

# **Osteopathic Truth**

**May 1919**

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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 III

MAY, 1919

Number 10

## What Our Science Needs

"What our Science needs is students. Let us all endeavor to interest young people to study Osteopathy, let us boost our schools and thereby boost our Science." How often we hear Osteopaths say something of this sort, and it is true, the number of Osteopaths is all too few, we should try to make our Science interesting to young people, especially the serious-minded, deep-thinking young folks that will catch the spirit of the Old Doctor and bring fresh blood as well as increased numbers into the field. Shall we not also endeavor to make them catch something of the real value of Osteopathy, something of its basic principles before sending them to any of our schools? You ask why? Let me tell you of my own experience and then judge the "why" for yourselves.

During my Osteopathic course I attended two schools—neither of which I shall name. In my Freshman Year during one of our first lectures in chemistry, which was taught by one of the leading men of the faculty, the doctor digressed to the point of telling of a case which had been interesting him, and concluded his remarks with this: "Now what could Osteopathy do for a case like that, can you tell me?" Naturally none of us could, we were not sufficiently far advanced to know; supposedly, we were there to learn what it could do in such a case. But from this and similar remarks oft repeated, many of the class caught the attitude which the doctor was trying to bring out in them, namely, that in many cases Osteopathy is inadequate.

The man who was president of the school, among other things said most emphatically that a single lumbar lesion did not and could not exist, that the claim of some Osteopaths that such lesions do occur was "absurd," that a group lumbar lesion was sometimes found, but a single lumbar lesion never.

He also advised us to content ourselves with deep muscle relaxation, contending that an attempt at spinal adjustment might do great harm and should not be undertaken. He did not mean this to apply to our Freshman Year alone,—one of the most conscientious members of the senior class said that he never spoke of a bony lesion to her class, and she did not dare attempt to correct either a dorsal or cervical lesion in my spine, yet in a few months she had her shingle out to practice Osteopathy!

Our ardent young instructor, who had recently graduated from that same school was ashamed to have it generally known in the community that he was an Osteopath—he told me so himself! He was filled with the value of serum treatment and tried hard to give us the vision of infinite good that such treatment could do to mankind. The only true Osteopath our Freshman class had as instructor was ridiculed when he endeavored to show what a genuine understanding of the Science could do.

Most of the class, of course, continued at that same school, and many felt the need of taking an extra year in a third class medical school in order to have the M. D. degree and a training sufficiently complete to enable them to handle their cases to their satisfaction. What do you suppose the dear Old Doctor would think of such a condition? What does it mean as regards Osteopathy?

At the school where I finished my prescribed course of study I found plenty of Osteopathic kernels because I was looking for them and eagerly gathering them in. You see, I had experienced the value of real Osteopathy before I attempted to join the profession—but there were all too many who failed to get the clear vision that every Osteopath should get. Why? Because the majority of our teachers dealt with it in a more or less incidental or matter-

of-fact way; they were not burning up with the miraculous things that Osteopathy could do. To be sure, every once in a while one or another of them would have a spasmodic spurt regarding the worth of the Science and then many of the students would say, "Let him rave, we can take a nap until the lecture begins again." It was not convincing. Just one man on that faculty kept quietly, insistently pointing out day after day the value of Osteopathy in itself; he let no occasion pass without speaking a word for the Science or its remarkable founder—and now, this man's connection with the school has been severed.

One recent graduate was averaging more than a patient a month at the hospital for operation, and others located near enough usually would bring several a year. Some cases we all admit fall within the domain of surgery, such as certain malignancies, lacerations of the perineum and some others. Suspensions of the uterus, however, are much too frequent it seems to me. Take for instance the case of one young woman whom I know. Her uterus was suspended but her condition did not improve, then the cervix was forcibly dilated, again without improvement. Finally the young woman changed doctors, the new man found a slight curvature, and several dorsal and lumbar lesions, and as soon as treatment was properly undertaken her trouble began to disappear. This was not the only case which I knew when suspension of the uterus proved to be unsatisfactory in its results. You probably will be amazed to hear that the surgeon was an Osteopath, yet had not pretended to examine the patient's back, nor was this the only operation where such spinal examination was omitted. Would you consider him to be an A. T. Still Osteopath? I would not, but he is a promi-



ment member of the faculty of one of our Osteopathic schools.

Fellow Osteopaths, do we honestly care enough about our Science to take the time and trouble to find out for ourselves just what our schools are teaching the young men and women whom we send? Do we care whether or not insidious thoughts are being planted against pure unadulterated Osteopathy? We cannot tell by looking through the catalogs, for unfortunately they do not always give a true picture. We can tell by keeping in close touch with those whom we send to the schools, and by talking with graduates and faculty members at convention times—that is, we can if we are wide awake and not to be fooled by blarney or bluff.

At least let us wake up to the fact that we are not faithful to the trust which Daddy Still left to us if we don't insist that the students in all of our schools really learn the basic principles of our Science, unhampered by subtle or outspoken suggestions that Osteopathy is really inadequate. Let us further insist that they be made to understand that in most cases failure to get results with our Science is due to ignorance or indifference on the part of the manipulator. The out-going student should be made to realize that he is not a finished product, that he should always consult with some established Osteopath in such cases as seem not to respond. He should understand that although he and others are limited in ability, yet Osteopathy is limitless in its possibilities.

Let us catch the Old Man's vision—that is, what our Science really needs. Let us prove worthy of our legacy. Let us remember that our Daddy had a master mind, that no one yet has been able to approximate his understanding of Osteopathy, but that all can and should press on toward his ideal.

Author requests we withhold his name.

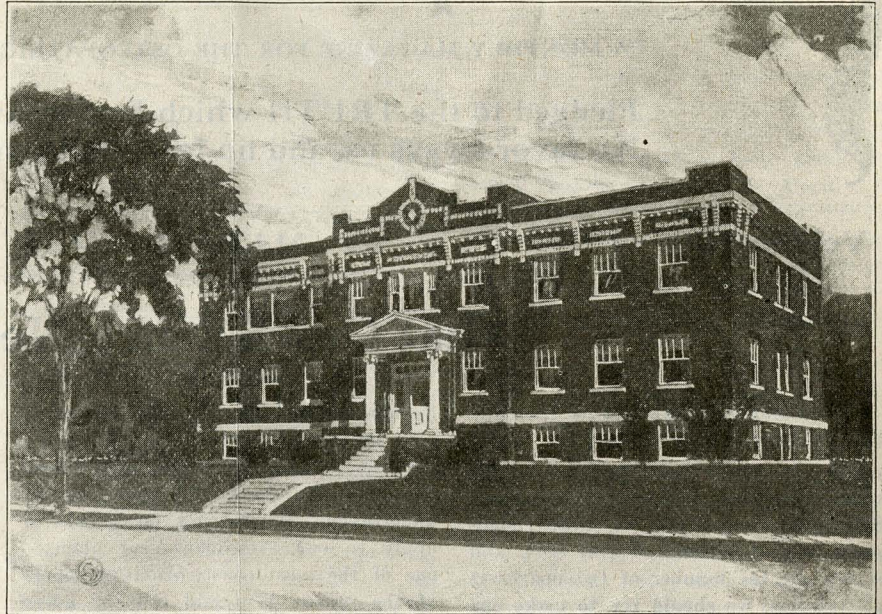
### RECREATION IN CHICAGO

One hundred ninety-three small parks and playgrounds, fourteen large parks, twelve bathing beaches, seven public natatoriums and eighteen public baths. Total area of the public park systems in the city of Chicago 4,964.72 acres, including 1,015.4 acres of boulevards. Total attendance public parks, playgrounds, bathing beaches, baths and natatoriums in 1917 was 36,332,542.

A Forest Reserve surrounds the city, comprising 13,500 acres of Natural Parks, accessible by city and county highways.

## Dr. George Laughlin Opens Hospital

Modern Fireproof Structure Costing \$50,000



Another advance step in Osteopathic professional progress is being made by the opening of The Laughlin Hospital in Kirksville, Mo., by Dr. George Laughlin.

Dr. Laughlin needs no introduction to the profession as he is one of the best known men in it. The success of the hospital was assured long before it was started by the mere fact of Dr. Laughlin being behind it.

### The Building

The accompanying cut gives a fairly good idea of the shape and size of the exterior. The building is neat and substantial looking, being made of the best possible material, and the last word in up-to-the-minute hospital construction. There are forty-two rooms in the building, of which thirty-five are for patients. General surgical and orthopedic surgical operating rooms are features. An automatic electric elevator serves all floors.

An X-ray laboratory and general laboratory are also provided.

