franklin H. Martin, of the General Medical Board, told of sending physicians to France and England. "In both countries," he said, "the war has depleted the medical staffs, and the need that America furnish more is imperative." "In one retreat, the British lost 267 doctors, all killed near the same spot within half an hour," he said, "and as a result 5000 men lay on the ground unattended for 72 hours."

In the face of possibilities like these, shall the osteopathic profession be found lacking in the courage and energy necessary to break through the shackles which bind it and prevent its full participation in the proper defense of our beloved country? God forbid, and give us strength and unity of purpose sufficient to carry the day for the sake of the suffering soldiers who are calling us to service in their behalf.

The question of how to go about the correction of unfair restrictions has been a puzzling one. Many State and local societies have volunteered their services. Many letters and telegrams have been sent to Washington by individuals and State Secretaries. But the basic trouble, the fact that such matters were effectively buttoned up years ago, by interests identified with or controlled by the dominant school of medicine, has not as yet been attacked upon any intelligent and united basis. That opportunity is NOW.

Shrapnel or Great Guns—Which?

If you were going to put out a fire in a building, would you at once proceed to play the hose all over the building or would you play it specifically upon the parts on fire?

If you were proposing to capture a fortress covered with concrete and steel armor, would you use a Gatling-gun, a hand-grenade, or a sixteen-inch shell? And after having decided which type of ammunition to use, would you turn your guns on one particular spot and try to punch a hole through it, or would you shoot all over the place in an effort to crumble it down bit by bit?

If you were the various State and local Societies, would you think it wisest to attempt to secure recognition as Osteopathic Military Physicians and Surgeons by passing resolutions, writing letters, and sending telegrams as individual organizations, or would you figure that such effort would necessarily be wasted, and that THE ONLY POLICY POSSIBLE OF SUC-



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"Tonsils and Adenoids: Treatment and Cure," \$1.00.

"The Tonsil and Its Uses," \$1.00.

By RICHARD B. FAULKNER, M. D. (Columbia University)

Everybody should read these books. Written from the physician's standpoint in preference to that of the surgeon.

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ALERT PROGRESSIVE ENTHUSIASTIC OSTEOPATHIC

THAT IS THE

Kansas City College
of
Osteopathy and Surgery
TROOST, AT 15TH
Kansas City, Missouri

CESS would be the united effort of the ENTIRE profession throughout the Union, acting through a SPECIAL COMMITTEE which could attack the difficulty via Washington?

It seems to the writer that the profession could gain much from pondering the foregoing questions.

A careful study of the existing medical regulations shows that the whole matter is controlled from Washington, either by Congressional enactment, or by rulings of the War and Navy Departments. Individual effort therefore seems not only useless but may actually prejudice the situation. If there ever was a time for a NATIONAL POLICY, that time is the present, RIGHT NOW.

The British osteopaths have been obliged to sit back for nearly three years, because of the entrenched medical opposition which prevented their acceptance at the outbreak of the war. The House of Commons has now become sufficiently interested to institute an inquiry as to WHY the osteopaths were turned down when they volunteered, and it now begins to look as though their services would finally be accepted, simply because of the unique and highly successful quality of their work as physicians. Shall we of the United States likewise wait for three years until the extremities of the situation might require our services, or shall we NOW go after our rights and the fulfillment of the desire of our President that "each man must play the part for which he is fitted?" The answer remains with each one of us, and OSTEO-PATHIC TRUTH hopes and believes there are no "slackers" selfish enough to remain inactive while the future of our profession is so clearly in the balance.

At the meeting of the New York State Society on May 11th and 12th, the initial steps were taken to formulate such a national policy, and a large committee was appointed, representing many states, to consider the matter in all its phases. Certain recommendations were made to the Trustees of the A. O. A., the outcome of which has just been announced in the letter from Secretary Chiles, under date of May 25th, "THE MOST IMPORTANT LETTER YOU HAVE EVER RECEIVED."

The names of our enlarged Committee on National Affairs are such as to carry the entire confidence of every one within our ranks. These men are pledged to ACTION, and action which will be limited only by the support which they receive from you and from me, Fellow Osteopaths. Let us back up this Committee to the limits of our energy and finances, and cheerfully undertake the doing of such work as they may henceforth assign to us.

At a Special Meeting of the Massa-

chusetts Osteopathic Society, held in Boston on May 26th, it was unanimously voted

"That the Society endorse whatever action might be taken by the Committee on National Affairs of the American Osteopathic Association, feeling entire confidence in their ability to formulate a policy and secure its adoption."

Will not YOUR society take similar action, and thereby help to secure an enthusiastic endorsement of the work of this special Committee? We hope so.

Don't Be a Slacker

If you are a member of the A. O. A., you have already received one of Dr. Chiles' letters, with various enclosures. If you are NOT a member of the A. O. A., it is high time that you appreciated your present responsibilities to your profession and to humanity by enrolling at once as a member of the organization, thereby helping YOUR profession to secure the rights which simple humanity demands it shall and must secure for the benefit of sorely wounded, crippled and paralyzed soldiers who need our ministrations, both at the front and in larger base hospitals here at home.

To refuse to support the American Osteopathic Association in this great effort must brand you as a professional "slacker." It makes no difference how many kicks you have had in the past, regarding mistaken policies, inactivity, machine politics, or what not; such things are all ancient history at this time, and simple patriotism demands that they be forgotten in the interests of the common good.

Think this over, Dr. Non-Member and send your \$5.00 to Dr. Chiles for membership from now until the great Boston Convention of 1918. An enlarged American Osteopathic Association, with 5,000 or 6,000 members, can accomplish results impossible to a smaller organization. Your profession is calling. Will you hear? Join the A. O. A. at once, for God and Country.

OSTEOPATHIC TRUTH stands back of this most excellent Committee on National Affairs, and will support, to the best of its ability, WHATEVER MEASURES MAY SEEM BEST TO THEM. This is not a matter for State and local societies. It is essentially and emphatically a matter for a centralized Committee such as has been appointed, a committee of "live-wires" who are very much alive to the situation.

This is the ONE BIGGEST OPPORTUNITY that our National Association has ever had and it is up to each and every one of us to support, to the limit of our energy and our resources, the constructive work of this most important Committee.

—F. A. C.

SUBSCRIBE NOW

Subscribe for your Liberty Bond now. It is as patriotic an act as you can do. Secretary of the Treasury McAdoo says: "The greatest immediate service the American people can render in this War for universal liberty throughout the world is to furnish the means for its vigorous prosecution. This bond issue is the first step. I earnestly bespeak the cooperation of every citizen throughout the length and breadth of the land in this great service of patriotism."

Any bank, trust company, bond house and many department stores will take your subscription for your Liberty Bond. Make the best financial and patriotic investment of your life today.

At the semi-annual Convention of the New York Osteopathic Society, held at the Hotel Astor on May 11th and 12th, the following resolution was unanimously adopted:

Resolved, That this Convention recommend to the Trustees of the American Osteopathic Association the acceptance of the invitation extended by Boston for the 1918 Convention.

