

# **The Journal of Osteopathy**

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# THE JOURNAL OF OSTEOPATHY

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## \*OSTEOPATHIC ETIOLOGY OF DISEASE.

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I hold that our writing and speaking should be, like our best work, specific in character, the expression of our experience based upon a close adherence to accepted osteopathic principles. It is much easier to deal with glittering generalities than to discuss even in a semi-scientific way some of the problems that confront the average conscientious practitioner. I say "conscientious" advisedly—for it is true that we have osteopaths who from ignorance or perversity, make sweeping declarations about our own and other systems which the spirit of wisdom will not sanction nor the light of truth justify. The phenomenal progress of osteopathy affords no ground for the belief that by a wave of the hand other systems rooted in the instincts and affections of the masses will be overthrown, and by another wave of the hand, our own, however well anchored to scientific truth, will become the cherished object of public esteem. If there was ever a time when investigation of the sweat-drop kind was needed, it is now. For the growing public and legal recognition of the science, coupled with the bitter assaults made upon it by the representatives of a system whose proudest boast is its hoary antiquity—render it necessary that our fundamental tenets be based upon truth, and that our splendid results be directly traceable to demonstrable facts of science. Woe betide the tyro who vainly imagines that his college course has exhausted the limits of osteopathic philosophy, that further research and investigation are a needless exertion, that old systems shed no light on his pathway, that the last word has been spoken. I question seriously that Dr. Still himself, when thirty-one years ago he proclaimed his science to the world, had anything like a complete vision of osteopathy. It has been to him in all probability a perpetual revelation, an unfolding of truth as broad as the domain of biologic law.

With all our progress, I suspect we are yet in the border-land of our great domain with vast conquests of rich prospects for him who is willing to study—

\*Paper read before Texas Osteopathic Association at Ft. Worth, May 18th.



but barren of even the shadow of hope to him who is unwilling to pay this inexorable price for truth.

I wish now to present to you two principles which are distinctively osteopathic, and make application of them to a few specific cases that have come under my observation and care.

The first is that "structural disorders of the tissues, producing altered relations and positions of parts, are the primary factors in the production of nearly all pathological conditions." The second is that "the reparative and curative forces essential to restore physiological harmony are resident in the bodily organism, and are dependent for their normal activity upon the unimpeded flow of the blood stream and nerve current."

The first case cited is one of chronic constipation of nearly twenty years standing.

I deem no apology is necessary for giving, to some extent, the anatomic structure and relation of the organs and tissues involved in a case of this kind. For, from an etiological standpoint, we must account for such conditions as impaired circulation, weakened peristalsis, torpid liver, abnormal activity of secretory cells of the digestive tract, ptosis of the bowel, atonicity of abdominal muscles and other disturbances usually present in bad cases of constipation. The blood supply in the main to the parts involved is through the hepatic and superior mesenteric arteries and their branches, the vaso-motor control of which is of splanchnic origin.

The manifest importance of the liver's healthy action justifies a closer study of this gland, a cell of which constitutes both the anatomical and physiological unit of this organ. Bearing in mind the three-fold vascular conditions existing in relation to these cells, viz., the hepatic, portal and lymphatic circulation, and that the absorbed products brought by means of the portal vein are submitted to the metabolic activity of these cells whereby bile, urea and glycogen are formed, it is highly important that this vital mechanism be maintained in healthy equipoise if the processes of digestion, assimilation and elimination are properly performed. Whether the physiological effects of bile be antiseptic, whether it increases peristalsis, hastens absorption or finds its function chiefly as a fat emulsifier, does not concern us so much as the question of securing the normal activity of the liver through freedom of its governing forces. Now these emanate from the hepatic plexus, an offshoot of the cœliac, are composed of fibers of the splanchnic, pneumogastric and phrenic, accompany the hepatic artery and portal vein to the substance of the liver, the medullated fibers going to the coats of the blood vessels and the non-medullated entering the lobules and ramifying between the cells. The American Text Book of Physiology says it is doubtful if any mechanism in the way of special secretory nerves exist in the liver, the function of such mechanism being served by the vaso-motors which determine blood pressure.

Thus far we have considered some of the immediate potential factors involved in visceral activity. At the risk of being somewhat tedious, I think

it will be profitable to look into the origin and constitution of these nerves and centers which, under normal conditions, maintain and regulate these physiological processes. The splanchnics spring from the ganglia of the sympathetic ranging from the fifth or sixth dorsal to the first lumbar and are constituted by fibers passing from cells of the ganglia in conjunction with white rami from the cord. Now since the foundation of the sympathetic is constituted by medullated fibers which pass by means of these white rami from the cerebro-spinal nerves (Brown Seman says from sixth cervical to tenth dorsal), it becomes a matter of prime importance that their cells of origin be maintained in a healthy state. This can only be done through nourishment carried by the life-giving blood stream, having its origin in the anterior and posterior spinal arteries from the vertebral—supplemented by branches of the intercostal, lumbar and sacral. These latter, as we know pass with the meningeal (containing both somatic and sympathetic fibers) through the intervertebral foraminae to the pia mater of the cord and finally both the cells of origin of these nerves. With this statement of anatomical relations, we are better prepared to apply the two principles stated to the pathological condition found in the case in hand.

The patient was a man of fifty-four, former occupation, a surveyor, now a capitalist and philanthropist, of sedentary habits. For the past five years normal bowel movement had not occurred more than twice a year. All ordinary remedies, including drugs, mineral waters, massage and physical exercise had been employed, the only relief coming from the employment of the Hall treatment which, by the way, can only result in ballooning the rectum and destroying the tonicity of the lower bowel. Examination revealed rigid musculature of the whole splanchnic area, slightly posterior condition from ninth dorsal to mid-lumbar, liver somewhat hypertrophied, ptosis of bowel and relaxed abdominal muscles. These were the chief facts gleaned from physical diagnosis. The scybalous character of the feces and sluggishness of the bowel, evidenced improper functioning of hepatic and intestinal secretory cells, and a parietic condition of the vicero-motor nerves governing peristalsis. The question naturally arises what is the relation of this pathological condition to the anatomical abnormalities discovered? In other words may these structural disorders account for the condition of the patient, and if so how? It must be apparent to any searcher after truth that the spinal lesions found together with contracted musculature indicated, will not only affect local circulation and terminal nerves, but what is more serious, the effects may be and probably are transferred through the pathway of these nerves to the cell centers in the cord. Not only this, since Nature has no superfluous spaces, in the body, any muscular, ligamentous or bony derangement here must alter the foraminae, producing impingement upon or other disturbances of both white and gray rami, and the arterial, venous and lymphatic circulation of the nerves and cells which control either directly or indirectly visceral activity. A poorly nourished nerve or cell can no more do its work than a starving horse can pull his accustomed load. These highly organized structures in and through which



that indefinable element called vitality manifests itself require the assimilable products of rich arterial blood and the elimination of waste products of rapid metabolism. If these channels are affected by vaso-motor irritation due to structural interferences such as have been mentioned, either a hyperæmic or toxic condition or both will follow—in either instance disturbing the normal rhythmic forces that radiate from these centers in the form of trophic, sensory, secretory, visceromotor, motor or vaso-motor impulses.

What, therefore could be more natural to secure permanent relief than the osteopathic manipulation which corrected these "structural disorders," securing thereby the normal activity of the "recuperative and reparative forces resident in the body?" I should say that restoration in this case was by no means immediate. Nature has a tendency, when she cannot, unaided, overcome an abnormality, to adopt herself to it as best she can, so that after a while the abnormal becomes normal to nature. For six weeks, apart from a toning up of the general health, there was no perceptible improvement in so far as constipation was concerned. The enema was a dernier resort, though the olive oil high injection was substituted for the low rectal flushing ordinarily employed. During this period persistent attention was given the spinal lesions, with good strong work to the liver by direct palpation. The patient was instructed to eat plenty of fruit, drink an abundance of water, take out door exercise, eliminate certain aggravating food elements to which he had been accustomed, have regular eating and sleeping hours and go to stool every morning after the breakfast meal whether the inclination were present or not. To have omitted any of these directions would have been the height of folly, since ignorance of hygienic laws and carelessness in observing them constitute one of the chief causes of this very common disorder.

The patient's trouble about the end of the second month's treatment disappeared, and there has been no return since. In addition, the severe headaches and an asthmatic diathesis which he often experienced have likewise been cured.