### The Scope

The scope of the work to be accomplished at the new hospital is large and Dr. Laughlin with his corps of assis-

tants will have much to do. It is expected to maintain the following departments: Osteopathic, Orthopedic, General Surgery, Obstetrics, Gynecology, Nose and Throat, Proctology and urology, and X-ray and Laboratory diagnosis.

A training school for nurses will be another feature. The nurses will live in an adjoining building.

### A Continuation

The opening of the new building will be a continuation of the work Dr. Laughlin has been doing since last September in the building at the foot of Fourth street, which in recent years was occupied by the Y. W. C. A. of the A. S. O.

Considering the inconveniences as compared to the new building the work which has been done up to the present time may be counted as extraordinary. Many major operations have been performed during that time without a single fatality.

Dr. Laughlin has been doing his usual amount of Orthopedic work but will be able to do more in the new building.

We bespeak to Dr. Laughlin and his associates the support of the profession

### HEALTH IN CHICAGO

Death rate per thousand population (ten years' average, 1909-1918 inclusive), 14.9; typhoid fever rate per 100,000 in 1918—1.4, is the lowest for cities in the United States.

### CLIMATE IN CHICAGO

Normal temperature for three representative months: April, 46 degrees; July, 72 degrees; October, 53 degrees.

Annual mean temperature, 48 degrees. (Bring your overcoat.)

Annual precipitation, 33.3 inches.

**World's Greatest Convention, June 30-July 3—CHICAGO—Make Hotel Reservations Now.**



**HEAD-LINERS FOR OSTEOPATHY**

The following **EDITORIALS** and **NEWS ITEMS** concerning Osteopathy appeared in the daily papers during the months of February and March.

This press recognition is a remarkable tribute to the science of Osteopathy. It is an index to the strength of public opinion supporting the Osteopathic progress in Ontario.

We gratefully acknowledge our appreciation of this splendid support of our rights by the press of Ontario.

W. OTHUR HILLERY,

Ontario Association of Osteopathy.

Chairman Publicity Committee,  
**Editorial—Toronto Saturday Night,  
February 22nd, 1919**

**On Giving the Osteopath a Fair Show**

At the coming session of the Ontario Legislature, it is expected that the practice of Osteopathy will come in for some discussion, and possibly some legislation, tending to regulate and standardize the Osteopathic profession. Whether one favors or does not favor the practice of Osteopathy, it is useless to argue that it has no rights and should not be recognized in the realm of the healing arts. In view of the thousands of people who have taken it as their own in this country, and who are fully satisfied that it is neither witchcraft nor quackery, but is, on the contrary, a Scientific method of getting rid of at least a portion of the ills that man is heir to, it is certainly time that it was placed on a proper basis.

Under our present Provincial rules and regulations as regards the practice of medicine, the healing arts, or whatever one may call them, any out-and-out ignorant scamp may hang out his shingle, sign "D. O." after his name, and begin to practice what he is pleased to term the "Science of Osteopathy." When, as a matter of fact, he will probably kill or permanently injure more people than he will cure. Dentistry, medicine and pharmacy all have their governing boards created to examine those who practice in any one of these professions; and these boards in themselves are at least some guarantee to the public, ignorant of such matters, is not being endangered. Not so, however, with Osteopathy, which, as it were, is a sheep without a fold.

The demands made by the Ontario Osteopathic body, that is those who are graduates from accredited Osteopathic Colleges, is that the Ontario Government protect them from the faker by the appointment of a proper examining board, whose certificate will carry with it permission to practice within

the Province; that they be given the right to establish an Osteopathic College within the Province, possibly affiliated with one of the Universities and with clinical facilities in the public hospitals, such as are accorded other branches of the healing art; and that there be no restriction upon the admission of properly qualified graduates of accredited United States Colleges of Osteopathy until such time as the Ontario College is properly established. In other words, to have an open field, as have the Allopathic and Homeopathic Schools of medicine. The Osteopath claims that all he wants is a fair field and no favor, with due protection from the fraud. Let us give it to him.

**Editorial—Evening Ottawa Journal,  
March 5th, 1919**  
**Osteopaths in Ontario**

**Editorial—The Glob, Toronto, February 14th, 1919**  
**Medicine and Osteopathy**

**Editorial—The Toronto World, February 7th, 1919**  
**The Drugless Healers**

**Editorial—Ottawa Citizen, February 25th, 1919**  
**No Class Legislation**

**Editorial—Toronto World, February 14th, 1919**  
**A Case for Hon. Dr. Cody**

**News Item—Toronto Daily Star, February 14th, 1919**

**Osteopaths Demand College of Their Own**

Say Cody's Rumored Plan to Attach Them to Medical College Fatal

**News Item—The Evening Telegram, February 15th, 1919**

**Desires of Osteopaths**

What They Will Press For From Ontario Legislature

Many magazine articles were published about this same time.

Educating the "Managing Editor" always pays.

Evidently the publicity was too strong for nothing was done at the recent session of the Legislature.

**DRS. REID, DRAPER, FENNER AND RAMSEY HAVE NEW OFFICES IN DENVER**

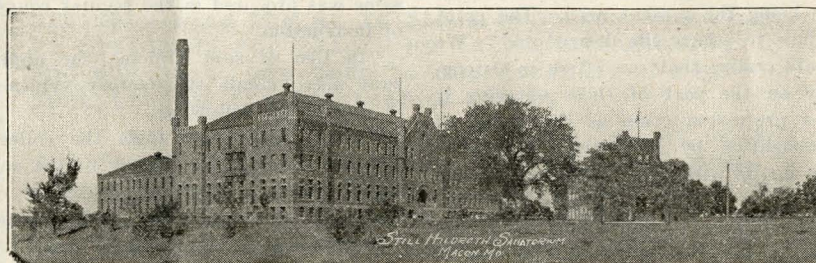
Dr. Charles C. Reid of Denver has moved his office from the Majestic Building to the Interstate Trust Building where he will occupy 22 rooms. He will share the reception room with Drs. C. L. Draper, Harold A. Fenner and J. E. Ramsey.

**THE CONVENTION CITY OF AMERICA**

Six hundred and sixty conventions in 1918; total attendance 405,000.

Chicago's normal hotel capacity is in excess of 100,000 rooms per day.

**Don't Fail to Read  
Justice Hodgkins Report on "Osteopathy"  
THE BEST IS COMING**



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DEDICATED TO THE CURE OF NERVOUS AND MENTAL DISEASES

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A. G. HILDRETH, D. O.  
Superintendent



## Justice Hodgkins Report on "Osteopathy"

(This is the tenth part of the report made by Justice Hodgkins in reference to the Osteopathic Physician of Ontario. Read these reports carefully.—Editor.)

"Our personal conviction is that drugs for therapeutic effect have no place, theoretically or practically, in our system. But we are equally sure that if we make both for school instruction and practice, a certain standard of Osteopathy the test rather than entire elimination of drug knowledge, we shall be accomplishing vastly more. Putting the essential thing into our training is more to the point than keeping the unnecessary out. Let the standard be established on the positive basis.

"We have the right to demand a certain amount of learning and experience as a condition of graduation. Have we the right to demand that it shall end at a certain point, that it shall not exceed an established minimum? Go further and assume for the sake of argument that we have the right to say the practice shall *not* be so and so, but shall be as mine is. Have we any evidence that those graduating under a course which includes pharmacology, or that those in other colleges, through private classes, get a course in pharmacology will practice drugs? Some of the colleges say not, and demand that they be given a chance to prove that the action of drugs can be taught, a rounded medical education given, and the faith of the Osteopath in Osteopathy and his reliance in it increased.

"That is what all at the recent meeting seemed agreed on—need of Osteopaths with an increased knowledge of Osteopathy and the fullest confidence in its therapeutic value. There seems not a shade of difference of opinion about this being the present need. The point is, how to secure the desired end? We should realize that conviction in Osteopathy on the part of those entering it as a profession come as the result of investigation by comparison of theory and results with other systems, and less through accepting it on sentiment because of what it did in one individual case, as was true of those who took it up fifteen or more years ago. It may not be unreasonable to assume that the essential facts in pharmacology and perhaps in *materia medica* taught from the correct viewpoint may be a strong factor in convincing the Osteopathic student and grounding his faith. This article is no argument for this teaching. We have all these years fought against it. It is an argument for fairness to the colleges. The colleges are not an end. Education is not an end; both are means to the end—competent

Osteopathic physicians. They are the result, the fruit of our educational system. We must judge the system by the fruit. They have not yet borne fruit. To judge before they bear fruit is to prejudice. If this should be thought, however, we hope it will be done under the heads of toxicology and comparative therapeutics, where, as far as they enter into an Osteopathic course, they belong. And if taught, they should be taught by real believers in Osteopathy and not by believers in drugs.