ZONE THERAPY

After three years of experience, and one year of teaching and lecturing before societies and institutions,—owing to an increased demand, I offer a practical correspondence course of instruction in the methods of this new discovery.

This will include six months' privilege of an information bureau.

A knowledge of Zone Therapy has proven to be of value to every osteopath. If interested, address

REID KELLOGG, D. O.

194 Main St. - Woonsocket, R. I.

Massachusetts College of Osteopathy

Fourth and Otis Streets

Cambridge, Massachusetts

Four year course.

Practicing osteopaths on the faculty.

Postgraduate facilities the best.

Excellent new hospital connected.

SEND FOR CATALOG

AMERICAN OSTEOPATHIC ASSOCIATION

Committee on National Affairs

O. J. Snyder, Chairman, Pennsylvania; C. F. Bandel, New York; H. E. Bernard, Michigan; Emmons R. Booth, Ohio; W. C. Brigham, California; H. S. Bunting, Illinois; W. L. Buster, New York; W. E. Elfrink, Illinois; Joseph Ferguson, New York; C. E. Fleck, New York; George W. Goode, Massachusetts; C. S. Green, New York; A. G. Hildreth, Missouri; Clarence V. Kerr, Ohio; G. D. Kirkpatrick, Washington, D. C.; G. W. Riley, New York; Alice P. Shibley, Washington, D. C.; R. K. Smith, Massachusetts; Geo. A. Still, Missouri; D. L. Tasker, California; Geo. F. Whitehouse, Illinois; H. L. Chiles, Secretary, New Jersey.

Realizing the Committee must know what support it can depend upon, I hereby subscribe the sums indicated below to aid in securing the right for osteopathic physicians to serve our armies in time of war.

Enclosed herewith	Will pay June 15th	Will pay when recognized
\$25	\$25	\$50
\$10	\$10	\$25
5	\$5	\$10
\$2	\$2	\$5

Name
Address.....

WHY DON'T YOU, THEN?

You, Mr. and Mrs. Average Citizen, are saying, both publicly and privately, that you want to do some patriotic service for your country. There are things you know you cannot do, you declare, and you ask in just what line your work for the flag and the nation shall be directed. You must and will do something, you assert.

Why don't you, then?

There is just now offered one of the finest and most practical opportunities imaginable for serving your country and its allies in the work of "making democracy safe for the world." The whole of that great gospel is found in the "Liberty loan," that is giving Uncle Sam the power to fight and to help others fight against absolutism. When you take a share in the "Liberty loan," you are doing your "bit" as truly as is the soldier on the field or the sailor on the sea. It is only a difference in the kind of service.

And this is one of those very remarkable cases where service and self-interest are united. Whether the patriot looks for his own advantage, or not, he will find it. The individual who buys a "Liberty loan" bond is loaning his money to the best government on earth, with the finest security behind it, and at a rate of interest that is worth while and may be larger if higher-paying bonds are issued, the

present ones having the right of conversion into the new.

It is very essential to the United States and the cause of democracy that these bonds be oversubscribed. You, American citizens, are desirous of doing your part in the war for liberty and humanity, you say?

Why don't you, then?—BOSTON POST.

DR. GEORGE STILL'S NEW ORGANIZATION, THE AMERICAN OSTEOPATHIC RELIEF ASSOCIATION, SEEMS TO HOLD VERY PROMISING PROSPECTS.

WHY NOT ORGANIZE IN SUCH A MANNER THAT POPULAR SUBSCRIPTIONS MAY BE SECURED FROM PATIENTS AND OTHERS WHO ARE CONSTANTLY ASKING HOW THEY CAN HELP THE OSTEOPATHS?

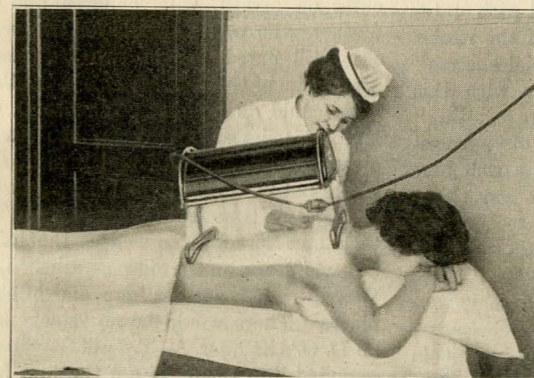
WHY NOT MAKE THIS A NATIONAL ORGANIZATION WHOSE ACTIVITIES ARE SOMEWHAT SIMILAR TO THE RED CROSS IN ITS POPULAR ASPECT?

HUNDREDS OF OUR PATIENTS WOULD BE GLAD OF A CHANCE TO CONTRIBUTE UPON SUCH A BASIS.

Graduate of A. S. O., member A. O. A. now located in South; licensed in Iowa and Illinois; wishes to assist or take charge of practice during the summer.

Address, O. DENSMORE, Ft. Myers, Fla.

Get One On Ten Days' Free Trial



Here's a chance for you to test out one of the latest and greatest therapeutic developments—a device for the local application of light, hot air, and steam for the relief of pain, congestions, hypertension, etc.—the Burdick "Radio-Vitant" Applicator.

Its range of usefulness makes it truly the Universal Method. Try it and you'll appreciate its real practical, therapeutic value.

Visit Our Office

If you are near enough to call at our Chicago office, 15 E. Washington Street, we shall be glad to demonstrate not only this Applicator, but our famous Light-Bath Cabinets as well.

Get Our Free Book

Just drop us a card and we'll mail you, free, a copy of our new "Manual of Physiologic Therapeutics." Valuable and interesting. Treats the subject of Light and Hot Air Therapy in a comprehensive manner.

Send No Money

We want you to test this Applicator yourself. Just ask for one. Test it. Observe your results. Keep it ten days. Then, if you don't think it worth the price—\$35.00—send it back. If you want to keep it, send only \$21.50. That's our special introductory price. It will be withdrawn when we have placed the limited number of Applicators set aside for this purpose. So don't wait. Get yours now.



BURDICK CABINET CO. 1700 Madison Ave. MILTON - WIS.

Relieving a Case of Neuritis

A CHIROPRACTIC DOCTOR FACTORY

(FROM JOURNAL A. M. A.)

The so-called "American University" is an excellent example of the travesties on education which are the direct result of the inexcusable custom in most of our states of granting charters to "educational" or degree-granting institutions without first making inquiry regarding their ability or facilities for furnishing an education. Do the words "school," "academy," "college" and "university" really stand for educational institutions, or do they not?

So far as can be learned, the American University owns no college building, no laboratories, no dispensaries and no hospitals; nevertheless, it brazenly professes to prepare "doctors" to treat all classes of human ailments. Its only habitation thus far discovered is a small suite of rooms on the third floor of an old office building in Chicago. This building bears no sign to indicate that it is a university, and in the directory, high up on the wall, in the entrance to the building only a close search reveals the sign which indicates that the building houses so important a tenant! When the investigator wends his way to the third floor he discovers a door on the glass of which he reads:

"American University, 310-312, American College of Mechano-Therapy. F. S. Tinthoff, S. J. Tinthoff, W. L. LeBoy, M. D., E. Juhl, M. D."