#### SLIPPED INNOMINATE.

The influence of structural deviation from the normal, and the resultant pathological consequence are so apparent in the following case that there can be no question relative to the scientific accuracy of the two principles enunciated at the beginning of this paper. Briefly stated, it is the case of a young man who jumped from the top of a float during the Caliph's parade last fall in Dallas. On the following day slight pains were felt which grew in such severity in the course of a week or two that the services of an M. D. were called for. He pronounced it a case of articular rheumatism, and proceeded to administer salicylic acid, upon the hypothesis, I suppose, that "it makes a bee-line for the painful spot and removes from the tissues and joints the uric acid deposits that are intruding on the nerves."

Whatever may be its action under ordinary circumstances, its extractive power certainly failed in this instance, while its effects on the stomach-lining

to use the words of a humorous writer in describing his own experience, was to produce a lovely "green-brown with white ulcerations, giving an ultimate color effect like dye-stuff in a mill-stream, making itself felt everywhere, but principally in the mouth."

The patient came to me two months later on crutches, greatly stooped, severe pains in lumbar and sacral regions, digestion impaired, emaciated, and utterly discouraged.

I found the posterior superior spine of right ilium over prominent, muscles tensed in whole lumbar area, great tenderness at sacro-iliac articulation, slight lateral deviation of lumbar with opposite compensating curve in mid-dorsal. After relaxing tissues, patient was turned on his face and attempt made to reduce lesion by strong pressure with one hand at point of luxation while lifting the limb with other hand. The first treatments were attended with great pain, but my explanation of the cause of his trouble seemed so palpably true to him, that he willingly endured it to secure ultimate relief. The cane and crutch were abandoned after the sixth treatment, the stooped position was soon overcome, digestion restored, so that by the end of his month he had gained ten pounds in weight, all pain had ceased, the lesion had been reduced, and the patient discharged in perfect health.

Evidently the jump had put upon the stretch all structures contiguous to this articulation, involving muscles, ligaments, nerves and blood vessels, likely exciting inflammatory conditions which probably interfered with the functioning of the nerves as much as or more than direct impingement by reason of the luxation. Clearly, there was nothing to do but correct "deviated structure," and thus rehabilitate, at it were, the working forces of the body's laboratory, to the end that physiological repair, through unimpeded channels of the blood and nerve currents might be instituted.

#### EPILEPSY.

As confirmatory evidence of the soundness of these osteopathic principles I wish to cite a case of epilepsy. This was of a young man of twenty, who had been a close student at school, a leader in college sports, of somewhat emotional temperament, and with a history of gastric disturbance for several years past. At the time of his coming to me he held an important position in the book-keeping department of a large insurance firm, the work in which produced some eye strain. On questioning I found, as captain of his college foot-ball team, he had been hurt several times, on one occasion having been knocked unconscious by a blow on the neck. In a few months after this, he had the first attack. Medical treatment was of no avail, though I judged from the presence of acne and grave stomach disturbances, that the bromide treatment—the M. D.'s sheet anchor in such troubles—had been tried.

The third and fourth cervicals were to the right, upper dorsal anterior, lower dorsal and upper lumbar presented a slight lateral deviation to left, whole spine quite rigid.

Whether epilepsy is, as Gray says, a symptom, or as Anders claims a dis-



ease of unknown or obscure pathology, or as Fere and Chaslin believe to be due to neuroglia sclerosis, we do know that eye-strain, indigestion, improper oxygenation of the blood, diaphragmatic tetanus, vaso-motor disturbance of the brain and various neuroses nearly always individually or collectively accompany this disease. To the osteopath these are secondary and not primary as a rule, and hence he looks for the abnormal structure which will account for these conditions. In this case the cervical and upper dorsal lesions will explain and account for the eye-strain, vascular disturbance of brain, improper lung action and tetanus of the diaphragm, while indigestion with its endless chain of sequelæ may be equally as well accounted for by the conditions found in the lower part of the spine. At any rate, work upon these lesions has prevented a recurrence, not a single attack having been experienced after the first treatment.

In addition to the manipulative features, the patient was instructed to observe regular habits, of eating and sleeping, to use a mixed diet eliminating such foods as might produce intestinal fermentation, to ventilate his sleeping apartment thoroughly, to take deep breathing exercises and to avoid all social and emotional excitement.

The patient is still at work for the same firm, happy and hopeful in the enjoyment of good health, satisfied that osteopathy is the only thing that could have saved him from the insane asylum.

I have taken these three widely divergent cases to illustrate the truth of these principles, the soundness of which is verified by every osteopath who assists nature to make a cure. It is futile therefore, in the light of our experience and the results attained in the broad field of pathology, for any one however well-equipped in the science of disease to underestimate these etiological factors, and the osteopathic means employed to restore normal function by the correction of perverted structure. Our science is sane, scientific, and is demonstrating to the masses daily that it is the right way to health.

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#### SOME OBSERVATIONS.

J. A. LINNELL, D. O., CHICAGO, ILL.

When the best medical colleges of the country teach that ninety per cent of all chronic diseases are hopeless, and that degenerative diseases are absolutely so, it emphasizes two facts:

First—The lamentable weakness of the present medical curative system.

Second—That medical science is still in the dark regarding these diseases, that the true pathological principle involved in degenerative disease has not been discovered.

In Bright's disease, or any degenerative disease, medicine has congratulated itself if able to retard the progress but has given up in despair the attempt to cure.

Although anatomy, normal and pathological, to the minutest cell has been closely studied and revealed to the eye by means of the microscope; and dis-

sections and autopsies have added their share to completing the exhaustive records of the best hospitals, the dread disease has gone on relentlessly.

The medical scientist however has made one grave mistake—of studying too narrow a field, contenting himself mostly with the study of the affected organ. Here is the comparison between the old school method and the osteopathic method which traces back to its source every nerve fiber, artery, vein, lymphatic, and external influence bearing on that organ.

We have proved to our satisfaction that derangement of nerve tracts produces a logical derangement of function.

Some day we may say that in such and such a degenerative disease, such and such a tract shows such and such abnormal change commensurate with the breaking down of the organ. In nature, result bears an exact ratio to cause always.

We have seen angry ulcers on the leg heal when the spinal condition was healed, also ulcers of the stomach and intestines. That which produced the condition on the leg produced the intestinal condition as well—irritation of spinal centers, tied up capillaries and restricted circulation at the point of break down.

Freeing the circulation to the cord soothed the spinal condition, relaxed the capillaries, stopped the decay, threw off the dead tissue and built up new through a free flow of pure blood.

Vaso-constriction resulted in breaking down of the tissues as infarction causes the brain to soften. In the cases I mention disease did its real work in the cord. Is it too much to say that in a chronic case the headquarters of diseases are back in the nerve centers, that no case can really be called chronic, if organic, until the centers of cord are affected?

In the case of ulcers on the surface caused from spinal irritation, progress will be in constant ratio to the spinal condition. Undoubtedly it is so in intestinal and gastric ulcers. At any rate it is good logic to say that the rule would maintain in internal as external conditions and if we can stop the ulcer on the leg we can call a halt on the breaking down of an internal organ. This is where the faith of some seems weak—degenerative conditions—possibly for this reason their own inability to stay the ravages of the disease. One such practitioner I have in mind. I am very glad to say he was not a graduate of a recognized college. His conscience was not to blame for he treated his patients an hour at a time, or I should say massaged the spine. Do you wonder the patient grew worse? The weakened nerve centers were being worn out, and I aver that every treatment broke down the affected kidneys a little more each time. I believe that the most successful practitioners in these cases have worked on the theories laid down here, and therefore have treated very little, very gently, and with no "make and break" treatment. The idea being to feed the nerve centers and not stimulate.

As for the old school theory of Bright's disease I will say this: Take down an authority and you find something on this order: "The breaking down of



the kidney is due to excessive work in throwing off poisons and waste from the system as is shown by its following scarlet fever, diphtheria, etc." This definition is lame as it does not account for the continuance and increasing progress of destruction months and years after the original poisons were eliminated. They undoubtedly do their deadliest work in the nerve centers as they do in blindness and deafness following the same diseases.

The converse is certainly true that correcting the spinal condition cures all these conditions in like manner.

Strong medicine has more to answer for in this disease than other causes, a source of kidney trouble which the laity never imagine, because of its insidious action and this is one of the strong osteopathic arguments against its use.

We may account for the many associated functional derangements in the same way, that other nerve centers are being poisoned. Sometimes one imagines the whole nervous system is pretty much at fault.

Undoubtedly the cord is pretty well saturated, especially when there is an upper dorsal lesion which seems to be an especial osteopathic center for spinal circulation.