"We believe the report of the Board of Trustees along this line had some very wholesome suggestions, and we urge its careful reading upon every member. If an Osteopath is so thoroughly grounded in Osteopathy, and we know him to be such, that we cannot question his loyalty to its philosophy, then we must grow to the point where we will give him the liberty of treating an individual case as his judgment and experience indicate it should be treated, provided we know that he has had the training so that he knows what he is doing."

The colleges represented at that meeting (and the others not present are said by the secretary of the association to be pretty close together) recommended that beginning July 1, 1917, the following requirements be insisted upon, and their report was adopted:

### "Requirements For Matriculation"

"The minimum requirement for matriculation shall be: 'A diploma from a high school course or its equivalent education, together with satisfactory proof that the applicant is the lawful holder of such diploma and that the same was procured in the regular course of instruction.

"In lieu of said diploma the applicant may submit satisfactory evidence of any of the following:

"(a) A certificate from the college entrance examination board, of the college examining board of any State or Territory whose standard of educational requirements is equivalent to that of a standard four-year high school as stated in the paragraph above, showing that such applicant has successfully passed the examination of said board.

"(b) The passing of an examination before the entrance examining board for entrance to the academic department of any State University or foreign university of equal grade, or the possession of documentary evidence of admission to the academic department of such institutions as a regular student."

(Continued on Page 149)

## Special Post Graduate Course

PRECEDING THE CONVENTION

June 16th to 29th

### Courses Offered

1. **APPLIED OSTEOPATHY**.....  
Dr. C. P. McConnell and assistants
2. **CORRECTIVE GYMNASTICS**  
Dr. A. A. Gour
3. **PRACTICAL MINOR SURGERY**  
Dr. James B. Littlejohn  
Dr. L. J. Blakeman
4. **SURGICAL DIAGNOSIS**.....  
Dr. James B. Littlejohn  
Dr. L. J. Blakeman
5. **OBSTETRICS** .....
- Dr. Blanche M. Elfrink
6. **TECHNIQUE** .....
- Dr. H. H. Fryette  
Dr. J. C. Groenewoud  
Dr. C. H. Morris
7. **DIAGNOSIS OF NERVOUS AND MENTAL DISEASES**  
Dr. L. Van H. Gerdine
8. **MAJOR SURGERY** .....
- Dr. James B. Littlejohn  
Dr. L. J. Blakeman
9. **URINALYSIS**.. Dr. F. M. Nicholson
10. **GASTRIC ANALYSIS**.....  
Dr. F. M. Nicholson
11. **FECAL ANALYSIS**.....  
Dr. F. M. Nicholson
12. **DIAGNOSIS** .....
- Dr. James B. Littlejohn  
Dr. L. J. Blakeman
13. **LABORATORY DIAGNOSIS**..  
Dr. F. M. Nicholson
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Chicago, Ill.



**"Course of Study"**

"The course of study shall cover four calendar years of not less than thirty-two weeks each year, and at least ten months must have intervened between the beginning of any course and the beginning of the preceding course.

"Eighty per cent of actual attendance in all the subjects of the course shall be required, and each student must have a passing grade in each subject. Seventy-five per cent on final examination papers must be kept on file for at least one year, and shall be open to inspection by a duly appointed agent of the A. O. A.

**"Minimum Required Curriculum"**

Anatomy .....	600
Physiology .....	300
Biology .....	64
Pathology .....	250
Embryology .....	60
Histology .....	160
Chemistry .....	320
Bacteriology .....	160
Hygiene .....	45
Dietetics .....	32
Principles of Osteopathy.....	80
Osteopathic Technique.....	160
Hydrotherapy .....	16
X-Ray .....	32
Osteopathy, general diagnosis and treatment .....	1,200
Ear, Nose, Throat.....	60
Eye .....	60
Surgery .....	320
Gynaecology .....	145
Obstetrics .....	150
Jurisprudence .....	6

4,320"

I have made these lengthy extracts in order to show just what the meaning of the period of transition in which Osteopathy in the United States is passing through.

I add a few more to illustrate it still further:

"Let the word *education* be our key—not alone for our college work, but for our associated efforts. The great object is to take the student, and the practitioner, who has not seen the vision, to a point where he can see Osteopathy. Formerly, he could get a vision of it in two years, because he was determined to get a view of it. He knew he wanted

**DR. H. F. MORSE WINS SUIT**

Dr. H. F. Morse of Wenatchee, Wash., won in a \$20,000 damage suit brought against him recently but lost his fees of \$169.

The suit arose over the reduction of a bilateral dislocation of the sixth cervical vertebrae in a patient of 68 years.

Drs. Waldo and Caster testified for Dr. Morse.

that view. He had seen those who had the view and he knew their earnestness and singleness of purpose and their success. Later it required more time, as we ourselves contributed and as other sciences have contributed, much which must be incorporated in the study of Osteopathy—and as Osteopathy widens into the common ground with other systems of practice, and particularly as other forms of practice, become less characteristically drug systems and approach our own, it requires a longer time for the student to get the vision clearly.

"Then again the profession needs a revival" . . . "We are not putting Osteopathy first as we once did."

(Editorial in Official Journal, October, 1916.)

"Then to meet the demand from without and within the profession our schools have gradually extended the course of study and have raised the entrance requirements which, of necessity, place financial burdens upon the colleges taking this step.(Continued to Page 150)

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A mild climate, rest, diet, baths and ideal surroundings combined with Osteopathic care is what your post-influenza and chronic cases need.

Our profession needs equipment and endowment for research work. All profits of OTTARI go ultimately to the A. T. Still Research Institute. No dividends nor salary go to the management, and our books are open to any accredited representative of the Trustees of the R. I.

Any patient can be well cared for at OTTARI for forty dollars per week—including all professional services, board and room—but we have suites and choice rooms at higher rates. Private and semi-private nurses cost extra, but nurses are provided at no extra cost to carry out all orders of the physician.

Help your patients—who will thank you, help your profession—that has already helped you, by recommending OTTARI.

Descriptive literature on application to OTTARI,

R. F. D. No. 1,

W. Banks Meacham, D. O., Asheville, N. C.  
Physician-in-Charge.



## Osteopathy

(Continued from page 149)

"The colleges are not doing this for their own gain or glory. Naturally they would prefer to accept only well prepared matriculants, and they would prefer to keep them long enough to make the best possible physicians of them, but the extension of the course came from a desire to render Osteopathy the highest service and to qualify the graduate for entrance requirements in the State. Practically all State legislatures have aided in bringing public opinion to the point where nothing less than the equivalent of a high school education and four years of technical study is recognized as equipping men and women for the practice of the healing art. Two courses were open to us, to continue on the three-year basis and accept regulation as a specialty, or meet conditions imposed for general practice.

"In going upon the four-year basis the colleges do not in any way discredit the work which they were able to do for the student is a three-year course. It has been a natural progression. True, the three-year course has been crowded, and perhaps that was not sufficiently long to round out a student for the duties

and responsibilities of practicing the healing art. And yet no one would deny that competent practitioners can be made in a three-year attendance at the best of our colleges. No doubt much better physicians can be made with another year of preparation, so that the raise to the four-year course has been partly to give the best educational advantages possible and partly to meet public sentiment and State laws. The condition which the colleges have now imposed upon themselves greatly increase the standing of Osteopathy, and the value of every competent physician's license will not be questioned. In justice to the solidarity of the profession the fact should be recognized that it is to our benefit that these changes, expensive, and even hazardous to some of the colleges, are made by them.

"If the activity of the profession is directed in favor of the colleges which are meeting those conditions, and if our activity makes it possible for these colleges to maintain the advanced ground they have taken, there is the assurance to the other colleges which may not have seen their way to take this advanced standing, and which we have every reason to believe they wish to take as soon as they can see the income necessary

toward carrying it out. (Editorial in Official Journal, December, 1916.)

"Other commendable decisions of the last convention mean much also to the foreign policy of Osteopathic development. For instance, a closer fellowship of our colleges in the direction of regulating education. The very serious and staggering criticism that our colleges exist for personal financial gain has interfered largely with the scientific reception of our theory. For the good of Osteopathy in general this must change. (Correspondence from President of British Association, Birmingham, England, December, 1916.)

"That Osteopathy has not grown as it should have grown in the past few years is due to the lack of earnest support in the college growth by the rank and file of the profession. This interest has not been alive for the reason that those who have best succeeded in almost every community have done so through straight Osteopathic work. And when they suspect that the character of work is not still being done by the colleges they doubt the efficiency of any other and do not interest themselves as they did ten years ago in making the colleges grow.