Possibly the American College of Mechano-Therapy is another "department" of the "American University." At any rate, from reports it is quite evident that it is "a bird of the same feather."

Our present concern with the American University is in regard to its "department of chiropractic," which issues a pretentious announcement of sixty-four pages. This announcement sets forth such courses of instruction as it professes to give, contains many testimonials regarding the princely incomes being earned by chiropractors; shows a facsimile of its "beautiful diploma, handsomely lithographed," which is further described as having a prepossessing appearance which will add to the professional dignity of any office," and contains numerous other catch phrases intended to attract the dollars from the credulous and unwary.

What use, indeed, would this institution have of buildings, laboratories or equipment, since it makes no pretense of giving a resident course? In fact, its announcement does not mention such a course, but lauds its "extension," or home study, course, by which chiropractic can be "more easily acquired than the other forms of healing."

Much stress is laid on the ease with

which this home study course may be obtained. In fact, no preliminary education seems essential. Says the announcement: "You do not need a collegiate education to render you fit to study chiropractic. A common school education is all that is required." Even a common school education would not appear to be necessary for the course offered, and it would be a safe guess that no student was ever rejected for the lack of it. Says the catalogue: "It does not require the years of education needed in other lines;" but some "students complete the work in four months." Even then a student need not spend all his time in study, but can "pursue his ordinary occupation while studying the course."

The greatest activity of this "university" is in its mailing department, and it is evidently doing a land office business. Within three months' time one of its "prospects" received five voluminous communications, containing altogether forty-five enclosures, including announcements, testimonials, booklets, varicolored leaflets, etc. Extensive use is made of the system of "follow-up" letters containing the usual catchy subterfuges for separating dollars from the unwary, such as offers of courses costing \$100, marked down to \$68.75; allowing fees to be paid in instalments of \$25 marked down to \$12.75, or of \$15, marked down to \$8; offers of commissions for new students, and certificates offering free the first five lessons, if enrollment is sent in by a certain date.

The announcements abound with statements calling the attention of the reader to the possibilities of "financial success" if he but invests his money with this school; of "the rewards that are awaiting" his command; the possibilities of "successful results" and of "reaping a rich harvest;" the "opportunities for any chiropractor to earn from \$1,200 to \$12,000 per year;" that "chiropractic may be practiced with profit and success;" that it is "a most pleasant and profitable profession," etc.

There are also the usual lot of comments running down physicians and the practice of medicine; references to "noxious and poisonous drugs;" statements that "physicians are abandoning the old form for chiropractic," etc.

What, indeed, is the use of spending ten or eleven long years in high school, college, medical laboratories, dispensaries and hospitals, with the expense of thousands of dollars, which such a course entails, when in four months of home study, while one is "pursuing his regular occupation," and for only "\$100, marked down to \$68.75," he can secure from this institution a "beautiful diploma, handsomely lithographed," which (he is led to believe) will make him eligible to treat

all classes of human ailments and to "reap a rich harvest" by exacting large fees from his credulous patients!

Dr. C. E. Hulett, of Topeka, Kansas, President of the Board of the Kansas Board of Osteopathic Examination and Registration, writes: "We surely need a publication like OSTEOPATHIC TRUTH to let the public know there are some osteopaths not ashamed to admit they do not need salts and drugs of any kind in their practice. I have been here nineteen years and was the author of the first osteopathic law in Kansas in 1901. That law reads 'The osteopath shall not use drugs.' So far I have not asked the privilege of the Harrison Act and when any D. O. does he will have to be very careful or he will use more morphine and cocaine than the M. D.'s. All the clean M. D.'s are trying their best to get along without these drugs and some of our people are doing the same, while others are using them instead of trying to stop pain as they were taught. Osteopaths should not give the public the idea that they are surgeons and physicians, the same as the M. D.'s. I am glad to see Dr. Hildreth's statement about the cure Dr. A. T. Still made on his wife's eyes. I know this to be true, for I have known the Doctor since 1888, and also have known Dr. A. T. Still since May, 1888, and I have many good reasons for being an osteopath."

Dr. Still performed some wonderful cures on myself, wife, children and my mother, who was a cripple for two years. Dr. Still cured her in two treatments, after some of the best M. D.'s in Southern Iowa could do nothing. If more D. O.'s had learned Osteopathy for the reasons given by Dr. Hildreth and myself, they would not be trying to fool the public and at the same time fool themselves and ruin their own practice as well as that of D. O.'s who stand on the old platform of 1892. I have made a success here and in other places. There would be no "slackers" if all D. O.'s had Dr. A. T. Still Osteopathy pounded into them. I am the first four-year man in Kansas and I am not as afraid of the Chiro doing Osteopathy up as some of our people who call themselves osteopaths may do by trying to fool the people in telling them "I know Surgery and Medicine."

"I am limiting all the lay literature on my reception-room table to pure unadulterated osteopathic literature and am taking the professional publications for my own reading. My subscription to OSTEOPATHIC TRUTH now makes me the proud reader of them All."

ARTHUR TAYLOR, D. O.,
Stillwater, Minn.

ROCKY MOUNTAIN OSTEOPATHIC CONFERENCE

Estes Park, July 9th to 12th.

The Rocky Mountain Osteopathic Conference will be given at Estes Park under the auspices of the Colorado Osteopathic Association, beginning with an evening session on July 9th, and ending at noon July 12th. The meeting is to be an interstate one; the State Associations of Kansas, Nebraska, Oklahoma, Texas, New Mexico and Wyoming are lending their active cooperation, and a large attendance is expected from these states. In addition, an invitation is extended to every osteopathic physician in the United States to attend the meeting and enjoy the unexcelled mountain scenery and mountain climate, and the excellent program.

The A. O. A. program committee are in touch with the big men of the osteopathic profession, several of whom have already been secured for the program; others will be obtained. The program will be the best that has ever been given outside of a national meeting. It will be confined strictly to practical subjects, to be announced in detail later. The meeting will consist of forenoon and afternoon sessions. Each afternoon the doctors will be taken on one of the many sight-

seeing trips, for which Estes Park has a national reputation.

Estes Park needs no introduction to the average tourist. It is located in the heart of the Rocky Mountains, seventy miles northwest of Denver, accessible by auto roads through two of the most beautiful canyons in the state. It is about 100 miles in area, surrounded by snow-capped mountain peaks, its glaciers, forests, canyons, trout streams, and lakes,—all accessible by 150 miles of auto roads, and many well-built trails, to say nothing of its delightfully cool climate, making it an ideal place for summer rest and study.

Many of the physicians are planning to make the trip with their families by auto, and remain after the meeting to spend their vacations. In addition to the excursion rate from Denver, a reduced rate has been secured for the meeting, from Denver to Estes Park; likewise, a greatly reduced hotel rate, both for the meeting and for those who intend staying longer. For further information address, Dr. F. A. Leudicke, Empire Bldg., Denver, Colorado.

Dr. G. W. Pauly of Colorado Springs, Colo. writes:

"Am pleased with your paper."