Of all cases where muscles should not be kneaded, degenerative diseases are foremost. Watch the pulse if you doubt and note the nervous excitement that is shown. Because a patient improves under it or any other treatment does not prove it is the best. He may improve in spite of it or better with less. Again, because we fail with a certain line of diseases does not prove osteopathy's limitation, but our own.

One man continues to suffer from sciatica because an osteopath told him: "Osteopathy cannot touch sciatica, I have tried it." Others say the same of Bright's disease and the like. The usual reason is over treatment due to not studying the condition and change taking place.

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#### \*FOLLIES AND FAILURES OF MODERN MEDICINE.

BY HARRY ELLINGTON BROOK,

Editor "Care of the Body" department Los Angeles Times, Los Angeles, Calif.

I was glad to note that the committee on programme had selected for the evening's discussion so interesting, important and practical a subject as the 'Care of the Body.' It indicates the increasing interest taken by the general public in health questions. I was also pleased to notice that the committee had assigned one of the three papers to a "layman," for there is a somewhat too pronounced tendency on the part of the medical fraternity to look askance at the interjection of lay ideas into the field of healing, as something that infringes on what are supposed to be their special privileges. For instance, last year I came across a monthly medical magazine, published in Philadelphia, and finding some good things in it I wrote to the editor, asking if he would exchange with the Sunday Times. He replied that he would be glad to do so, if I would promise "not to quote any of the articles on strictly medical subjects," as he

\*Address delivered before the Sunset Club of Los Angeles, February 24, 1905.

considered that would be improper, from a medical point of view. Of course I replied that I could make no such promise. I also inclosed a money order for a dollar, the price of a year's subscription, and asked him to send me the magazine. He returned the money order, again stating that he did not consider it right for laymen to butt into the medical field—or words to that effect. I need scarcely add that I still see the World.

Certainly it appears to be somewhat unreasonable that a young fellow who has perhaps managed to sneak through a medical examination "by the skin of his teeth," as it were, should be supposed to know it all about the laws of health and disease because he is authorized to write "M. D." after his name, while a "layman" who has perhaps devoted half a century to the study of these laws is considered an impertinent interloper if he ventures a suggestion, or a criticism.

Not long ago I was driving through the San Gabriel valley with one of our leading physicians, and this subject came up for discussion. My friend said to me: "Brook, most of our people don't understand hygiene thoroughly, because we are not properly taught it in college." The truth of this remark was vividly brought before me, a few months later, when I received a copy of the curriculum of the medical department of the University of Southern California, in which I was surprised to note that, out of a course of four years, there was only devoted one hour a week, for half a term, to the important subject of hygiene—in other words, deducting vacations, about two weeks to the prevention of disease, and four years to the patching up of sick people.

Undoubtedly, the people are beginning to think on this important subject. They are becoming as restless and impatient of a medical priesthood as they are of a clerical priesthood, that attempts to say to them what they shall or shall not do. In the latest issue of "A Stuffed Club" my friend, Dr. Tilden, of Denver—himself a practicing physician of the regular school, but prescribing no drugs—writes:

"The New Thought superstition beats drug superstition a country block; the more we have of it the better until drugs are dead. Already there are drugless schools started, and their graduates are scattering all over the country, demonstrating to the people that disease can be controlled without the use of drugs. I am told that the leading school of Osteopathy at Kirksville, Mo., has six hundred students this winter. What does that indicate? It means a landslide out of drug superstition. If there was not a demand for drugless doctors such object-lessons would not exist. There is also a falling off in attendance at the regular medical colleges all over the country.

"It is not quite five years since I prophesied that 'in twenty-five years no intelligent person will be taking drugs.' It's coming faster than I expected. The struggle I once had is a thing of the past. I have no trouble keeping people from taking drugs. People are hunting cures without drugs."

If a man punches you on the nose you don't rush to your lawyer to find out whether you are justified in hitting him back. If you have a chance to foreclose a mortgage on a widow you don't go to your parson to ask him if you



would be doing right. Why, then, whenever you have a stomach ache, should you rush off to a doctor and ask him to give you something? An intelligent man should be ashamed to know far less about his own body than he does about his machinery, or his crops.

Let me here interpose that I have absolutely no quarrel with the physicians. As I have frequently said, the practice of the healing art is—or should be—the noblest of all professions. The conscientious physician works hard and encounters much unpleasantness, unreasonableness and ingratitude. He often has to leave a comfortable couch on a stormy night to visit a patient whose power of remunerating him is an unknown quantity. That is, some doctors do.

Compared with the physician, who deals with present ills, the parson, who in a comfortable study, prepares—with the aid of a concordance—a more or less able discourse on future eventualities, of which he knows just as much and just as little as you and I, has an easy job, indeed. It is not with the allopathic physicians, but with the system they practice, that I take issue, a system that is not only intrinsically wrong, but is constantly changing, so that the highly praised remedy of today is the discarded failure of ten years hence.

In olden times teaching and preaching and healing went together. You may have noticed that fully as much is said of the healing of sick persons by Jesus as of his preaching. Is it not really ridiculous to hear a man get up in a box and tell you all about how to save your immortal soul, when he is utterly unable to cure a cramp in your mortal stomach? Of late, this old idea has been brought to the front again, in certain quarters—for instance, among the followers of that misnamed school, Christian Science, and also among the Battle Creek people, who train students to go and minister to the bodies as well as the souls of those people whom we are complacently pleased to call the "heathen." We all agree that prevention is better than cure. I maintain that members of this noble profession should be ashamed to be known merely as cobblers of old shoes. They should rather seek to be thoroughly first-class shoemakers.

This brings us to another false feature of the practice of medicine—the method of remuneration. Is it not really repugnant to common sense that a profession should rely almost entirely for its prosperity on the suffering and misfortune of humanity? Can a physician, however conscientious, who is not financially independent, sincerely congratulate himself on the fact that there is no sickness in the community? The system is all wrong. Physicians should be paid a regular stated sum by each person and family to advise them on health and keep them well. This is the way they do in China, where, also, the physician's pay stops when the patient gets sick. In that case a doctor would have to insist that a person should follow reasonable advice, or cross him off the list. In Switzerland they are making an experiment along these lines. In the canton of Zurich a yearly poll tax of so much is assessed on every adult person. This poll tax goes to the doctor. For this it becomes the doctor's business to attend all cases of sickness. The experiment includes about fifty doctors and several thousand people. There are some weak points in this system, but it is cer-

tainly a big improvement over the prevailing custom.

I think it is quite right that there should be a graduated charge by physicians, according to a man's ability to pay. As a physician is often called upon to give his services gratuitously to poor people, therefore he should be permitted to charge more than the average where the patient is rich.

For the last two years the leading fad in the medical world has been the injection of filthy matter from a diseased animal into the blood to kill germs. In fact, it may be regarded as something like a germ mania that has infected the doctors. It wouldn't be so bad if they did not seek to force their ideas on the people by legislation, while at the same time they are not by any means agreed among themselves. Not long ago a question was sent to 100 members of the regular school, the names being taken alphabetically from a medical directory. The question was: "Do you or do you not consider vaccination dangerous?" Forty-five answered in the affirmative and fifty-five in the negative. Yet they seek to exclude from the public schools those children who are not submitted to this practice. If vaccination protects, as you claim, then why should you trouble yourselves about it? You and yours are safe, are they not? If you want to see an unbiased statement in regard to vaccination, read a seven-page article on the subject in the Encyclopedia Britannica. It contains about as strong arraignments of the practice as I have seen.

One of the leading life insurance companies of the United States recently took from its list of questions put to applicants that in regard to vaccination and ceased making any demand on this score. By the way, I notice that a French physician now proposes to vaccinate against syphilis, having experimented along this line on monkeys. I thought that would soon come.

As I have said, fashions in medicine come and go, like fashions in bonnets. Less than a century ago, in England, if a physician had been called to attend a man who had fever, and had failed to bleed him, and the man should die, that physician could be arrested for manslaughter. How many bleed nowadays? And how many intelligent physicians give those large doses of mercury that were so common half a century ago? The administration of alcohol to sick people, formerly so common, is also rapidly going out of favor among experienced and intelligent physicians. Fifty years hence we shall look back at many of the present medical ideas as relics of barbarism. Meantime, however, our friends the doctors are insistent that we shall be compelled to accept their present ideas as to what they think, whether or no.

Again, take the diphtheria antitoxin serum craze that is now on the wane. It is well known that this practice has been built up largely by juggling with figures on part of state health boards, so that simple diphtheritic sore throat has been included among the cases of diphtheria, in order to increase the number of asserted cures. As millions have been made from the manufacture and sale of this stuff, the practice is naturally dying a hard death.