"The colleges may not be altogether to

## NOW OPEN

# The Laughlin Hospital

### Kirkville, Missouri

The Laughlin Hospital of Kirkville, Missouri, has just been completed and is now ready for your patronage. The hospital, which was built at a cost of over \$50,000, is a modern fireproof structure of forty-two rooms. Thirty-five of these rooms contain beds for patients. The building is built of the very best material and has every convenience that can be put in a hospital of this size. An electric automatic elevator has been installed, which means a great convenience. There are two operating rooms, one for general surgery and the other for orthopedics.

Dr. Laughlin and his associates will do an osteopathic and general surgical practice. Dr. Laughlin has secured competent assistants to help him in the various departments, of which there are the following:

- |                |                     |                    |                                   |
|----------------|---------------------|--------------------|-----------------------------------|
| 1. Osteopathic | 3. General Surgical | 5. Gynecology      | 7. Proctology and Urology         |
| 2. Orthopedic  | 4. Obstetrics       | 6. Nose and Throat | 8. X-Ray and Laboratory Diagnosis |

A Training School for Nurses will also be maintained, with a separate building for the nurses' home

For further information address

**DR. GEORGE M. LAUGHLIN**

**Kirkville, Missouri**

(See Illustration on Page 146)



blame for the condition of affairs which has come about. Our educational system has been passing through a formative period, shifting from a two-year to a three-year and on to a four-year course, and likewise restrictions to the matriculents through raising the entrance requirements. It has been necessary to add much materials to the present course which changes it considerably when compared with the old two-year course. The remodeled course also changes considerably the viewpoint of the graduate as to his line of practice, and the graduate under the two-year course which was definite and specific training along certain lines, seeing the difference in the attitude between himself and the newer graduate, believes that the latter is not as genuinely Osteopathic and withholds his active support and approval from the colleges. (Editorial in Official Journal, February, 1917.)

"There have been those among us in days gone by who contended that our particular spinal diagnosis should be all-sufficient, minimizing the advantages of physical and microscopic diagnosis. Happily, that time is past. We are now reaching out in all directions for every diagnostic advantage. If the older schools have in their splendidly equipped laboratories developed new methods, I maintain that we have a right to adopt them and make them our own. Pride and prejudice have too often spoiled the career of men. We

**DR. A. G. HILDRETH INVITES YOU**

**Pay a Visit to Macon on the Way to Chicago**

Dr. A. G. Hildreth, president of the Still-Hildreth Sanatorium, has invited any and all of the profession together with their families to stop and "bide-a-ween" at Macon while enroute to the Chicago convention.

**Wonderful Place**

To those who have not taken the time to visit the Macon Sanatorium may we say that they will find a wonderful institution doing a more marvellous work. The booklet which has just been mailed to the profession tells of the progress during the past five years and nowhere on the face of the earth will you find a place where such results are being obtained.

**47% of Cures**

Medical history is being given the lie every day at this institution where they bring patients pronounced incurable by curing them.

Visit this place and return home more enthusiastic about A. T. Still Osteopathy.

must avoid the pitfalls of these arch-enemies of success. What if sero-diagnosis did happen to be a by-product of a decaying medical school's effort to acquire a new therapeutic agent? Serum, therapy has been a failure but sero-diagnosis is not and it belongs as much to the Osteopath as to the allopath. Today even the layman talks of blood-pressure tests and blood analysis as most important in the determination of certain diseases. No Osteopath in the twentieth century will lack the equipment to determine either the blood pressure or the blood current."

**"DIAGNOSIS HAS BEEN PRACTICED AS AN ART RATHER THAN AS A SCIENCE.**

"Osteopathic diagnosis has been, in the hands of all too many of our practitioners, an art rather than a science, through no lack of principle and exposition but because our colleges were not alive to the fact that the impetus given to the mastery of our mechanics under the tutelage of the founder himself was lacking in some of his successors:

"The twentieth century Osteopathic student must early in his career determine whether his field will be cosmopolitan or provincial, for in our cities the general practitioner is passing and the day of the specialist is approaching. We have already in our ranks specialists in diseases of the eye, ear, nose and throat, dermatology, gynaecology, obstetrics, acute infectious diseases, pediatrics, orthopedic and major surgery."

(Address, Edythe F. Ashmore, D. O., before the Osteopathic Society of Greater New York, February, 1917.)

As an additional interesting and confirmatory fact it may be mentioned that in Ohio the Osteopaths, having secured splendid provision for their own system and exemption from the regular medical examinations, have now insisted upon and obtained the right to administer narcotics, although it was part of their original theory that drugs were anathema.

(Continued on page 156)

**OPPORTUNITIES CHICAGO OFFERS**

**Osteopathic Convention  
June 30—July 3**

**Doctor Andrew T. Still  
Doctor E. Hartley Pratt**

These two giants stand side by side in modern therapeutic advance.

One gave us Osteopathy. The other gives us Orifical Surgery.

These two healing measures work hand in hand. Orifical measures add to Osteopathic Efficiency. Peripheral Sympathetic lesions produce as positive and harmful conditions as do central lesions of the spine.

Complete your armamentarium for handling baffling stubborn, chronic cases. Our next clinic for graduates and advanced students will be held the last week in June.

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Write for booklet "Satisfied Students" and other information.

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# Osteopathic Truth

A MONTHLY JOURNAL OF  
OSTEOPATHIC PROGRESS

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MAY, 1919

**THE GOSPEL ACCORDING TO YOU**

"You are writing a Gospel,  
A chapter each day,  
By deeds that you do,  
By words that you say.  
Men read what you write  
Whether faithless or true.  
Say! What is the Gospel  
According to YOU?"

**NO OSTEOPATHY**

**Minnesota Strikes Deep**

**Candidates for License Lack Fundamental Conception of Osteopathy**

The following resolution was passed at the last business meeting of the Minnesota State Board of Osteopathic Examiners, March 11 and 12:

Whereas: The candidates examined by this Board for Licenses to practice as Osteopathic Physicians and Surgeons show such a lack of conception of Osteopathic theory and practice, that hereafter the Board will deem it essential that a better knowledge must be shown by graduates before a certificate to practice will be issued.

A copy was ordered sent to all the colleges and the secretary of the A. O. A.

**Frank**

The resolution needs no elucidation as it says in plain United States just what it means.

Frankness is a trait of character which is to be commended, and as we draw toward the close of our fiscal year as a profession, it would be well to face ourselves and to frankly discuss questions of importance.

We should profit by the mistakes of the past year and the mistakes made by competing professions. We should not fool ourselves into believing something that ain't. Looking at and discussing our problems frankly will harm no one who honestly wishes for the advancement of A. T. Still Osteopathy, and it will make the man squirm who desires our downfall.

Let us be frank—hew to the line letting the chips fall where they will.

**Shameful**

Yes, it is shameful that any State Board of Osteopathic Examiners who are examining only students from schools of Osteopathy should even admit, without putting it in the form of a resolution, that such students did not have a conception of Osteopathy.

To Dr. Still we can well imagine that such an admission would be a terrific shock. To those who truly believe in Osteopathy, and have found by bitter experience that Osteopathy will do all Dr. Still claimed for it, such an admission is a disgrace.

What are schools of Osteopathy for?

What are schools of Osteopathy supposed to teach?

What is the standard of measurement?

Who should say what those school shall teach?

How will it be accomplished?

**Whose Fault?**

A rather frank question and blunt, but nevertheless right to the point.

Whose duty is it to see that the students are taught real A. T. Still Osteopathy? Frankly, it is the duty of every former graduate from an Osteopathic School to see that the new students are taught as well as they were twenty years ago. That duty may be manifested through the power given the Department of Education of the A. O. A., to require certain things from the schools in lieu of recognition. It is not essential that you spend any time with your Alma Mater or any other school, but it is necessary that you co-operate with all the other members of your own profession in guiding the destiny of our future practitioners.

The Department of Education at the present time does not possess any definite power with reference to the schools and what they shall teach, but the Trustees of the A. O. A., do possess a power, whereby they may force action upon suggestions made by the Department. The Department should have definite powers, so stated in the By-Laws of the A. O. A. in order that they may properly guide the teaching of our new students. You will have an opportunity at the coming convention to vote for or against such a Department.

Dig up your last February "Truth" and again study the amendment to the By-Laws of the A. O. A., as given on page 105. Think it over carefully and be prepared to make it better when it comes up for vote. Will the adoption of this amendment make it impossible for any school to teach other than A. T. Still Osteopathy, and forever unnecessary for any State Board to adopt a resolution that candidates are lacking in the foundation stone of our practice.

Think of it, NO OSTEOPATHY, yet asking for a license to practice Osteopathy.

NO OSTEOPATHY and called a Doctor of Osteopathy.

NO OSTEOPATHY—What were they going to practice?

WHOSE FAULT?—FRANKLY OURS.