HOW ABOUT IT, CALIFORNIA?

This is from the pen of a returned Easterner who thinks that Californians are the greatest boosters on earth:

The Californian gets up at the alarm of a Connecticut clock, buttons his Chicago suspenders to his Detroit overalls, washes his face with Cincinnati soap in a Pennsylvania pan, sits down to a Grand Rapids table, eats Kansas City meat and Minnesota flour, cooked with Indiana lard on a St. Louis stove, puts a New York bridle on a Colorado broncho, fed with Iowa corn, plows a five acre farm covered by an Ohio mortgage with a Chattanooga plow; when bedtime comes he reads a chapter from a Bible printed in Boston, says a prayer written in Jerusalem, crawls under a blanket made in New Jersey, and gets up in the morning to peep at a beautiful sky useful only to assist in bringing out good photographs made by Rochester kodaks, after having been kept awake all night by

SAND FLEAS

the only home product of his damned old state.

"I do not want to miss any of the numbers."

DR. ANNA E. GELANDER,
Manilla, Iowa

THANK YOU!

We are very grateful for the patronage of thousands of physicians who are using the Huston-Baird Combined Pessary and Supporter and our now justly celebrated Obstetrical Pan and our Huston Akouophone. Physicians now know that these instruments increase efficiency and income.

Uterine Displacements

positively corrected by the Huston-Baird Air Cushion; also procidentia prolapsus, retroversion, etc.

This device is sold on an absolute guarantee

The price to physicians is \$5.00 complete or \$3.00 without the shoulder attachments. Send check with order and we will refund the money if you are dissatisfied after faithfully using the outfit for ten days.

Male Impotence

We send full particulars of a new successful mechanical treatment. Write for literature and positive proof.

CATCH THE THIEF

Reward offered for arrest

Notify us if you have lost your

HUSTON'S AKOUOPHONE

This is the Only Differential Stethoscope. Contains an Acoustic Rheotome that controls, exaggerates and enables you to compare sounds. Makes sure of pathological character and clinches diagnosis.

Free Trial Offer—Send \$3.50 with order, use for 10 days, return if dissatisfied, and we will refund your money.

Over 2,000 in use this last year

Price, \$3.50

Carry in vest pocket like a watch
In handsome leather pouch

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Full Lines of Physicians' Supplies, Invalid Comforts, Etc.

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CHICAGO

GREAT ADVANCE IN OPERATIVE ASEPSIS

Huston Bros. Obstetrical Pan

(Prophylactic)

Has the following great advantages:

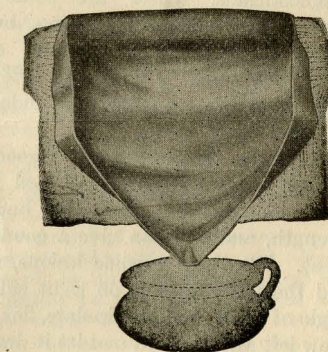
- 1st—It is a PAN; not a pad.
- 2nd—Takes up very little room.
- 3rd—Positively keeps the bed clean every time.
- 4th—Has great depth and rigid sides, thus can be handled conventionally and carried from the room without spilling contents.
- 5th—Great comfort to the patient by means of an inflatable back pad of any desired size. With the exception of this small backrest this pan has
- 6th—No rubber to deteriorate.
- 7th—Splendid for instrumental deliveries.

Price of complete outfit in handsome case

\$5.75

Made with heavy muslin covers (sterilized and aseptic), it is very inexpensive, as the cover can be thrown away after each case, the cost of each being only 33 cents for best heavy muslin cloth coated with paraffin, or covered with genuine Para rubber, 50 cents.

The Huston Prophylactic Plan for Obstetrics is Simple, Economical and Durable



OSTEOPATHY NOT ON TRIAL

WALTER J. NOVINGER, D. O., Trenton, N. J.

The general practitioner who treats all ailments, acute and chronic, does more to advance Osteopathy than the one who takes only those cases that can come to the doctor's office. When we let people think we can treat only certain ailments, it is we who are to blame because most people call Osteopathy rubbing. Only those of us who do rub, and likewise our schools, are to blame, because so few among us practice as Dr. Still did and the way he tried to teach us.

Those who need medicine and other adjuncts are convinced of the limitations of Osteopathy simply because their own knowledge of Osteopathy is limited, or because they lack practical skill in its application. Most of us have learned and are still learning from other practical and successful osteopaths of the A. T. Still brand.

My first eight years of practice was with acute as well as chronic cases, curable as well as incurable, and not a few cases which I knew were incurable got well. When they did not get well, I felt that I was at fault and that Osteopathy was not fully tried, and I would call in one or more osteopaths to assist me, often placing the patient in other hands, for what sometimes baffled me was often easy for another.

Frequent consultation among ourselves adds to our prestige, builds up our knowledge, promotes good will in our ranks, and increases our own and our patients' belief in Osteopathy.

Osteopaths are uniformly the greatest diagnosticians. There are some good ones in the medical profession, but not many. Compare the diagnosis of the cases that come to you from osteopaths with those who were formerly under medical treatment.

For home treatments, put a good sized ironing board on springs of bed underneath mattress. It saves your back and strength, and you can give a good treatment. For those cardiac lesions, second and third rib, patient on right side, find angle of rib, do not manipulate, flex limbs, draw left arm forward and let it drag over edge of table, place your left hand on your right, heel of right hand on angle of rib, give quick hard inward-downward rotary thrust and your rib is adjusted. Leave it alone, give no further treatment that day. I seldom give more than two treatments per week for this condition. Many cases are cured in a few treatments, when others give only palliative relief.

If we do not relish being called rubbers, let us all help our rubbers to learn to adjust, and if they are unable or unwilling to learn, let us help them to get out

of Osteopathy. Montana has set an example which should be adopted by the A. O. A. and every State, District, and County Society.

When more of our profession teach, practice, and live Osteopathy, the people will not go to the chiropractor for a bungled imitation. When we do this, we will have more respect for the science some of us are so poorly representing.

The cases that get well under medicine are usually easy to cure with Osteopathy, and the medical incurables who have been cured by Osteopathy are the basis of most of our success. The next time you think you have a case for the surgeon, call an osteopath in consultation instead.

In eighteen years of steady practice, I have had only one cutting operation performed, and have saved many from surgery. Yes, including removal of appendix, ovaries, kidneys, tonsils, etc. My experience of nearly complete dispensing with surgery is corroborated by many other osteopaths with similar experiences.

LET US PRACTICE OSTEOPTHY AS DR. STILL GAVE IT TO US. Let us consult with one another, and always bear in mind that OSTEOPTHY ITSELF IS NOT ON TRIAL, and that we can learn from others if we will fraternise with those who believe in and practice simon pure A. T. Still Osteopathy.

BENEFIT CONCERT FOR NEW YORK OSTEOPTHY CLINIC

Two famous artists, Mme Maude Powell, violinist, and Mr. William Wade Henshaw, baritone, of the Metropolitan Opera Company, generously volunteered their services for the benefit of the New York Osteopathic Clinic. The Concert, which was a brilliant success in every sense of the word, was held on Monday, April 23d, at 8:15 p. m. in Aeolian Hall.