As to surgery, it has certainly made marvelous progress. One must take one's hat off to the dexterity of the skillful surgeon. Here, however, we find



that the knife is resorted to on the slightest pretext, for the sake of performing a "beautiful operation"—and incidentally earning the resultant fee. A woman who has all her organs intact will soon be as great a curiosity as an octogenarian who has preserved all his teeth. I undertake to say that at least nine-tenths of surgical operations would be unnecessary under a natural form of treatment.

On what sort of foundation is this demand for medical legislation based?

To answer that question, the best plan is to go to some of the eminent physicians themselves, in order to avoid the suspicion of lay ignorance or jealousy. Prof. Dr. O. Rosenbach, of Berlin, has written an exceedingly interesting book entitled, "Physician versus Bacteriologist." It has since been translated into English, but I find that such works usually lose considerably in the translation. In it Dr. Rosenbach says:

"In my opinion, neither by quarantine measures, nor by antiseptic deeds, nor by bacillary investigation, are we able to prevent the outbreak or the spread of any malady."

The opening sentence of Dr. Rosenbach's book is as follows:

"The history of medicine teaches us that any and every method of treatment has always been followed by a method based on exactly opposite principles; and it further demonstrates that all these differences have been upheld by fanatic adherents with the same fervor, under cover of equally good statistics, so that as a matter of fact every form of treatment, at least in the opinion of its chief supporters, may justly claim identical value as to efficacy and healing virtues."

Did time permit I could easily quote you scores of statements like the following from the writings of eminent allopathic physicians:

John Mason Good, M. D., F. R. S., says: "The science of medicine is a barbarous jargon."

Prof. Valentine Mott, the great surgeon, says: "Of all sciences, medicine is the most uncertain."

Sir Astley Cooper, the famous English surgeon, says: "The science of medicine is founded on conjecture, and improved by murder."

Dr. Abercrombie, Fellow of the Royal College of Physicians of Edinburgh, says: "Medicine has been called by philosophers the art of conjecturing; the science of guessing."

Prof. Henle, the great German pathologist and teacher says: "Medical science, at all times, has been a medley of empirically acquired facts and theoretical observations, and is so likely to remain."

Dr. Jacob Bigelow, formerly president of the Massachusetts Medical Society, says: "The premature death of medical men brings with it the humiliating conclusion that medicine is still an ineffectual speculation."

Prof. Alonzo Clark, of the New York College of Physicians and Surgeons, says: "In their zeal to do good, physicians have done much harm. They have hurried thousands to their graves who would have recovered if left to nature."

Prof. Gregory, of the Edinburgh Medical College, said to his medical class: "Gentlemen, ninety-nine out of every one hundred medical facts are medical lies, and medical doctrines are, for the most part, stark, staring nonsense."

Sir John Forbes, Fellow of the Royal College of Physicians, London, and physician to the Queen's household, said: "No systematic or theoretical classification of diseases or therapeutic agents ever yet promulgated is true, or anything like truth, and none can be adopted as a safe guidance in practice."

Dr. Alexander M. Ross, Fellow of the Royal Society of England, member of the Colleges of Physicians and Surgeons of Quebec and Ontario, Professor of Hygiene and Sanitation at the St. Louis Hygienic College of Physicians and Surgeons, Vice-President of the Association of Hygienists of America, Member of the Ninth Session of the International Medical Congress, Member of the British, French and American Association for the Advancement of Science, etc., etc., says: "I charge that they have encouraged superstition and humbug by the germ theory of disease. I do not question the existence of infinitesimal micro-organisms; but they are the result, not the cause of disease. They are the scavengers; their legitimate work is to clean out the sewers of our bodies. Wherever there is decay, pus or decomposing matter these little life-savers are doing their work of neutralization; sanitation and purification. They feast upon effete and decaying animal matter. They are beneficial helpers to an important end."

Dr. Cyrus Edson says: "It would seem as though obstacles had been placed in the way of medical science which all of the force of man is powerless to remove. . . . After all has been said, it must be admitted that a proper observance of the rules of personal and public hygiene on the part of every individual belonging to the civilized world would do more to effect a reduction of the death rate and prolong the average duration of life than any discovery in the cure of diseases that at present seems within the bounds of possibility."

In short, the older and more experienced the physician, the more he is inclined to depend upon the healing power of nature, and the less to administer something out of a bottle.

Take that widespread disease, consumptoin—the "great white plague." Cyrus L. Topliff, member of the National Association for the Study and Prevention of Tuberculosis, says: "After several generations of study and experimenting the medical profession of the entire world has finally come to the conclusion that this disease is not amenable to drug treatment."

How much energy, how much time has been wasted by the medical world in trying to discover some means of destroying what they think to be a germ in the lungs—a result instead of a cause? How many false hopes have been raised in this way, and how many thousands of unfortunates have been thus prevented from seeking what is now admitted by the physicians to be the only possible cure—open air life, combined with a plain, nourishing diet.

In conclusion—for I am afraid I have trespassed too long on your time, for which the great importance of the subject must serve as my excuse—let me say



I believe the time will soon come when the shoemaker shall replace the cobbler—the teacher of health, the drug dispenser. Physicians will be paid as regularly for telling people how to get well as we now pay our water and gas bills. First, however, the teachers themselves must sit for a time at the foot of Nature and learn something about her methods. They must learn to realize the simple fact that all disease is an effort of nature to throw morbid matter out of the system—is, therefore, something to be welcomed, rather than deplored and dreaded—and that nature will, in nine cases out of ten, be successful in her effort, if not hampered by the administration of unnecessary foods and poisonous drugs; the only possible effects of such drugs being to change the symptoms without reaching the cause of the disease. The physician of the future will utilize all legitimate means of assisting nature, such as diet, the drinking of pure water, rest, fresh air, moderate exercise, magnetism, sun and air baths, hydropathy, sweating, massage, osteopathy, fasting, suggestion or mind cure and even music. Such a reform will be of vast advantage, both to the physician and the patient, for then the physician will administer to the welfare of humanity instead of preying upon its sufferings.

In a nutshell, if you want my ideas on how to get well and keep well and live long, I would say: Eat only when hungry and only enough to satisfy hunger, of simple foods, with no great variety at a meal. Take as little uric acid food as possible into your system. Masticate your food thoroughly. Don't hurry, don't worry, keep your bowels open, your head cool and your feet warm. Keep your exterior and your interior clean. Have a hobby and do a little good each day. Should you, in spite of this, get sick, have as much sense as a dog, who crawls into a quiet corner and cannot be tempted to eat. So shall you surely attain to a healthy and happy old age, although I cannot promise, as some enthusiasts assert, that you may live forever—at least not in this form of being.

NOTE—Copies of this pamphlet may be had from the author. Harry Ellington Brook, Box 612, Station C., Los Angeles, Cal. Price, 10c., postpaid; 12 copies, \$1; 100 copies, \$5.00.

\* \* \*

#### OSTEOPATHIC BRIEFS.

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

Health is the first essential.

\* \* \*

A poor body means a poor life.

\* \* \*

The best cared for machines last the longest.

\* \* \*

Help for the ailing—genuine osteopathy.

\* \* \*

The convincing argument for osteopathy is its cures.

Osteopathy is from first to last Nature's aid to health.

\* \* \*

Nature is simple, but she cannot be improved upon.

\* \* \*

Fortify against disease by taking an occasional osteopathic treatment.

\* \* \*

Give Nature a fair chance and aid her by skillful osteopathic treatment.

\* \* \*

In general debility osteopathy is unequalled as a superior tonic, starting the sluggish forces into renewed life.

The quick and effectual blows osteopathy deals against disease leave no doubt of the exactness and precision with which it achieves results.

\* \* \*

In its first stages consumption is very often curable by methods peculiar to genuine osteopathy.

\* \* \*

Osteopathy as a preventive has the power to do for the whole human race what the cure after the afflicted are bed fast may do for only a limited number.

\* \* \*

On the great clock of time there is but one word—Now. If in ill-health you are respectfully referred to a genuine osteopath today.

\* \* \*

In diseases of the uterus, rectum, tumors and slight anatomical derangements the educated fingers of the genuine osteopath make diagnosis more than crude guessing.

\* \* \*

Health should be the main factor in the whole business of life; it should be valued next to a good conscience and the more health the better will be the conscience.

\* \* \*

The human machinery having all its parts—muscles, tendons, nerves and bony structure properly adjusted by methods peculiar to osteopathic practice, permitting a full and free flow of all the body fluids, is in a normal condition called health.