**MRS. A. G. WALMSLEY DEAD**

Evalyn Overholt Walmsley, B. A., wife of Dr. Asa G. Walmsley of Peterborough, Ontario answered the call of Her Maker on Sunday, April 13th, 1919. Mrs. Walmsley had been sick for quite a long time prior to her death.

The interment was made in Buffalo, N. Y.

The sympathy of the entire profession goes out to Dr. Walmsley.



**WILLARD WINS**

**Defeats Kiro's**

**Opinion Notwithstanding**

**Asa Willard Would Make An Excellent A. O. A. President and He Deserves the Honor**

"The Fountain Head News," a sheet mailed out to Chiropractors by B. J. Palmer, head of the Chiropractic outfit at Davenport, Iowa, contains the following:

**"MONTANA TAKES THE COUNT OF TEN."**

The following letter explains the position clearly.

March 25, 1919.

Dr. B. J. Palmer,  
Davenport, Iowa.

Dear Doctor: We thought we could muster enough votes in the Legislature to defeat the amendments to the Chiropractic law, but the M. D.'s added their strength to that of Willard's (Osteopath) and were too strong for us. . . .

Section 5 has been amended so as to read as follows: "Any person wishing to practice Chiropractic in this state, after March 15th, 1919, shall be a graduate of a chartered school of Chiropractic in which he actually attended a course of study of at least three years of nine months each, preceded by a four year's high school course."

Truly yours,

F. G. MOORE, Secretary-Treasurer

It might be remarked that the vote in re this amendment which was so objectionable to the Chiroso because it forced them to meet reasonable standards was 33 to 5 in the Montana Senate, and relatively the same in the House.

**KIRO'S PROFIT BY OUR MISTAKES**

**B. J. Curbs Mixer**

**"CONVICTED—AND WHY?"**

The following is a bit of testimony, recently brought out in a U. C. A. trial. As names and locations count for naught, we will omit all identifications. After you read it you will see why this chap was convicted for "prescribing and practicing medicine."

It serves him right. He should have been convicted. However, let it also be said to the credit of the Chiropractor, and in his own behalf, he states this was the first and only time that he was ever

**FIGHT FOR OSTEOPATHY**

March 18, 1919.

Dear Doctor Vastine:

I have just recently returned from an army camp where I have been for a year and I am spending considerable time trying to catch up in my reading and I have read with much interest your straight from the shoulder article in February Truth. That was a remarkable effort to arouse the profession from its lethargy and you are to be congratulated and should receive the thanks of the bulk of us. The tenets of Osteopathy are as strong as ever, just as they were when Daddy blazed the trail, but there are so many weaklings who are trying to hold to these principles with one hand and with the other they are petting the medical tiger who is licking his chops, watching, waiting for his opportunity to tear them to pieces.

Our system of educating students is so commercialized that it is strangling the truth out of Osteopathy. Its principles are held very sacred, but far more secret, by the faculty. I am entirely incapable of expressing myself in regard to our colleges, but I do know that unless a very radical change is made in their management and made at once, in 1919, we might as well hang our harps on a weeping willow and sing Osteopathy's dirge.

The one supreme effort should be made in Chicago this summer and we should begin now for the fight. Keep up the good work and let's fight with everything that is within us. \* \* \* Let us not allow the future of Osteopathy to be behind it as long as we have the ability to FIGHT.

Fraternally yours,

(Signed) M. W. HENDERSON,  
Clarksville, Tenn.

guilty of doing what he herein admits that he did. He states that he was urged to do so by this MEDICAL SPY.

Which leads us to this question: WHO is and who is NOT a medical spy? Can YOU tell the difference? Nay, not until after you are arrested, tried and convicted and THEN it is too late.

There is only ONE answer to such situations. Be honest, Chiropractically WITH EVERY SOUL WHO COMES TO YOUR OFFICE. You can't slop once and expect to get away with it

The evidence which convicted this defendant is as follows:—

A good bit of advise for us. Treat our patients OSTEOPATHICALLY, first, last, and always.

**JOHN B. CALDWELL DEAD**

**Age 97 Years**

**Saw Osteopathy Grow**

John B. Caldwell, Kirksville's oldest citizen died Thursday morning, April 24, 1919.

Mr. Caldwell is the father of Misses Margaret and Etta Caldwell who for years have conducted a boarding house for students and teachers of the A. S. O. and the Normal. Thousands of A. S. O. students have eaten at their table and were intimately acquainted with Mr. Caldwell whose genial and cordial greeting at each meal time would drive dull cares away. His warm welcome upon returning to school in the Fall has made an impression upon the thousands who have come under his roof.

Mr. Caldwell moved with his family to Kirksville on April 28, 1892. He saw the first Osteopathic School established by Dr. Still and has watched it grow from a small institution of a few students to one of eight hundred. Mr. Caldwell and Dr. Still were intimately acquainted and many are the tales he has told of the early struggles of Dr. Still.

We are assured that the doctors who knew Mr. Caldwell join us in the appreciation of the character of the man who has passed into the Great Beyond and in the extending of sympathy and love to his faithful wife and daughters; Mrs. J. A. Bushnell of Portland, Ore., Mrs. Grant Corbin of Altus, Okla., Mrs. Lulu Caldwell Davis, Misses Margaret, Etta, May and Dola Caldwell of Kirksville.

**WASHINGTON BOARD ORGANIZED**

**Dr. W. E. Waldo, President**

The Washington State Board of Osteopathic Examiners was organized March 8th, with Dr. W. E. Waldo of Seattle as president; Dr. E. A. Archer of Pullman, vice-president; Dr. W. T. Thomas of Tacoma, secretary-treasurer Dr. Frank Holmes of Spokane and Dr. E. B. Neffeler of Everett are the other members.

Dr. F. J. Feidler of Seattle and Dr. C. T. Smith of Aberdeen were originally appointed to the Board but did not accept and Drs. Neffeler and Waldo were appointed to fill their places.

**First Examination**

The first examination will be held in Tacoma, August 5th, 6th, and 7th. The surgery examination will be held on the seventh.



**FREE VOLUMES FOR CLINICS**

We are pleased to note the activity on the part of the D. Os. in establishing free clinics for children.

The League For the Prevention of Spinal Curvature suggested some two years ago that individual D. Os. start clinics for the present, and not wait for the D. Os of a city as a body to establish a clinic. Such was tried in several cities, and the lack of unity made it impossible for the clinic to be sustained. Individual clinics are almost invariably a success, and we hope to see dozens started this year. To those starting clinics and sending in a newspaper clipping dated after June 1st, we will send free the two volumes of the League Journals bound in cloth. They sell for \$2.00 each. They are generously illustrated with half tones and zinc etchings.

Get busy, doctors, and start your clinics and send in your clippings to show you have let the people know that you have started a clinic. We have a few of these books on hand and will give them out as long as they last.

Write THE NATIONAL LEAGUE FOR THE PREVENTION OF SPINAL CURVATURE.

**BIG BENEFIT CARNIVAL FOR CHICAGO OSTEOPATHIC HOSPITAL**

A large attendance crowded the Chicago Arena on the evening of May 1st at the Dancing and Ice Carnival. It was given for the benefit of the Chicago Osteopathic Hospital and is the only occasion when the Arena management has ever considered an outside function of any kind.

The Chicago Osteopathic Hospital received one-half of the door receipts above the first five hundred. Notwithstanding the rainy night, about one thousand people were present. There was a considerably greater number who bought tickets.

The elaborate poster, copies of which were distributed throughout the city to the number of about one thousand, was drawn gratuitously by Roy Best, the well known commercial artist of Chicago.

Several special attractions at the rink and on the dance floor were a part of the evening's program. The May Pole dance on ice skates was given by a dozen little girls prettily dressed in white dresses with colored sashes. The difficult figures they gave were gracefully performed. They were all students of June Rogers who, with Jack

Davis—both professional American exhibition skaters of considerable note, gave demonstration of their skill.

The friends on both the Rink and Dance floor were thrilled with the beautiful singing of Gladys Leigh, the much loved opera singer from Toledo. The fancy dancer, Minnette Bachman, rapidly becoming popular on account of her beautiful dancing, gave several pretty dances.

For the purpose of further enlightening the public regarding the big services being rendered by Osteopathy in advance of the old schools of medicine, 500 Chicago Osteopathic Hospital year books and about 3,000 folders were distributed among those present. Practically none of these were left in the building after the crowd had departed.

Dr. Maude B. Sands of Wilmette, and Dr. James Fraser of Evanston, arranged the details of this benefit for the Chicago Osteopathic Hospital. The services of the entertainers were donated.