The only thing that marred the recital was the sudden illness of Mr. Henshaw which prevented his being there, but Mme. Powell came forward nobly and generously and gave the entire program. Mme. Powell deserves great praise not only for the generous contribution of her exquisite talent, but for her coming to the rescue and carrying the concert to a splendid success without the aid of Mr. Henshaw.

According to information from the box office this was the biggest house in point of receipts of the entire year, being a \$2200 house.

Osteopathic physicians throughout the country should bear in mind this friendly and generous interest these two artists have taken in Osteopathy, and wherever they appear, should make an effort to aid their concerts in every way possible.

Osteopathy received much valuable

publicity at this concert, as a neat little folder calling attention to the fact that the concert was for the benefit of the Osteopathic Clinic, together with a few facts relative to the clinic, was inclosed in each program.

Following this concert comes the good news also that a grateful patient has made a gift of \$5000 to the endowment fund of the New York Clinic in memory of the late Dr. George J. Helmer.

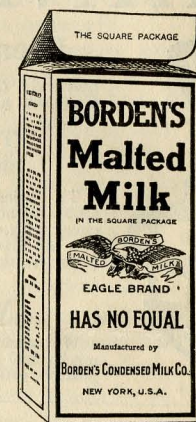
"I look forward to the time when people will give up the extraordinary habit of taking medicine when they are sick."

SIR FREDERICK TREVES.

Dr. C. W. Bliss of Brooklyn, N. Y. says: "Osteopathic Truth is alright and every real osteopath ought to have it in his office. Here is success for all times."

Dr' George W. Perrin of Denver, Colo. says:

"I have enjoyed every number from start to finish. It is a paper that should be in the hands of every osteopath worthy of the name. The nearer we can keep to the teachings of Father Andrew, the more satisfactory progress of our wonderful science."



BORDEN'S Malted Milk

IN THE SQUARE PACKAGE

GRAND PRIZE

HIGHEST AWARD

Panama Expositions

Another Proof of Quality

WHY NOT

PRESCRIBE "THE BEST"

MORE GOOD POINTERS FROM YOUNGBUCK

DEAR FRIEND BILL:

Here are a few more suggestions for your consideration. After selecting a place to locate be sure to open your office in the best building in town. Yours is the best system of doctoring sick folks and why shouldn't you be in the best location? Your rent will be anywhere from \$10.00 in a country town to \$60.00 in a city. Don't plan to take some other man's office part of the time or to make two towns unless it is necessary as a temporary arrangement in getting started. Have your name on the door and windows in gold leaf. That will cost from 15 cents to 50 cents per letter. You should have elevator service or at least an easy flight of stairs. Your office should be well heated and ventilated, for sick folks don't like to undress in a cold, damp or stuffy room. Your office should be lighted with electricity and there should be convenient plugs for your sterilizer and electric diagnostic apparatus. The lights should be good ones—indirect lighting is best—and not down in front of your patient's and your own eyes. In the treatment room, don't have an irritating light right over the table to shine in the patient's eyes and keep him from relaxing. Your landlord will see to most of these things, if you insist, and if he will not, you can do the job yourself in a few hours.

As to the rooms and number of them: It is often advisable to get one or two good, large rooms and partition them off as you desire. Your private office will be the most important. In it you will have your desk. A flat top is best—it looks more professional—and then you won't get such a display of junk on it. Have in your private office a place to hang your own coats and hat, your library, and in one corner a washstand and your laboratory. This room should be well lighted and have a door into your reception room and a door into an adjoining treatment room or into a small hallway to the treatment rooms. In this hallway you can have your kimona rack. At some handy place have a rack for booklets. If the private office is large enough and you do not have more than one treatment room, a treatment table might be of much service there for examinations. You can have your instrument cabinet in the private office near the door to the treatment room, where it will be handy to both places. This arrangement, with a rest and dressing room, will provide you an office that will give you a professional air and one in which you can handle your practice with satisfaction to yourself and your clientele.

Don't forget that you will need a typewriter on your desk, and don't forget to use it. Write a little scientific stuff. You will work out many valuable points and they will work out faster and better if you begin early the practice of writing about them to your friends and to the Journals.

Have some good rugs. They will cost from \$15.00 to \$60.00, but they will make your office look as if it were occupied by a professional man and one who is prosperous and knows his business. See that your windows are well shaded and curtained. See that the walls and floors are in good shape when you sign the lease and have an agreement about them with your landlord. There should be water in the treatment room or handy to it, and if you can have a private toilet it will be a very valuable thing in many cases. Many patients are afraid to come to an osteopath's office because they have so much trouble with their sphincters that it is painful or embarrassing to them. Then you will often want to give a patient a good enema to know that it is done and done correctly and well, and a toilet has a real value. You will get results with it and it will make you money and reputation for thoroughness.

In the waiting room a good easy rocker or two are appreciated by tired or weak patients. A few magazines should be on the table and perhaps a potted plant, as well as several educational booklets and osteopathic magazines.

Popular Literature and Advertising

I would advise that you give close attention to the use of educational literature. At first it may be advisable to use some booklets broadcast—I mean send them to persons you do not know—but very soon cut that out and subscribe for some of the monthly publications for your friends and the friends of Osteopathy. Drop them a note and say that you have subscribed for a little magazine for them on health subjects in general and on Osteopathy in particular, and that you hope they will enjoy it and get some information from it. You will have a host of agents wanting to sell you advertising, but let them alone. Just tell them that you have a plan of education that you are trying out at present and you are not interested in anything else. If I had used all the money that I have squandered for space in telephone and city directories, street thermometers, railroad men's books, hotel and waiting room cards, church bulletins, etc., etc., in subscribing for the monthly publications on Osteopathy, I would be better off in a good many ways. You will be a better physician, have more and closer friends, more patients and feel safe about your social position if you do not advertise, but give your whole attention to holding your friends and patients close to you. You can't make the whole community osteopathic, and you can't make a small part of them thoroughly osteopathic in a few days. It takes patient, continued education. Educating your friends and patients away from the superstition of the dark ages is a legitimate undertaking and one of which you may be proud as a citizen working for the good of his community and profession. Advertising yourself and getting people to come to your office merely to get them as patients is not free from just criticism. A hundred friends with a thorough knowledge of the benefits of adjustment, the dignified place that Osteopathy holds in the world, and the scientific spirit that leavens it, will bring you more and better practice than five times as much knowledge of the benefits of adjustment, the dignified place that Osteopathy holds in the world, and the scientific spirit that leavens it, will bring you more and better practice than five times as much gunshot advertising.

As to Business System

Your accounting system is something that should be given some thought. There are several good systems. The one that many are using and have found satisfactory is that printed by the Irving Pitt Mfg. Co., of Kansas City. You will want a sheet for your daily record. It is advisable to keep accounts so that if occasion should require it they could be shown in court and be accepted as evidence. Sheets on which a daily record of business is kept, in addition to the individual account sheet, gives two entries for each charge and gives you a record that will show each day's, week's or month's business, and each individual account. When you get busy you will welcome the system that saves you an hour's bookkeeping each day and one that is simple enough to be understood at a glance.