\* \* \*

Osteopathy gives full and permanent relief in most "diseases of women" without subjecting them to annoyances and indelicacies that usually accompany medical treatment. The terrors of surgical operations are often avoided and reproductive organs saved.

\* \* \*

Nature works slowly and will not bear crowding, hence time is an important factor in aiding her to health and you should be patient, persistent in the treatment and give your osteopath a reasonable opportunity to work a cure.



Eat more fruit and green vegetables, less meat and not at all until hungry. Drink plenty of pure water. Avoid concentrated, rich foods and narcotics of all sorts. Exercise in the open air abundantly, take osteopathic treatment and thus rid yourself of aches and pains whether they be myalgic, neuralgic, or rheumatic.

\* \* \*

Beware of the imitator, the fakir who has no reputation to sustain. Do not waste time and money and undermine your health by trifling with "mail course" cheats and ignorant pretenders. You must pay the penalty incurred by their bungling work if you place yourself in their hands. Their inaccurate rubbing and kneading the whole body cannot adjust what is wrong and is no more like osteopathy than barbering is like surgery. Only the most skillful, reputable, painstaking osteopathic physician should be entrusted with the repair of the delicate human machinery. I urge those who wish osteopathic treatment to be upon their guard and assure themselves that their practitioner is a regular graduate of a reputable college of osteopathy.

\* \* \*

Osteopathy is based upon the infallible laws of Nature and it has placed mechanical therapy upon a scientific plane that is simple in cause, harmless in reaction, certain and accurate in results. Through its superior potency as a preventive and a tissue builder it will prove a great boon to posterity and will secure generations to come from many ills and dangers that now beset life. It is a sad fact, but true, that one-half of all deaths that take place are before the individuals reach the age of five. It seems that before the helpless child has had time to break Nature's laws, it is forced into it by the ignorance of its parents. Humanity seems blind to the real root of this physical degeneration and it remains for competent, skillful, osteopathic physicians to combat the evils that false methods of living have created and help humanity to a knowledge of health that comes only to those who live in accordance with Nature's laws.

\* \* \*

The human machine differs from all others in that it is self-operating, self-recuperative, and so economically constructed that no part or organ can act separately or independently, even for its own benefit. Imagine the branch of a vine endowed with the power to grow according to the laws which govern it, or to ignore and disobey those laws. Imagine the same branch having made up its vegetable mind that it could live its own life apart from the vine, twisting its various fibers into all sorts of knots and snarls, according to its own idea of living, so that the sap from the main stem could only reach it in a minimum quantity. What a dearth of leaf, flower and fruit would appear in the branch! Yet the figure is perfectly illustrative of how the violations of the laws of health interrupt and obstruct the normal functions of the delicate and complex human machine, impeding the free flow of the "vital fluid" which is the vehicle of nutrition, and as a consequence reaping disease and premature death.

#### A Few Points for Professional Consideration.

J. E. COBB, D. O., ELGIN, ILL.

In the practice of osteopathy we, as practitioners, are confronted almost daily with some new condition which we must meet only by application of the fundamental principles of our science as originally evolved by the founder, Dr. A. T. Still. One case is no criterion for the next; no two individuals are exactly alike—that which produces a certain definite symptom in one case may be lacking in another case where the same symptom is manifest, hence it is at once apparent that herein lies the inadequacy of the medical treatment by drugs. Drugs are given to combat symptoms, regardless of what the cause may be.

Osteopathic treatment is directed to the cause and does not regard symptoms the paramount consideration. So it is a duty we owe to ourselves, to the patient and to our profession to be thorough in our examinations, honest in our advice and conscientious in our treatment.

While it is a fact which no one can gainsay that osteopathy is successful in a far greater number of diseased conditions than any other mode of treatment, yet we must all realize that there are many hopeless cases which are not amenable to osteopathic procedure and when we take such cases and treat them, simply for the money we receive from them, when we know we can not render a cure or even very little temporary relief—holding them month after month by promises and smooth talk—then we are blocking the wheels of osteopathic progress and our fight for universal recognition as an independent school of medicine is just that much further from victory.

Be honest with the public and the public will be honest with you. Don't hold patients simply for the financial gain to yourself; but if you can cure them in one treatment, do it and let them go and spread the news; you will gain more in the end than if you had held them a month after you had removed the cause of their trouble.

Since osteopathy deals with the cause of disease, I should like to mention a few items which I think the osteopathic physician should constantly bear in mind. While we realize and are daily demonstrating the

fact, that the vast majority of diseased conditions have as their primary cause maladjustment at some point or points along the vertebral column, causing impingement upon some nerve or nerves as they pass out from the spinal cord, and that in our treatment the greatest effect is gotten by the removal of this lesion, wherever it may be; yet we must not overlook the fact that many cases have other causes, (secondary though they be), the removal of which have much to do toward effecting a permanent cure. Such secondary causes which I have found most common are: errors in diet; errors in posture; occupation; and the manner in which the clothing is worn.

Corsets of any description are productive of much harm in 90 per cent of the women who persist in wearing them; tight bands around the waist; heavy skirts, and in fact any wearing apparel which obstructs free circulation of the blood should attract the attention of the physician and should be advised against. Corsets, aside from obstructing the circulation of the blood, mainly the venous return to the heart from the limbs, pelvis and abdomen, by forcing the intestines down upon the pelvic viscera producing a venous congestion, act as a brace to the spine and support to the abdomen thereby taking the work off the spinal and abdominal muscles, causing them to atrophy and weakening them to such an extent that their normal function of support is greatly impaired and ptosis of the abdominal contents is the result.

Another very potent factor in causing trouble in women and which is too often overlooked is the high-heel shoe which throws the body out of poise, changes the line of gravity from the normal and also gives a distinct jar to the nervous system at each and every step; the weight of the body does not come down upon the foot as it should, the flexor and extensor muscles cannot act in perfect harmony, but are constantly on more or less strain and sooner or later we have just such causes as these playing a great part in the suffering of women.

So let us always be on the lookout for any existing condition which tends away from the normal and give our patients good and wholesome advice which will be beneficial



to them even after we have corrected the primary cause (lesion) and entrusted them to Nature for restoration to health. Aside from our duty to patients there is another thought I should like to present, which may be helpful to some along the lines of professional conduct.

We should all strive to so conduct ourselves that no unprofessional act shall ever be recorded against us. Such conduct we owe to our science, to ourselves and to all fellow practitioners, and he who does not appreciate this fact and allows himself to stoop to anything degrading or otherwise unprofessional, will always be the loser in the end; for he must certainly forfeit the respect of the profession and his own self-respect must also suffer materially.

To illustrate, I have but to cite a recent case in which I was the party attacked by a fellow practitioner of my school. Absolutely without any just cause and without grounds to substantiate his libelous reports, I was assailed with almost every imaginable mean and malicious report which was calculated to damage me not only professionally but personally. This attack was not made in the open; instead his actions toward me were those of perfidy and duplicity—pretending friendship to my face and driving the knife to the hilt when my back was turned.

I paid no attention to this slanderous assault except to vindicate myself to a few friends who expressed doubt as to the integrity of such reports.

Time is revealing the truth of the situation and new patients and a number who have taken treatments elsewhere are now coming to me. Public sentiment is changing and I have no fears for the future. The point may be gathered from the following lines which are illustrative of the condition above mentioned:

"There is so much good in the worst of us  
And so much bad in the best of us,  
That it scarcely behooves any of us  
To talk about the rest of us."

Stoop to nothing mean or low; consider science first—your own success will follow if you will exert your superfluous energy toward the helping of suffering humanity instead of slandering a brother osteopath.

#### Kansas State Meeting.

The Kansas State Osteopathic association will hold its annual meeting in the National Hotel at Topeka, June 22nd. Dr. C. E. Still will be present and address the association on "The Three Years' Course"

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#### Victory for Osteopaths in New Jersey.

(From The State Gazette, May 6th.)

A case which will be of interest to physicians and will affect especially osteopathic practitioners, was decided yesterday by the court of errors and appeals, when that court affirmed the reversal of the judgment under which Ernest M. Herring, an osteopathic physician, of Asbury Park, was fined \$100 for practicing medicine and surgery without a license.

Herring displayed a sign in Asbury Park stating he was an osteopathic physician and the grand jury of the Monmouth oyer and terminer found an indictment against him charging him with treating patients according to his system without a license. He was convicted and fined \$100. Judge Heisley, who heard the case in his opinion held that Herring "thus called attention to the fact that he was able and ready to treat as a physician the sick, and it seems to me the question of what system or school he followed is a matter of no moment, because under the statute, as I interpret it, he had no right to practice any system whatever, medical or religious, such as the laying on of hand, without a license."