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WE WILL HAVE FOR SALE OR ORDER "RESEARCH AND PRACTICE OF OSTEOPATHY" A. T. STILL CLOTH, \$6.00 LEATHER, \$8.00 AUTOBIOGRAPHY OF A. T. STILL... \$1.50 EVERY D. O. SHOULD KNOW THESE BOOKS FROM COVER TO COVER.

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**INCREASE THE ARMY OF PHYSICIANS IN THE FIELD**  
Do your bit to help increase the Army of Osteopathic Physicians in the Field. Just as a war is won by the force of numbers, so the great success in Osteopathy can be obtained by each Osteopathic Physician sending a small division of students to the Osteopathic Colleges.

How can the Physician do this—with the daily task of attending to his clientele? It is very easy as far as the physician is concerned, and it will render him manifold benefits by making it possible for the Colleges to enlist the men and train them to enter the field of combat for Truth. In the future, under these circumstances, the practitioner will not be fighting the cause so nearly single-handed.

Send the Chicago College of Osteopathy the names and addresses of ALL the students in the Senior Class of the High School in your home town, at as early a date as possible;—a very little job netting big returns to you. We will send them literature by return mail and acquaint them with the benefits of practice and treatment of Osteopathy.



**Looking in the Glass or Looking in a Book**

If "Concerning Osteopathy" was at her hand—she would be reading it while waiting for treatment.

It has a convincing appeal. It is just what you want in the hand of every patient.

It is just what your patient wants, too.

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Carthage, N. Y.

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27 Monroe Street Chicago, Ill.

This Space Donated by "Osteopathic Truth"



# The Proof of the Pudding

In this department it is intended to prove scientifically by X-Ray and other up-to-the minute laboratory methods that the Osteopathic Conception of Disease is correct

Edited by Earl R. Hoskins, D. O., of the A. T. Still Research Institute Staff  
Address him at 4347 Greenwood Ave., Chicago, Ill.

## UPPER DORSAL LESIONS AND HEART REGURGITATIONS

In several well verified instances prospective recruits who were at first re-

there never had been a heart lesion present in spite of the fact that enlistment had been refused on that ground shortly previous.

This fact did not need a war to bring it out as it has happened many times to nearly every Osteopath. The patient comes in with a regurgitant murmur—usually mitral but often combined mitral and tricuspid with more dilatation than hypertrophy.

The Osteopath finds and corrects an upper cervical lesion, obtains a better blood pressure ratio, lessened area of relative dullness without much change in area of absolute dullness. The patient comes in with a definite pathologic syndrome of a regurgitant heart lesion and under Osteopathic care loses it. A great many of these cases have nothing to indicate a congenital condition nor

wall and ordinarily normal blood pressures may be sufficient to lead to a great dilatation.

The auriculo-ventricular septa contains more fibrous tissue in proportion than do the walls so there is formed an indentation in the otherwise even con-

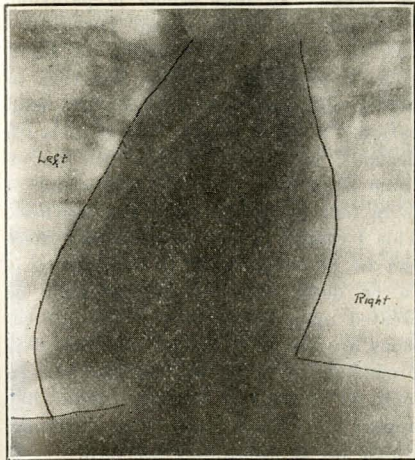


Fig. 1. Normal heart. Note smoothness of both right and left contours. This is recovery obtained from case shown in Fig. 4. Plate taken at a distance of 60 inches from tube target, with intensifying screen technic in one second time.

fused admission to the army or navy because of heart lesions have in a short time passed the examination after having had Osteopathic care. In some cases the second examination has been before the same examiner; in all the regime is sufficient to rule out personal differences of acuity in the examiners. The question was not entirely a matter of compensation as in two cases at least the second examiner loudly maintained

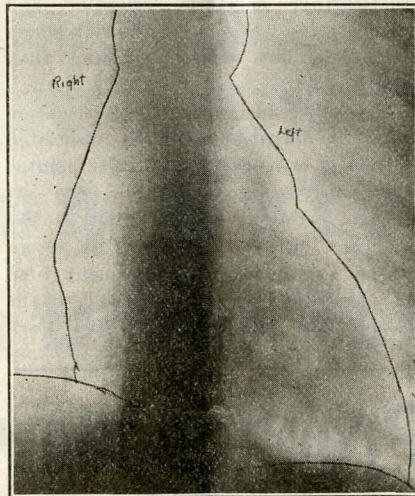


Fig. 3. Mitral regurgitation with dilatation. Murmur ceased under one week's Osteopathic care. Primary Osteopathic lesion, a fourth dorsal with definite traumatic history. Plate taken at a distance of 60 inches from tube target.

any local infection nor other etiology save that of the Osteopathic lesion in the upper dorsal.

It is not improbable that the lesion causes a lessened tonicity first in its own complicated distribution. The segments above and below in an attempt at compensation are disturbed sufficiently to interfere with the function and tonicity of the heart fibres to which they are distributed.

Any ordinary extra load which is thrown upon the heart, such as may be every day occurrences to all of us, finds in this heart a weakened heart

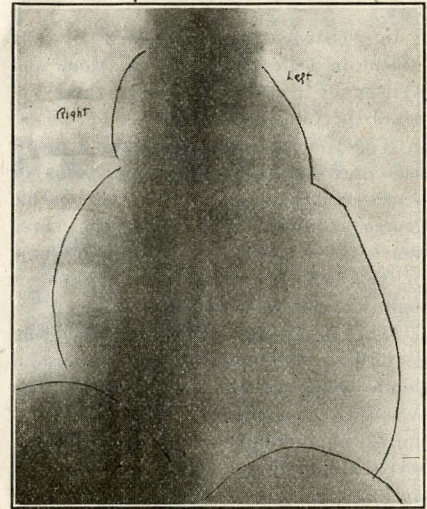


Fig. 4. Heart dilatation with mitral and tricuspid regurgitation. Clinically and Radiographically a normal heart after two months Osteopathic care. Primary Osteopathic lesion at second dorsal. Plate taken at a distance of 60 inches from tube target.

tour of the left side of the heart as seen on the fluoroscope or radiograph.

The fibrous rings forming the seat and support of the heart valves are enlarged as the walls are distended causing an increased valve area for the passage of blood. There is no mechanism for enlarging the valve flaps so that eventually there is more opening than covering for it and a regurgitation results. (McConnell & Teal, pp. 588.)

The chorda tendinae of the valves in the auriculo-ventricular septum are primarily of fibrous tissue. They may not stretch in synchronism with the muscular walls so may not be able to extend from the new position of their bases to the valve orifices. Hence the valves are held open at the period in the cycle that they should be closed and again a regurgitation is present.

In neither of these cases is infection with growth of vegetations upon valve surfaces a factor yet the regurgitation is there and if the primary cause is removed the orifice of the valve returns to the size that the valve flaps can cover efficiently and the chorda tendinae may turn to their range of normal action with the result that the heart can pass any sort of an examination because the pathology has gone with the return to normal of its innervation.

Earl R. Hoskins, D. O.

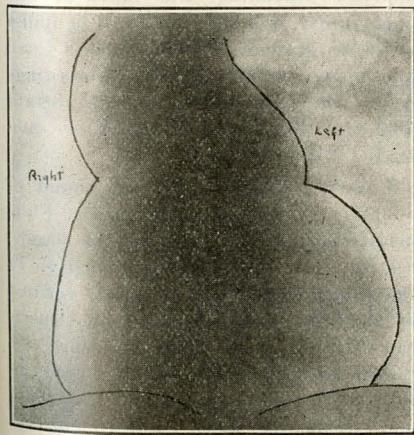


Fig. 2. Heart dilatation with mitral tricuspid regurgitation. Under Osteopathic care murmurs ceased with a slight reduction of dilatation. Primary Osteopathic lesion at third dorsal. Plate taken at a distance of 60 inches from tube target.



## OSTEOPATHY

(Continued from page 151)

In "Osteopathic Health," published in Chicago, June, 1915, it is said (p. 2):

"Now the Osteopathic physician makes exactly the same examination as the surgeon, but in addition he makes another examination that is peculiarly his own."

In "Osteopathy," published by the American Osteopathic Association, and written by Percy H. Woodall, there appears the following statement (p. 86):

"The time spent in acquiring a medical education is usually four terms of seven months each. The Osteopathic course requires, as a minimum, three years of nine months each, and some of the schools require four terms of eight or nine months each.

"The American Medical Association requires a minimum of four thousand hours' work in the four terms. The American Osteopathic Association requires a minimum of three thousand, seven hundred and thirty-one hours of work in the three terms."