And your library! For goodness sake don't dispose of your books if you can help it. Every book you have is going to be of great value to you for reference when you need information, and that will be almost hourly. Get all the books you can. You may not read much in them but you will refer to them often. **Subscribe for the osteopathic publications, and I have found the Medical Clinics of Chicago (not surgical, although they may be good also) and the New York Medical Journal of great value.** In this journal you will read reviews of the new books and will pick up things that will be a great help to you.

Equal in importance with your library is your laboratory and your instrument case. Begin at once to build them both. Your laboratory may

be as elaborate as you want it, but at the very least you must have handy and ready glassware and reagents for the simpler tests. A microscope and equipment is also a necessity at this day and age if you are going to be a real doctor, and you don't have to go outside of our profession to learn efficiency in its use either.

As to the instrument case, you will add to that all the time, but we might mention some of the things that are sure to be in it: Case report blanks, ear instruments, such as head light, auriscope, specula, Fowler's ear douche, douche can, curette, tuning forks, Ingersoll watch, measuring tape, etc., etc.; throat instruments, such as wood and metal tongue depressors, gag, applicators, etc.; nose instruments, such as Deason's irrigating nozzle, long forceps, speculum; cotton, lamb's wool, rubber gloves, bandages, antiseptics, soap, lubricants, surgeon's tape, dressings, glass jar for tampons, stethoscope, clinical and bath thermometers, blood pressure outfit, scissors, lances and knives, hemostats, needles and holder, proctoscope, vaginal speculum, urethral sounds, etc., etc.

Be Considerate—Concentrate

In your treatment or dressing room you will need a good mirror and stand or a dresser, with clean comb and brush, talcum powder and pins. For the table a small and a large pillow with clean covers, and plenty of towels for the pillows and for your hands, two small size sheets with which to cover your lady patients when giving local or innominate treatments, or to cover a patient when cold. When you cover a patient with a sheet, don't bring it out all wadded up but nicely folded, and don't throw it over her as you would a table cloth over a table. Gently cover the patient. Never pass from one side of a lady patient around the foot of the table; always go by the head. Cultivate the gentle touch and put your hands on your patient with the strong, firm confidence of a man who knows just what he is putting them there for. Don't let your eyes wander out the window, and don't keep up a chatter when treating. If you are treating, why treat. You can't do that and let your mind wander. Keep your thought on what you are doing and why you are doing it. You must be doing something that you think is necessary and that takes thought. Think of what structures you are manipulating, and why, and the result. Few people in the world know just how much can be done in disease by manipulative adjustment. It is practically a virgin field of endeavor.

Never tell a lady to "Lie on the table" or "Roll over" or "Lie on your back." Say, "Now on the table, please," or "Now on the other side, please," or "Now on the back, please." Hold the skirts closely down so that the patient can feel the pull on the neck. Let the patient herself unpin the dress at the neck if too tight.

Never let your patients tell you how to treat them. It is wise to accept suggestions, but always do as you think best. It pleases patients to have ideas and views praised a little and makes them respect your judgment to add to it their own. Sometimes you will not give a treatment that will satisfy the patient, but make them know that it is just as you wanted it and just what the condition called for. Don't stay in the treatment room when you have finished. Get out.

Be Specific as to Directions as Well as Treatment

Don't let your patient ask when to come again, and don't make a practice of letting them tell you when they should be treated again. Say "Come in again Wednesday morning" or "I will see you again Tuesday at three." If that does not suit them it can be changed. When you call at the house say, "I will see you tomorrow at nine o'clock." Don't ask when you had better come again. If you can't get there at the appointed time let them know about it. A housed-up patient does not like to be in suspense. If you are not to go again tell them to call on the telephone

and let you know just how they are getting along or call them up or call upon them yourself. People appreciate having an interest taken in them. When you see them, if no one is present whom the patient might not want to know about it, ask about their health and about the family.

You will often be asked, "Doctor, how long will it take to cure me?" You will have to say that that is a hard question, that different persons respond differently; that you will do your very best and give your closest attention and study to the case; that you do not want the case unless you have a fair chance for it, for it would not be fair to you, and to your system or to the patient; that patients often get great benefit from the treatment after the course is given and that you will expect to teach them how to care for themselves in a way that will benefit them the rest of their lives. Make them know that they will have to cooperate and help, and make them know that you have confidence in helping or curing them under these conditions. Tell them that you know of cases that have been well in a certain length of time—whatever your experience has been.

Set Your Fee Without Offense

When you think that a patient is going out without paying when you think that he should pay, you can say politely, "How much do you want me to credit your account with today?" That will never give offense and brings up the subject in a direct way. If they expect you to get results they must expect to do as you say and to pay for your services. If they do not follow your directions that is not your fault (if the directions have been properly given). Charge a good honest fee and collect it. Doctors have made more dead beats in communities than any other thing by making charges and not collecting them. Sometimes they were unjust and sometimes just. Sometimes no services were rendered and sometimes there were. Don't cut prices to get business. If a patient can't pay the regular fee it is better to not charge for an occasional treatment or to let the bill run and then make a charge as you think appropriate. It is sometimes wise to make a charge for a month's treatment. It is often wise to make an advance charge, for you will often get much better cooperation from the patient.

And that town that you spoke of locating in. Have you made a quiet investigation as to how the other osteopaths stand there? You don't want to get in a town where there is another that you can't be good friends with, especially in a professional way. Two osteopaths can go into a small town and make a big success if they will boost for each other, where there would be small business for one alone and where two knockers would starve out. It will mean dollars as well as pleasure to you to work with your fellow osteopaths. Patients may bring little remarks to you that have been said about you, but don't let that feaze you. Be too big to be touched by a little man's knocks.

AS TO YOUR RELATIONS WITH MEN OF OTHER SCHOOLS OF THERAPY—DON'T HAVE ANY. THE CLOSER YOU STICK TO YOUR OWN BUSINESS THE BETTER OFF YOU WILL BE. DON'T WORRY ABOUT TRYING TO GET CASES REFERRED FROM THEM. YOU WON'T GET THEM, SO DON'T KEEP A LOOK OUT. PATIENTS WILL BRING YOU LONG TALES ABOUT THEIR ATROCITIES. THEY MAY BE SO AND THEY MAY NOT—MOST LIKELY NOT. IF YOU MAKE ANY REMARKS OR CRITICISMS, MAKE THEM SCIENTIFIC AND NOT PERSONAL. YOU WILL HEAR OF THINGS THAT THEY SAY ABOUT YOU, AND YOU MAY BE SURE THAT EVERY WORD YOU SAY ABOUT THEM WILL GET TO THEM SOME TIME. YOU WILL NOT GET CASES FROM THEM, BUT YOU DON'T WANT THEIR PERSONAL ENMITY.

Now, Bill, old top, let me hear from you, for I want to help you get a right start in this great life work. If you have any ideas that you want to unburden yourself of, why fire away.