An appeal was taken to the supreme court and Justice Dixon, who rendered the opinion held—

"An osteopathic physician, whose treatment of his patient consists simply of the manipulation of the body, does not violate that provision of the act of May 22, 1894, which forbids the applying of 'any drug, medicine or other agency or application,' by an unlicensed person."

Justice Dixon further stated in his opinion:

"The question to be considered is whether the defendant, by applying his hands only to be bodies of his patients to relieve their ailments, was applying 'any drug, medicine or other agency or application' within

the intent of the statute.

"The phrase 'other agency or application' is a very broad one, and in its general sense would undoubtedly include the use of the hands. But it is conjoined to the terms 'drug' and 'medicine' which are much more special, and under the maxim 'nascitur a sociis' its interpretation should be such as will confine it to the class in which its special associates stand. Moreover, as a phrase employed to create and define offenses unknown to the common law it must be strictly construed.

"In forbidding an unlicensed person to apply any drug or medicine for remedial purposes, the legislature plainly contemplated the use of something other than the natural substance. A similar restriction must attach to the more general terms 'agency' and 'application,' and they must likewise be held to import only some extraneous substance."

The court of errors affirmed this decision.

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#### Kappa Psi Delta.

Now that The Cosmopolitan Osteopath has consolidated with the Journal of Osteopathy, perhaps you will not object to making the acquaintance of a northern relative. If so, we are glad to meet you.

One year ago this May, there was born in Des Moines, Iowa, a sorority known as Kappa Psi Delta of Still College. Her purpose in life is the promotion of the interests of osteopathy, and the general good of her members. Although her existence, as yet, has been short, her growth and development have been sure and systematic, and we predict for her a future of great development and much good resulting therefrom. She began her existence with a nucleus of ten enthusiastic girls, about whom have swarmed many others who became infected and joined her, and still others have "stood by, and looked with longing eye."

The last important event of the present school year was the entrance of three new members within her "mystic shrine," which occurred on April 22. These new members are Nellie Kline from Ohio, Margaret Crighton from Canada, and Marie Grunewald from Chicago, and each has proved herself a worthy member. After they were properly

initiated, the members were served with a very dainty buffet repast. Dr. Beguinson acted as toast mistress. She did not know that she was to act in this capacity until she entered the room, but she fully proved that she is equal to emergencies. An interesting feature, and one that was a saver of time and energy, and brought into activity the ability of the members of Kappa Psi Delta, was that the toasts were impromptu. Mrs. R. I. Couch welcomed the new members, and Nellie Kline responded with well chosen words. Alice Brown spoke on the "Three Maryville Stories." She related the stories admirably, but did not remember the point. Marie Grunewald seemed to have been up on sanitation, so was asked to speak on her favorite topic. Blanche Miller being able to manipulate chalk on a blackboard, illustrated the arrival of a freshman. Judging from the manifestation of appreciation, every one must have passed through an ordeal similar to the scene illustrated. Margaret Crighton was asked why she is studying osteopathy. Her reasons were excellent, but the major motive is yet to be revealed. The climax seemed to have been reached when Josephine Cook was called for "Heart Lesions." She seemed, however, not yet to have completed her investigations, and we expect to hear from her later. The future of Kappa Psi Delta was discussed by Mary Pitman.

Each member wended her homeward way, thinking it was good to have been there, and good to be a member of Kappa Psi Delta—"long may she live."

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#### An Enthusiastic State Meeting in Texas.

I herewith hand you report of the sixth annual meeting of the Texas Osteopathic association held in parlors of Hotel Delaware, Ft. Worth, May 18th and 19th.

The meeting was largely attended from every portion of the state, and one of the most interesting programs since the association's inception was presented.

The report of the secretary and treasurer showed the association to be in a more prosperous condition than at any time in the past, the financial and numerical strength being especially gratifying. The papers as given below were both interesting and in-



structive and several were voted to be given to the osteopathic publications for distribution to the profession at large.

The local osteopaths showed themselves to be true Southerners in their generous provision for the entertainment and pleasure of the visiting members.

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

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

The association adjourned to meet next year at Waco. CLIFFORD S. KLEIN, D. O.

Secretary and treasurer T. O. A.

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#### Kentucky Osteopaths in Annual Convention.

The annual meeting of the Kentucky Osteopathic association was held in Louisville, Saturday, May 6th and was attended by about thirty of the osteopaths from different parts of the state.

Officers were elected for the ensuing year with the following result: President, Dr. F. A. Collyer, Louisville; vice-president, Dr. R. R. Carter, Shelbyville; secretary and treasurer, Dr. H. E. Nelson, Louisville. Board of trustees: Dr. R. H. Coke and Dr. M. E. Pearson, Louisville and Dr. Jas. A. McKee, Lexington.

Delegates were appointed to the A. O. A. meeting in Denver and were instructed to work for a delegate body.

H. E. NELSON, D. O.,  
Secretary and treasurer.

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#### A Doctor's Letters To His Son.

From Percival Q. Jones, M. D., Prof. of

Anatomy in ——— Medical College, St. Louis, Mo., to his son "LaMonte," at Fresno, Calif., by E. D. Barber, D. O., Kansas City, Mo., author of "Confession of an M. D."

St. Louis, Mo., Aug. 15, 190—

DEAR LAMONTE:—

No reply as yet to my last letter, in which I diagnosed your case as conjunctivitis, by the long distance route. A trifle risky to be sure, this jumping at conclusions, but the field is becoming so over crowded with quacks and irregulars, that we old timers are obliged to take long chances to hold our patients and protect our skirmish line.

The osteopaths are our most formidable adversaries, not because they are more aggressive than the disciples of "Mother Eddy" and "Elijah Dowie, the Reincarnated", but from the simple fact that their theory is so plausible that it appeals to reason, and can not be checked or shaken by direct assault.

Times without number, have the "Allopaths," "Homeopaths," and Eclectics, standing shoulder to shoulder, fighting under one banner, sought to check its progress, times without number, irresistible osteopathic logic has carried our legislative forts by storm. I don't mind confessing to you, son, on the dead Q. T. that nothing short of a flanking movement by a medical "Oyama" can save the day.

Think I told you in my last letter of losing two patients lately, and how when the third was just ready to cash in I sneaked across the hall in our building and consulted with Dr. VanDyke, that young osteopath from Kirksville. I felt rather mean, for it was against our code of ethics, besides your uncle Tom, Dr. Prybolinsky, and myself are members of a standing committee whose duty it is to devise ways and means to put those fellows on the retired list.

Not being a mind reader, he, of course, was ignorant of these little side issues, and readily consented after I had stated the case, to do a few fancy turns on her spinal column. The result of his treatment was marvelous, no medicine, no nothing, just a simple twist of the wrist, a slight clicking of the cervical, and my patient sat up in bed. My experience with osteopathy, very naturally is limited, but a few things that the young man told

me have put my wheels to working. In pneumonia, for instance, instead of the close room, aconite every fifteen minutes to control the fever, morphine to check the pain, with plenty of strychnine just at the crisis to keep the heart moving, he throws open the windows, uses a cold compress, adjusts all lesions, controls the blood through important nerve centers, aborts the disease, and skips the crisis.

Now what do you think of that? Mighty hard for an old M. D. to swallow, but it looks reasonable. Cold fresh air we know will even kill the germs of tuberculosis. An ice cold compress reduces fever. With the blood supply well under control there can be no consolidation of the lung tissue. Shall investigate this matter fully, and may write you later.

As ever, your father,

PERCIVAL Q. JONES.

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#### The Importance of the Physical Examination of the Back in General Diagnosis.

(From the Medical News, March 18, 1905.)

J. P. Arnold believes that examination of the back is much neglected. Many disorders present marked indications found by inspection of the spine in the region supplied by the posterior primary divisions of the spinal nerves, corresponding to those segments of the cord from which the parts affected derive their innervation. In chronic diseases there is usually evident in the areas referred to a deficient vascular tone. In cases of disturbed stomach function, indications will be found by an examination of the back between the fourth and tenth dorsal segments of the spinal cord; and in cases of chronic constipation, accompanied as they are most frequently, by disturbances of the functions of the stomach, additional indications will be found in the lower dorsal, lumbar and sometimes in the sacral regions of the cord. This class of cases is simply quoted as an example of what may be found in an examination of the back, and is applicable to all of the diseases acute or chronic, which come under the observation of the physician, varying only in the localization along the vertebral column which corresponds to the disturbed part. These indications are marked by slight lateral deviations of the spinous processes, atrophied erector spinæ muscles,

irregularly contracted bundles of muscle fiber, which are nearly always tender to the touch when rolled under the palpating finger, and relaxed interspinous ligaments indicated by prominence or depression of one or more spinous processes. As these indications are always found in the region of the posterior primary divisions of the spinal nerves which arise from the segment of the cord which supply the organ or part affected, it seems logical to assume that they are indications of disturbances of the functional activity of those segments, and this assumption is borne out by our more recent knowledge of the functions of the spinal cord. The remainder of the paper is devoted to a brief description of the nervous mechanisms of the different parts of the body and the segments of the cord from which they arise.