(p. 88): "Those schools which maintain the four term course require nearly five thousand hours' work. If the greater amount of time devoted to bacteriology and surgery in the medical colleges be considered, it will be found in the main that there is but little, if any, difference in the number of hours required by the two schools of treatment, and several Osteopathic colleges actually give a longer course than is required of medical colleges.

"The impression that the doctor of medicine is better educated to care for

the sick or to give advice in matters of illness than the doctor of Osteopathy is erroneous. The subjects taught in the two schools are practically the same, except that the Osteopathic physician, disbelieving the curative power of drugs, devotes little study either to materia medica or pharmacology. He substitutes for these the principles and practice of Osteopathy.

(p. 93): "It must now be clear to the unprejudiced mind that the Osteopathic physician is the peer of any. He makes his own diagnosis after an examination that is unique in its thoroughness. His knowledge of the body and of disease is thorough and complete; his manipulative skill is equal to that of the most dexterous surgeon. His education is thorough, comprehensive and practical. In addition to the latest medical ideas and theories regarding the causes, diagnosis and treatment of diseases, he has his own distinctive and peculiar methods. He rejects only that part of medical teaching that has failed in results and applies instead of these unreliable methods others that are trustworthy, harmless, scientific and demonstrable. Osteopathy is not something less but something more than medicine."

The American Osteopathic Association has, in co-operation with the Associated colleges of Osteopathy, as I have pointed out, endeavored to standardize the colleges and their course of study to be pursued. But their standard as shown in the appeal for an endowment fund for the Still Research Institute falls short of the requirements of New York

State, both in regard to staff and length of course, while its monetary strength is in "resources" of \$50,000, instead of, as in New York, "apparatus", equipment and resources of 50,000. They omit altogether any provision for six full-time salaried instructors; provide a three years' medical course each of thirty-six weeks, instead of a four years' course of seven months each, and do not require for admission the usual four years of academic or high school preparation.

It must be obvious that Osteopathy has, in theory and intention at least, gone a long way in the direction of higher and more scientific medical education. Whether it has done it in truth depends, of course, on how its curriculum is carried out and what standard is in fact set by students and teachers. This I cannot pronounce upon, but there can be no doubt that if Osteopathy is to be dealt with at all, it must be treated upon the basis that its pretensions are seriously meant and that it is preparing to make use of the modern methods of education, even where they appear to trench upon the formulae which its originators prescribed.

Among the documents submitted with this report will be found an address by Mr. Abraham Flexner before the Governor of the State of New York in 1914, in which he pointed out the objections which the General Education Board of that State had to the proposed bill then before the Governor for signature, giving Osteopaths the rights of regularly qualified physicians, which is full and comprehensive on the subject.

I may add that I gave those representing the Osteopaths in Ontario an opportunity of dealing with the statement made by Mr. Flexner in his general report in 1910, which he repeats in this address. Advantage was taken of this opportunity, and the result will be found in sworn statements before me as Commissioner, included in the proceedings before the Commission, and in certain affidavits then produced, which are submitted with this report.

I do not think that I am bound to adopt every line or letter in Mr. Flexner's report, but it must not be forgotten that his statements are, as given in the introduction to the report, verified by the data in possession of the American Medical Association, likewise obtained by personal inspection, and go forth with the sanction of at least two, and frequently more, independent observers. But, after all, if the report has any value at all it must be found in the reasoning upon which its conclusions are based.

I have given the fullest weight to

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those affidavits, which in some respects establish the particular point at issue. But I do not see that even the improvement in specific equipment mentioned in these statements and affidavits entirely answers the indictment made against these colleges as to their efficiency in 1910.

On the clinical side they, or the statements made by the deponents reveal a situation which, if variety of experience and numbers of patients available for instruction is considered, is clearly entirely inadequate. As, for example, at the Los Angeles College the hospital had 15 beds (p. 1156) and in Boston 10 to 15 beds (p. 1160) and in a new building 20 beds. No hospital facilities existed at the Still College, Des Moines, in 1909 (p. 1178) the Littlejohn Hospital has 16 beds (p. 1644).

It should, of course, be added that Osteopaths hold what may be described as out-patient clinics; that is, on those that come for treatment. In addition to Littlejohn Hospital the students of the Chicago College of Osteopathy have access to Cook County Hospital.

The strongest fact in the statement made by the American Osteopath Association in its appeal for an endow-

ment fund, the admission by the Philadelphia College quoted from its year-book, and the application for and reception of registration by the progressive college in Chicago, as well as the total and absolute failure of Osteopathy to make the smallest attempt in Ontario to develop and teach its theory.

*Dr. Barklie*, representing the Drugless Physicians, in his address before me said that during the last two or three years medicine was creeping into the Osteopathic colleges, and added, "We do not wish this in Ontario."

At present, the United States Osteopathic Colleges, save one, or possibly two, are unable to fill the requirements of the State of New York. It is a serious thing to propose the admission to practice of Osteopaths who have graduated from colleges admittedly below that standard, when the best Osteopathic institutions are voluntarily striving to attain a position enabling them to obtain what is practically equality with the best medical colleges. This is particularly so when these now seeking admission were educated while there was in many ways direct opposition to the most cherished and successful theories and practice of modern medical science.

In addition to the light thrown on this question by the curriculum of the different colleges, one of the principal colleges, i. e., the Chicago College of Osteopathy, has applied for and been granted recognition by the State Medical Board of New York. This in itself is an admission that osteopathy does not desire to be treated as a separate sect, but is anxious to be accredited as a fully-equipped medical school.

(Concluded next month)

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# The Osteopathic Profession Must Have A Definite Program

Edited by Geo. F. Burton, D. O., 220 Story Bldg., Los Angeles, Cal.  
(Dr. Burton Invites Correspondence)

## OSTEOPATHY TENTATIVELY OUTLINED AND DEFINED

Dr. Andrew Taylor Still, the Founder of Osteopathy, was born in Lee County, Virginia, in 1828; and died December 12th, 1917, at Kirksville, Missouri, his home and the birthplace of his beloved Science.

About ten thousand intelligently trained and scientifically developed Osteopathic practitioners attest the merits of the Therapeutic System of Osteopathy which dates its discovery from the year 1874, when Dr. Still, the originator, made the following remarkable statement:

"A disturbed artery marks the period to an hour and minute, when disease begins to sow its seeds of destruction in the human body. That in no case could it be done without a broken or suspended current of arterial blood which, by nature, is intended to supply and nourish all nerves, ligaments, muscles, skin, bones and the artery itself. **THE RULE OF THE ARTERY MUST BE ABSOLUTE, UNIVERSAL, AND UNOBSTRUCTED, OR DISEASE WILL BE THE RESULT.** All nerves depend wholly upon the arterial system for their qualities, such as sensation, nutrition and motion, even though by the law of reciprocity they furnish force, nutrition, and sensation to the artery itself."

### I. Tentative Outline of Osteopathy.

1. Osteopathy is a complete scientific therapeutic system.
2. Osteopathy recognizes generic man as a complete or perfect machine.
3. Osteopathy holds that man, in perfect health, in perfect correlation of parts, with proper food and clothing and shelter, has within himself all the elements, nutritional and even chemical, for sustenance and self-repair; and that he is only limited in usefulness, under the above mentioned natural environments, by the God-given vitality which is his portion.

According to the Founder of Osteopathy, "The Rule of the Artery is Supreme." It is absolutely necessary to have and to maintain an uninterrupted and an unobstructed flow of normal arterial blood in order that generic man, as a perfect machine, may be kept in the perfect equipose of balanced nutrition.

4. Osteopathy acknowledges that

there must be complete accord of mental suggestion with material manifestation for man to reach the high ideal of the perfect machine of osteopathy.

"As a man thinketh in his heart so is he."

"A sound mind in a sound body" is the final test.

5. Abnormal man, by reason of sickness, injury, starvation, poison, or what not, can only reach normality by having all of these withering and destroying extraneous agents removed so that the natural fluids and juices which possess all the elements of sustenance and self-repair may hold sway.

6. The law of restoration of the abnormal to the normal may thoroughly be designated by the proper use of the term adjustment. Adjustment, under the Osteopathic regime, deals with every vital portion or cell of the human body. Ninety per cent or more of the corrective or adjustive work is performed by manipulation; yet the genuine Osteopathic practitioner is alive to the fact that the small per cent added to the ninety per cent or more of a strictly manipulative character, may be required to be reduced, adjusted, equiposed, correlated, or even removed by some unharmed or wholesome or reasonable artificial process. Hence Osteopathy recognizes as adjustments, the following, viz:

- a. Hydrotherapy.
- b. Heat and cold.
- c. Food, shelter, clothing, rest and right thinking.
- d. Antidotes for poisons maliciously or accidentally administered.
- e. Asepsis, including the artificial assistance of antiseptic agents, when absolutely necessary.
- f. Surgery and its procedures.
- g. All helpful agents of diagnostic value.
- h. Strictly autogenous serum. Every man is a law unto himself. No living man should be permitted to draw from or give to another any force or fluid which by reason of inheritance, acquisition, or accident may vitiate the second system.