Yours for success,

A. YOUNGBUCK.

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Burdick Applicators are fifty times better than hot-water bottles or electric pads, for all local applications of heat and as a "bed warmer."

Experience in thousands of cases has proven them to be superior to vibrators, high frequency currents, and expensive "high candle power lamps," for the relief of Pain and Congestion. Used as a "radiant footbath" are more effective than a hot-water foot-bath to relieve Headache, Cold in the Head, etc.

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The Radio-Vitant Applicator is a splendidly built piece of equipment, worth more than any other apparatus costing double its price.

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A BARGAIN

The plain American, who today for the first time in his life is offered Government bonds, should not make a mistake about the situation. There is no necessity for begging him to buy a Liberty Bond. Uncle Sam doesn't need to do any begging. But the plain American is being called to do a part of his war duty by such buying, and incidentally he is offered a chance at absolutely the best investment in the history of the world.

Liberty Bond is a first mortgage on Uncle Sam's farm, the richest land under the sun. The security behind the bond is infinite. There is no possible danger of loss of principal or interest—and that interest at 3½ per cent is very liberal, when exemption from taxation is taken into account.

There is not only absolute safety but a chance of profit. If the war is long, a holder of a Liberty Bond may see his interest rate increased to 4, 4½ even, 5 per cent. If the war is short, the value of his bond will certainly increase. Before the war Government 3 per cent bonds sold at 100 to 102. The Liberty Bond at 3½ or better will surely go higher.

In the Liberty Loan, if ever, duty is a privilege, patriotism is a bargain.—BOSTON HERALD.

THE "OLD DOCTOR'S" COLUMN

SOME OF HIS PITHY SAYINGS. READ AND MEDITATE

Worship God by using the brain he gave you.

The best way to study a man is to dissect a few bodies.

God's pay for labor and time is truth and truth only.

Find and remove the cause; then the effect will disappear.

Man should study and use drugs compounded in his own body.

The laws of God are trustworthy when thoroughly understood.

Cause and effect are perpetual. Death is the end or sum total of effects.

God is the Father of Osteopathy and I am not ashamed of the child of His mind.

I cannot be happy and idle. I will use my pen and feed the coming minds as best I can.

Anyone might think that between prayers and pills the Angel of death would be driven from the doors.

Almost one half of the women living bear the knife mark and I tell you God's intelligenc is reproached by it.

As we are not willing to attribute to Diety anything short of perfection we must see to it that our acts are in line with our words.

All diseases are mere effects; the cause being a partial or complete failure of the nerves to properly conduct the fluids of life.

Rely upon your anatomy and physiology and rub your heads; or deny the perfection of God and intelligence and say, "I have Osteopathy in one pocket, pills in another and nothing in my head."

The great Inventor of the Universe by the union of mind and matter has constructed the most wonderful of all machines—man—and Osteopathy demonstrates fully that he is capable of running without the aid of whiskey, opium or kindred poisons.

I fully realize how tough the old ways were when I remember how they used to spank me to get down a dose of Castor Oil; they would ask God to bless the means for my recovery and I suppose this petition included both the dose and the blister.

A MIGHTY GOOD SUGGESTION Let Us Have a Permanent Osteopathic Library For Convention Use

The following letter from Dr. Charles W. McCurdy, Brandon, Canada, contains a very practical suggestion. OSTEOPATHIC TRUTH extends its thanks to Dr. McCurdy for the thought. Let us all push it along.

"I note in Osteopathic Truth for March, page 92, these words: 'How many of us are equipped with a library of osteopathic text-books and allied publications?' I would suggest that the Educational Department of the A. O. A. prepare an "EXHIBIT" for the Columbus Convention, as nearly complete as possible, of all legitimate osteopathic texts ever published, for inspection, and have a man or woman in charge to receive subscriptions. Each author or publishing house should be pleased to contribute, gratis, such copies. This exhibit to be added to year by year and become a PERMANENT FEATURE of each Convention.

I would like to add to my own "Osteopathic Library" but do not know where certain texts may be obtained, or the price of same. I expect to be at Columbus and will "live in hopes" of seeing the exhibit above outlined.

SOME FACTS AND THEIR LESSON

GEORGE W. GOODE, D. O., Boston, Mass.

We have much to learn from the Chiropractors today in the way of a fighting spirit. Their enthusiasm and tenacity of purpose are marvelous. Not in the earlier struggles of Osteopathy for legal recognition by state legislatures have we out-classed them. To show our profession that these people are not asleep on the job, one instance will suffice at this writing.

In Washington this year they put in a Chiropractic bill. It passed the House with a vote of 65 yeas and 6 nays. Then it passed the Senate with 35 yeas and 5 nays. Governor Lister vetoed it. Now think it over! Although beaten by the Governor's veto, just analyze this vote. Look at the majority in favor of Chiropractic. Facts are stubborn things. I would say from my legislative experience in Massachusetts that it was a great fight. It seems to me that it is a rare thing for a Governor of any state to veto any bill with such a majority vote in its favor. It is against popular demand.

The Governor's reason for vetoing was that it created too many Boards.

Another point to consider, which makes the fight all the more commendable, is the fact that six months ago Chiropractic was unknown as a factor demanding any consideration in the State of Washington. Today Chiropractic is perhaps better known in Washington than it has ever

been before and of course it must be as a result of this good publicity work. Unless the osteopathic profession throughout the country wakes up, it is but logical that these people must eventually win. Now, Fellow Osteopaths, a separate Board was asked for without equivocation, by these people. Why can't we, those of us who are opposed to separate legal recognition, see the handwriting on the wall? If Osteopathy is to continue to be known as a distinct branch of the healing art, then it must be kept inviolate.

The ten-fingered D. O. certainly was not far amiss in his cry in the past for "straight Osteopathy." "Mixing" is not the watch-word for today. It is retrograding and the medics know it. The Chiropractors are alive to our professional mistakes and will not drop into the pitfalls which have bothered us. This condition in Washington is but typical of conditions throughout the country. AWAKE, OSTEOPATHS, AWAKE.

BONDS WORTH WHILE

Somebody occasionally asks why he should put his money into "Liberty Loan" bonds at 3½ per cent interest when he can get 4 at the savings banks.

There are two reasons, and each a very good one.

In the first place, by buying a "Liberty Loan" bond the citizen becomes a partner with his government and the government of all of us in the greatest enterprise for democracy and human rights that the world has ever seen. As a patriot and a lover of liberty the bond buyer is doing a service of which he will long be proud.

In the second place, if he wants to think mostly of his own financial interests in the case—and many have to through no fault of their own—he must remember that some banks are already paying but 3½ per cent and others may find it advisable to go to that figure as time proceeds.

Jacob H. Schiff, the eminent New York banker and philanthropist, puts the matter admirably when he says:

Such an opportunity as this has never been offered to the investor. Here is a 3½ per cent tax-free bond of the government of the United States, which if the war lasts any longer time, may possibly by reason of its convertibility into any higher rate bond that may be issued, become automatically a 4 per cent or even a 4½ per cent bond, while if the war should be a short one, which may be possible, and is to be hoped for, the further issue of government loans is likely to cease abruptly, in which event the "Liberty Loan" bonds are absolutely certain to go to a considerable premium.