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#### Clinic Reports

REPORTED BY DR. W. F. HARLAN, GRAND FALLS, NORTH DAKOTA.

#### Chronic Ulcer:—

Mr. L.—, age forty-five, came to me July 26th, 1904, for treatment of chronic ulcer on external malleolus, which had been sore and suppurating for seventeen years; most of which time he used crutches. He had taken all kind of medical treatment with no benefit. The long saphenous vein had been dissected out up to the knee; the ulcer had been cut out and the bone scraped and skin grafting attempted, but still the sore remained open. The M. D.'s said that the limb would have to be amputated.

Examination showed forward displacement of the lumbar vertebræ with consequent contraction of the pelvis.

Treatment consisted in trying to straighten up the above lesions, using antiseptic washes to keep the parts clean and bandaging up the limb to the knee to help circulation. In seven weeks the ulcer had healed with no return since.

#### Migraine:—

Mr. R.—, age twenty-six, came to me November 3, 1904, for examination. He had suffered from migraine for four months. A prominent M. D. said that his trouble was due to his stomach and treated him two months for stomach trouble, but the case



grew worse. Then he said it was tape worm and treated him a month to expel the worm but no worm showed up. The patient was then turned over to an eye specialist and was treated two weeks for eye trouble but grew still worse.

On examination, I found a right lateral curvature in middle dorsal region with 4th to 8th ribs on left side dropped down and the third cervical vertebra rotated to the right.

I have been treating him about six weeks with marked improvement, but I notice that every time the ribs slip out he has the headache.

I believe from what I can learn of the case these rib lesions are the primary cause of the headache. I have had four or five cases of migraine and in each instance have found rib lesions on the left side.

#### Chorea:—

Master A —, age 15, came to me July 28, 1904, for examination. He had chorea of two years standing. On examination I found the atlas slipped laterally to the left. I treated the case ten weeks, after four weeks treatment all the symptoms disappeared.

The treatment consisted in trying to remove the atlas lesion. I did not treat any other part of the body. The boy has had no return of the trouble and is now working every day.

#### Nervousness:—

Mrs. H. —, age twenty-two, came to me September 23, 1904, for examination. The history of the case showed that she had given birth to a child, ten months before I examined her, and had been suffering ever since with extreme nervousness. The "regular" physician said she had hysteria.

Normally her weight was 122 pounds. When I first saw her she weighed 89 pounds.

On examination, I found lateral curvature to the right in the lower dorsal and lumbar region; and a bi-lateral laceration of the cervix of the uterus with some prolapsus.

Treatment was directed toward the removal of the vertebral lesions. I gave also some local treatment. In two months the case was cured and her weight was increased to 120 pounds.

This same patient had worn glasses for

weak eyes for six years and could do nothing without her glasses. By correcting a lateral condition of the third cervical vertebra, her eyes were cured. There has been no return of the trouble since.

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#### Maine D. O's. Up-to-Date.

The Maine osteopaths have begun the new year with much zeal. The March business meeting was followed by a quiz on the ulnar nerve by Dr. Florence A. Covey, which reminded us all of our college days.

The April meeting was made interesting by a paper on "Disturbances from Inactivity of the Liver" by Dr. D. W. Coburn and a quiz on the anatomy of the liver by Dr. Viola D. Howe.

SOPHRONIA T. ROSEBROCK, D. O.,  
Secretary.

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Dr. Donohue Writes About The Nebraska Fight.  
DR. GEO. M. LAUGHLIN,  
Kirksville, Mo.

DEAR DOCTOR:—I wish to add a few lines about our recent legislative fight in this state although it has been the subject of several lengthy articles already. The facts are that we were all in a state of contented hibernation, until the McMullen bill had passed the house by a two thirds majority and was up to third reading in the senate, with twenty-two senators pledged to support it. At this stage we awoke here in Omaha and after a hurried meeting we delegated Dr. Gid E. Johnson to go to Lincoln with instructions to amend or defeat the bill. His appearance before the senate committee and his personal canvass amongst the members of the senate resulted in less than one week in such an overwhelming change of sentiment that the medics were not only forced to amend the bill in our favor, but public sentiment was brought to bear against the bill to such a degree that it finally resulted in the Governor's veto. Not anticipating the veto of the bill by Gov. Mickey, it is my humble opinion that had it not been for prompt and effective work of Dr. Johnson, the Nebraska osteopaths would at present be looking for greener fields.

Yours fraternally,  
M. E. DONOHUE, D. O.,  
Omaha, Nebraska.  
May 15, 1905.

#### BOY'S MIND GROWN LIKE A MUSHROOM.

From Infancy to Maturity in Three Months.

#### TREATED BY OSTEOPATHY.

(From The New York Times, May 29.)

John Harry was one of the confirmation class yesterday in the Little Church Around the Corner, in Twenty-ninth Street, just west of Fifth Avenue. The Rev. Dr. George C. Houghton stood sponsor for John Harry's right to become one of the Episcopal faith. Bishop Greer officiated.

Of all the parents and relatives of the members of Dr. Houghton's confirmation class, none rejoiced more in the services than did the father and mother of John Harry. The mind of their sixteen-year-old son had passed in three months from that of a child to that of a mature person. He could reason and believe as they did, and had been adjudged competent for confirmation in the church of which they had been members for many years. They thought it almost a miracle.

John was born in England. His father is the coachman of S. T. Zabriskie of 14 East Thirtieth Street. John has been simple-minded. His father and mother prayed nightly for an awakening of his intelligence, but there seemed to be no response to their supplications. Their faith did not fail, however, and they continued to pray.

As the years passed their boy grew in stature and strength, but his mind did not wake up. He could articulate only a few words and did not comprehend much that was said to him. His usual answer to a question was a vacant smile.

He went regularly to Sunday school. He was obedient and kindly, but it was evident that he had only a hazy notion of what was said. He could not read, but he could sit still, smiling gratefully when the teacher spoke to him or when one of the other scholars would share a book or leaflet with him.

The children were good to "Jack," as they called him. They would volunteer to see him home, even if it was out of their way, and he showed his gratitude by bringing little gifts to them—an apple, a piece of string; or horseshoe nail. The acceptance of his gifts gave him the keenest delight.

No place pleased him so well as the Sun-

day school, unless it was his father's stable. The horses would whiney at his coming, and the dogs came rollicking and barking to greet him. The most fractious horse would not throw back his ears when Jack entered the stall. He could wheel about in his little cart the new-born pupies without a snarl from their mother. When he was out in the streets strange dogs, with wagging tails, would seek his favor. The animals seemed to understand him and love him like the children did in the Sunday school, but he shunned strange grown-ups.

Dr. Houghton took a deep interest in the boy who was so gentle and patient. About three months ago the clergyman called the attention of his own physician, Dr. E. W. S. Howard of 509 Fifth Avenue, to the boy. The doctor is an osteopathist. After an examination the doctor declared that the boy was not an epileptic; his disorder was due to a lack of circulation of blood in the brain. The intellect was dormant, and the boy was in a state of torpor in all but his physical life.

The physician thought that osteopathic treatment would awaken the boy's mind, and Dr. Houghton invited him to take Jack as a patient. Dr. Howard consented, and his body has since been regularly manipulated in accordance with the principles of osteopathic treatment, with remarkable results.

Dr. Houghton said last night, when asked how it happened that the boy had passed in three months from practical infancy to maturity, so that he could be deemed competent for confirmation:

"It is all true, and remarkably wonderful. I believe it to be an act of God, using the physician as the instrument of His will. I never heard Jack utter a word until recently. He would just grin at any question, and never volunteered a remark. The doctor gave him osteopathic treatment, and his mind woke up.

"I went to see the boy at his home a few days ago. They told me that he could recite the Ten Commandments and the Apostles' Creed. He was thoroughly intelligent and a fit candidate for confirmation. Jack was seated near the window looking out. In the corner of the room were two of his dogs.



They seemed to resent my coming and walked out with an air of indignation at my presence.