The following epigrammatic quotations of Dr. A. T. Still, the Founder of Osteopathy, are here significantly appropriate, viz:

"The integrity of the structure determines the integrity of the function."

"Man is a self-oiling, self-regulating, self-reparative, animated machine. Given

proper air, food and water, the machine will function perfectly, so long as the parts are maintained in perfect alignment. When order in all parts is found, disease cannot prevail."

"A lesion precedes and produces the effect known as disease. This is the soul and body of Osteopathy as a healing art."

"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, drugs or kindred poisons."

### II. Tentative Definition of Osteopathy.

1. Explanatory suggestions.
  - a. Osteopathy is a complete scientific therapeutic system.
  - b. Osteopathy is the only therapeutic system which acknowledges generic man as a perfect machine.
  - c. Osteopathy is the only therapeutic system with which generic man as a perfect machine, under the right environments, generates and maintains all the chemical fluids and juices necessary for battery voltage and nutritional advantage.
  - d. Osteopathy is the only therapeutic system which depends upon manual manipulation up to 90 or more per cent aided or abetted by 10 or less per cent of artificial adjustment ranging from hydrotherapy to surgery for the complete adjustment of the abnormal to the normal.

### 2. Derivation Osteopathy. (Gr. osteo = bone + naOos = disease).

- a. A word chosen to convey the meaning of skeletal unbalance or bone-non-adjustment.
- b. A word coined by the Founder, Dr. A. T. Still, to represent his new system of therapy, which dates from the year 1874.
- c. A word in harmony with the other "pathies" of medical fame.
- d. A word which carries with it special significance as the bony skeleton or framework forms the fulcrums and levers with which the larger per cent of the manual manipulations of necessary corrections are made possible.

3. Definition. Osteopathy as a complete scientific therapeutic system is the science and the art of adjustment mainly of manual manipulation, aided or abetted by wholesome or unharmed artificial processes, wherein perfect physiological functioning is absolutely dependent upon anatomical integrity.

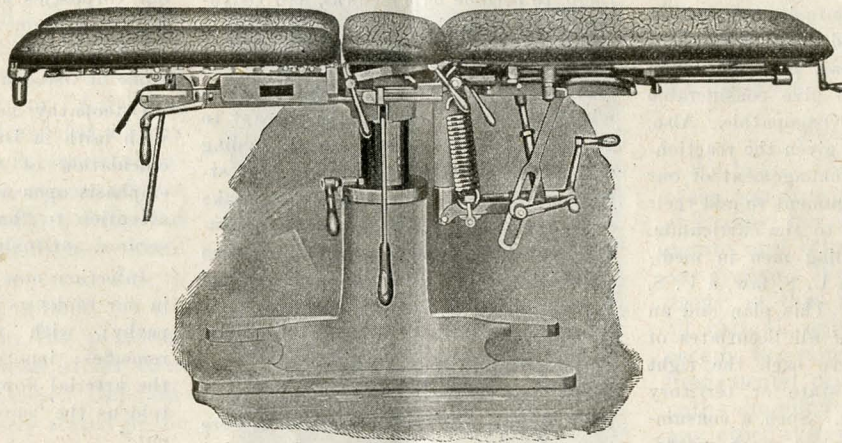
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## MIXERS

Walter J. Novinger, D. O.  
Trenton, N. J.

This article is intended to praise and commend, to show an appreciation of the great results accomplished by the faithful followers of Dr. Still's teachings, those who use "Our Platform" for their guide as they follow the ten commandments in the Book of Law.

It is also intended in a friendly spirit of constructive and helpful criticism of those who stray from the broad and open highway of truth into the byways that lead to the labyrinthian jungles of Nowhere.

Osteopathy today frankly is at its worst crisis. The confusion caused by all sorts of major and minor differences in our State laws has, in some cases, forced our schools to give considerable instruction not truly Osteopathic. Also, these same laws have given the reactionary elements in the management of our schools a plausible argument to add their meretricious vagaries to the curriculum. For many years leading men in medicine have advocated a U. S. law, a U. S. Board of Examiners. This plan and an annual registration of all licentiates of this Board would give each the right to practice in any state or territory under the U. S. Flag. Such a consummation would forever end much retarding confusion.

Why not draw up a model for such a law and in all states where legislation is undertaken follow this model as close as possible, with a view of bringing a uniformity of legal regulation of Osteopathy?

As Osteopathy (the A. T. Still unadulterated brand) is the only true and proven science of healing, the only one that does not change with the seasons and is based on demonstrated truth that is all explained and made clear in Dr. Still's teaching to his students and in his written works; also crystallized so none can misconstrue or go astray in "Our Platform" as written by the discoverer himself. Take this platform, take nothing from and add nothing to and live up to it in all your practice, and none except prejudiced or uninformed, those who are ever ready to talk about something of which they know nothing, will ever be against you, and these prejudiced or ignorant critics will have no standing in the courts of common sense, truth and justice: and by your good work in curing disease all critics will be discredited and confounded.

It is to those who, being seekers after truth, devoted their study to what Dr. Still had to teach, those who followed him and his loyal adherents are the ones who have already cured such large numbers of patients and by their results have brought the thinking world to respectful attention, that we have already gained much consideration in the courts and Legislatures, as well as from an ever-growing clientele; and this following is mostly from that class of people that from a material and social viewpoint causes the medical world grave concern, so grave indeed that they are divided in opinion whether to cease abuse and ridicule and by diplomacy and other wiles win us over, to get us to relax our vigilance, get us to mix with them, to become half medical, half Osteopath, half slave, half free.

That there is a well-laid plan to absorb us, suck our life blood, do to us what they did to Homeopathy, is easy to be seen; and that they are succeeding even better than they hoped for is mostly due to those in our own ranks and especially the more recent graduate,—these self-styled progressives, who openly boast how superior their eclectic method of using medicine, surgery, electricity, etc., make them to those who follow the master's teaching.

Did he not cure where all other methods failed? How often did he cure in one or two treatments when other Osteopaths had treated for months. Yes, truly Osteopathy is progressive, yes, in exact proportion as the Osteopath applies the right mechanical adjustive principle. Osteopaths and all cured patients, as well as many investigators, observers, honest and thinking medical men, now know that skeletal adjustment is the keynote, the keystone, the master key that marks the hour and day that changes from sickness to health. When one knows Osteopathy, understands anatomy, physiology and physiological chemistry, the form and function of the living machine and by close application of these ever present and easily verified natural and unchanging laws they will know how to bring order out of chaos, to bring their patients from a pathological to a physiological or normal state of highest possible efficiency. For, as Dr. Hildreth once said when answering a pompous skeptic, "If Osteopathy cannot cure, what can?"

For those who despair of becoming expert as body engineers, those who are, or feel they are, yet in the engine wiper class, let me say, look up not down, go to one of True Blue A. T. Still experts, the kind who never give drugs, seldom

need surgery. You will find a true friend, a helper; he will gladly work for and with you. I know, for I have needed help often and still do, and it is never denied. Stick with the Osteopaths, do not be a hyphen.

Let the medical people alone, form no alliances with them. Osteopathy for Osteopaths and for the healing of the ills of humanity.

## OSTEOPATHY'S NEEDS

Joseph H. Sullivan, D. O.  
Chicago, Ill.

We need more faith in the Creator's wisdom. The Power controlling the planetary bodies in their orbit, created our corpuscles and pointed their course in our system—normal coursing being perfect health, should be the cornerstone of Osteopathy.

Osteopathy needs more practitioners with faith in Dr. Andrew Taylor Still's elucidation of what disease is, more emphasis upon adjustment therapy—less attention to "bugs" and "bug-killers"—serums, antitoxins, etc.

Infection now is as commonly heard in our ranks as in the old defunct Allopathy; with resultant anti-infection remedies; ignoring the true germicide, the arterial flow to the part. Dr. Still told us the "cure was within, not without."

The result of nonadherence to bony lesion diagnosis, not constantly preaching its truth, allows our craft to drift into hostile waters. The line of demarcation is obliterated with its natural sequence, the M. D. being the Doctor, the Osteopath, his aid.

All Osteopathy's successes have been through the mechanical principle; they always will be. Diet, Hygiene, need no emphasis, we all use them. But our distinguishing mark must be the mechanical feature pure and simple, else we may as well prepare to go the way of the Homeopath—more's the pity.

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