A 3½ per cent 15-year bond on a 3 per

cent basis is worth 106, and let it be remembered that 3 per cent United States bonds have sold at a premium no longer than a few weeks ago.

The "big fellows" are going into the "Liberty Loan" because they realize just how attractive an investment it is. What they do in this kind of financial way the average citizen may regard as a pretty good example.—BOSTON POST.

The many friends of Dr. Harry M. Vastine will learn with sorrow of the recent death of his father, Mr. T. J. Vastine, of Sunbury, Pa. after a lingering illness with cardiac trouble. Unstinted devotion and osteopathic treatment afforded relief for several years, but the grim reaper finally claimed the patient. The sympathy of the profession will be accorded our earnest co-workers, the Doctors Harry and Herbert Vastine.

Dr. D. Ella M'Nicoll of Frankfort, Indiana writes to the Editor as follows: "You are starting well, I want to predict that one of these days you will have our profession measuring Osteopathy by solid instead of linear measure. Just a few are trying to sound its depth, while a good many are skimming along the surface with eyes fixed on serums, vaccines, etc. Well, I'll grant there's a bit of monkey nature in a lot of people yet. I've been boosting 'Osteopathic Truth' for near twenty years and proving it about three hundred and sixty-five days in the year to my own satisfaction. Thanking you for putting my name on your mailing list. I am advising you to keep it there."

"The supreme test of the nation has come. We must all speak, act, and serve together."—WOODROW WILSON.

Dr. H. W. Gamble of Missouri Valley, Iowa writes: "I don't have time to read Osteopathic Truth, but take time. I have solemnly sworn I would not subscribe to any more literature, but—I realize our professional literature seems to need a safety valve, and a balance wheel, so here goes for the gyroscope, the "Osteopathic Truth." I stand for all Osteopathic Truth, Q. E. D.; and that which is still undeveloped and unproven 'tis up to us to do the latter."

"A nation is dead when its conscience has departed, when its ideals are forgotten, its faith unkept; when its soul has fled and base desires alone survive."

"A people who are not ready, if the need come, to give their lives for their country, will soon have no country."

—HENRY CABOT LODGE.

SOME MIGHTY GOOD ADVICE

"Enclosed please find my check for subscription to OSTEOPATHIC TRUTH. This is a great good work you are doing and I want to do my share to help support it so that you can keep it up. In my few years of experience I have found that a large share of the harm done to our profession comes from the half-hearted practitioners. I think we all must admit of much good coming from the better type of medical men, but we as osteopaths, who have such a wonderful science, and who get such wonderful results, ought to let them have their end of it and STICK TO OUR OWN OSTEOPATHIC GUNS OURSELVES. I am mighty glad to see you ripping things up and the more constructive criticism the better. I wish you full measure of success in your undertaking."

DR. CLARA B. LINCOLN,
North Tonawanda, N. Y.

VIRGINIA SOCIETY MEETING

The semi-annual meeting of the Virginia Osteopathic Society was held in Murphy's Hotel, Norfolk, April 21, Dr. George E. Fout of Richmond presiding.

Foremost in the minds of the members was the subject of the osteopath in war. Those discussing the subject contended that spinal defects unfit men for service and that flat foot, fallen arch, and other ailments of the pedal extremities, so prevalent among soldiers, can never be entirely overcome so long as certain defects remain in the spine. Formerly, military and naval authorities have admitted for examination and acceptance into service only graduates of the old school. In the present crisis, the osteopaths will be found loyal and it is expected their abilities will be recognized. In fact, steps were taken at the meeting to determine just what recognition will be accorded osteopathic physicians and surgeons in the plans for the present crisis.

Dr. C. K. Garrett, of Lynchburg, in an address on "Osteopathic Fundamentals and Essentials to Success," pointed out the urgent need of Osteopathic inspection of school children. An examination of 2500 boys and girls in Richmond schools reveals the fact that nearly 12% had lateral curvature of the spine" and "at the present time there is not a city in the country where an examination is made of the school children to find out whether or not there is deformity of the spine."

Dr. Charles Carter of Danville spoke on "Relative Viewpoint of Physician and Patient," pleading with the profession to "preserve unsullied the principles of Osteopathy, and to maintain its practice in all its purity." Especially did he plead for "absolute fairness to the profession, to the public and to our competitors."

A splendid clinic conducted by Dr. E. H. Shackelford of Richmond, brought before the osteopaths three children's cases, unique for the reason that under the old school methods of treatment they are offered little help and as a result the conditions are regarded with particular fear by the public. A paper by Dr. S. H. Bright of Norfolk on "Ductless Glands," recorded the opinion that:

"The scientific investigation of these glands by medical authorities, prove the osteopathic principle 'that the body has power of secreting its own protective and curative chemicals'."

The officers of the Society are: President, Dr. Harry Semones, of Roanoke; Vice-President, Dr. Geo. E. Fout of Richmond; Secretary-Treasurer, Dr. L. C. McCoy of Norfolk.

Mr. W. M. Reid died of old age hastened by a fractured hip, at his home in Marion, Ill., May 2, 1917, aged 81 years. He was the father of Drs. W. E. Reid, of Marion, Ill., Chas. C. Reid of Denver, Colo., J. F. Reid of Warren, Ohio, and Geo. W. Reid of Worcester, Mass.

Mrs. Lydia Cramb of Fairbury, Neb., died at Boston, Mass., Wednesday, April 11, 1917, after a few days illness of pneumonia, aged 75 years, 5 months, and 19 days. She and her daughter, Miss Myra had been spending the winter in Boston where the latter was attending Boston

University. Mrs. Cramb was the mother of Drs. John L. Cramb of Denver, Colo., Edgar M. Cramb, Lincoln, Neb.; L. K. Cramb, North Yakima, Wash., A. B. Cramb, Tecumseh, Neb.; Mamie Cramb McAllister, Fayetteville, Ark.; and Albert J. Cramb, deceased.

The remains were brought to her former home, Fairbury, for interment beside her husband, Rev. J. O. Cramb.

Dr. Harry E. Sinden of Hamilton, Canada writes:

"I am muchly interested and with you to a finish. The great pity is that some such effort was not put forth before so many joined the great "don't care" class and lost their enthusiasm. However, it is never too late to mend. It only means harder and longer work for the stalwarts in the profession."

Dr. Henry Clay Camp of St. Paul, Minn., writes:

"OSTEOPATHIC TRUTH has my unqualified endorsement. It has the true vibration of a competent practicing osteopath who needs no mixing to master the situation. It is the first of its type and long may it live. Please enter my name as a perpetual subscriber."

Dr. L. A. Howes of Ord, Neb. says: "It's just what we need crumbed down us every day."

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Contents of June Number

Editorials:

Twentieth Century Calf Worship
What Might Have Been

Articles:

A Little Learning, by Dr. W. B. Meacham
Credit Where it Belongs, by Daisy M. Moore
Osteopathy and Childhood, Dr. Louisa Burns
How Osteopathy Cures, by Dr. W. F. Link

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