"After I had talked a long time with the boy I asked him what had been in the room when I came in and he said the two dogs that had walked out. That showed he had been observing. I asked him what he had seen on Fifth Avenue, where he had been walking that afternoon, and he gave me a perfectly intelligent and interesting account of his observations.

"He told me of his studies, how he was learning to read, and of the many things that were of interest to him since his mind had awakened. He knew his Catechism and all the essentials of his church life perfectly. He was bright and alert, filled with curiosity about the world which had been opened to his understanding, innocent like a child, and eager to learn. It is one of the most remarkable cases in my experience."

Great care is being taken not to overburden the boy's mind, but this is difficult because he is intent on catching up with the mental development of the other children he knows. He learned his alphabet in a singularly short time, and can now easily spell most of the ordinary words. He remembers a good deal of his past, particularly his old-time friends. He delights in meeting the children who were kind to him, and has not lost his fondness for his animal friends. The dread of music he formerly had is gone, and he finds keen delight in it. His mental development is being watched with the keenest interest, particularly by Dr. Howard.

The physician was out of town yesterday.

\* \* \*

#### Indiana Society Holds Mid-Year Meeting.

The mid-year meeting of the Indiana Osteopathic society was held at Indianapolis, May 5th last and was the best meeting in the history of the society.

It was held at the close of the state board examination which was held in the same city for the three days preceding, in which thirty eight of our practitioners participated.

Dr. H. W. Forbes of the S. S. Still College of Osteopathy at Des Moines gave a very instructive talk and clinic on Rotary Spinal

Curvature and also demonstrated his method of placing the hip in a plaster cast.

The osteopaths who took the state board examination seem fairly well pleased, and no doubt a great big majority of them will pass and have their licenses soon.

J. E. P. HOLLAND, D. O.,  
Secretary

\* \* \*

#### Pathic.

(From Life, February 23, 1905.)

That seems a reasonable demand of the osteopaths—enjoyment of the same privileges as other reputable and well-established schools of healing.

That the "Regulars" should have a controlling voice as to when, where, how and what the osteopath should practice is doubtless an enjoyable situation—for the "Regulars." Equally impartial would be a body of orthodox deacons to decide on the chances of salvation for the wicked but happy heathen. Not that we are likening a doctor of any school to the wicked heathen: Life is too familiar with the achievements of the osteopath. We have a sincere respect for his many and marvellous cures of seemingly hopeless ills successes in fields where other schools of medicine have failed.

If a proper vote were taken on the bill for a fairer licensing of osteopaths, there could rest no doubts of its triumph. Innumerable would be the voters: those of twisted limbs made straight and good, the weak made strong, the old rejuvenated, and the vast army of bed-ridden invalids now up and doing.

A fair field and no favor. Let the sick man choose his own doctor.

\* \* \*

#### Tennessee Board Organized.

The Osteopathic Board of Tennessee met May 13th and organized by electing Dr. J. R. Shackelford, president, Dr. J. Earle Collier, secretary, and Dr. W. Miles Williams, treasurer. The first examination will be held in Nashville, July 7th and 8th. Any one wishing to take the examination should write the secretary, Dr. J. Earle Collier, of Nashville for application blanks.

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Although we did not approve the law recently passed in Pennsylvania, and later vetoed by Governor Pennypacker, we were sorry to see the good, faithful work of the Pennsylvania D. O.'s knocked into a cocked hat by the Governor who evidently, judging from this veto message, is prejudiced against osteopathy. Certainly many of the points in his veto message, as stated by Dr. Snyder in the May issue of the Osteopathic Physician, are not well taken: The Pennsylvania osteopaths deserve much credit for winning a victory in the legislature against big odds, and, although we do not agree with them, we admire them for their good fighting qualities.

\* \* \*

We trust the A. O. A. convention at Denver, August 14th to 18th, will be as largely attended as it deserves to be. The program committee has announced an excellent program, and it is our opinion that this session will be much the best one that the association has yet held. With the entire profession in concord on many questions of professional interest that have caused more or less disruption heretofore, we look forward to this convention with much pleasure and satisfaction, feeling that it will be one of great profit to the profession not only from a scientific standpoint but that much will be accomplished towards the further unification of the profession along the lines of ques-

tions involving educational standards and ethics. We urge every osteopath who is interested in the advancement of his profession to attend.

\* \* \*

"The Essential of Pathology, General and Special" is the title of a brief work of 150 pages just published by Chas. H. Hoffman, M. D., D. O., of the faculty of the American School of Osteopathy. This work is the forerunner of a complete work on the subject that Dr. Hoffman is preparing to publish during the next year. The present work is in the form of notes taken from his lectures during the past term. It is quite complete and very systematic. In addition to such matters as are usually found in any standard text on this subject, it contains much on the osteopathic cause of disease, making it a new and valuable contribution to osteopathic literature. The complete text, to be published later, will take up the subject in detail and will be illustrated by numerous original drawings. Dr. Hoffman at present is making a special study of osteopathic pathology, the results of which will be incorporated into his larger text.

\* \* \*

We are informed that in many states where osteopathic laws are on the statute books no effort is being made by the osteopathic boards to enforce them. In many instances undergraduates, and even those who have never attended school, are permitted to advertise and practice as osteopaths, year after year, much to the detriment of the science. Such practitioners are violating the laws of the land and should either be made to desist from the practice or comply with the statutes regulating it. In a certain Oklahoma town, a qualified practitioner has for his competitor a gentleman who has engaged in the practice there for several years, but who has only attended school five months. This last mentioned, unqualified practitioner has done much to bring the science into disrepute in his community, still, we are informed, that the Oklahoma board has done nothing to enforce the law and uphold the science. If the law is defective it should be amended, if not, the public and the qualified members of the profession are entitled to its enforcement.



## EXAMINATION QUESTIONS

Given at the Indiana State Examination Held in May, 1905, at Indianapolis.

## ANATOMY.

1. Describe the quadriceps extensor femoris muscle.
2. Give a brief description of the solar plexus.
3. Give the names of the muscles that flex upon the thigh.
4. Name the regions into which the abdomen is divided and give the structures in each region by diagram.
5. Give the anatomy of the portal circulation.
6. Where on the anterior chest wall do you get the most distinct sounds of the cardiac valves and why?
7. What are the anatomical reasons for pulmonary engorgement when the cardiac valves are incompetent. ?
8. Explain anatomically why inguinal glands are involved from septic infection at the foot.
9. Give the anatomy of the hip joint.
10. Give the origin, course and distribution of the phrenic nerve.

## PHYSIOLOGY.

1. Give the names of the tissues which compose the body and tell where each kind is found in the animal organism.
2. State the various facts to which are due the phenomenon of normal blood pressure.
3. What digestive changes take place in the small intestines?
4. Mention the facts and conditions that favor absorption and those that retard it.
5. Mention the principal excretory organs of the body and explain the difference between excretion and secretion.
6. How does the foetal circulation differ from the circulation after birth?
7. How is animal heat generated, maintained and lost?

## OBSTETRICS.

(Osteopathic)

1. What is meant by L. O. A., R. O. A., L. O. P., R. O. P.?
2. What and how many stages of labor are there?
3. What is meant by placenta previa?
4. Of what is the umbilical cord composed?

5. Describe foetal circulation.
6. Give the management of the second stage of labor.
7. Give treatment for threatened abortion.
8. Give indications for the use of the obstetric forceps.
9. Give diameters of the female pelvis.
10. Give hygiene of lying in room.

## GYNECOLOGY.

(Osteopathic.)

1. Define Gynecology.
2. What is meant by (a) Puberty, (b) Menopause?
3. Give causes, symptoms and treatment of (a) Dysmenorrhœa, (b) Amenorrhœa.
4. Define subinvolution, giving causes and treatment.
5. Name three kinds of lacerated cervix and describe same.
6. When and how would you repair a lacerated perineum?
7. Give symptoms, prognosis and treatment of carcinoma of the cervix.

## SURGERY.

(Osteopathic.)

1. Give names of four antiseptics in the order of their potency.
2. Give treatment of hydrocele of the testicle.
3. Give treatment of a tubercular abscess.
4. Give treatment of chancre.
5. Give symptoms and treatment of appendicitis.
6. Give symptoms and treatment of fracture of the middle third of the femur.
7. Give symptoms and treatment of a Pott's fracture.
8. Give symptoms and treatment of a dislocation of the femur onto the dorsum of the ilium.
9. Differentiate fracture of the outer third of the clavicle and a subcoracoid dislocation of the shoulder.
10. Describe (a) Compound fracture, (b) Simple fracture.

## PATHOLOGY AND BACTERIOLOGY.

1. Define degeneration and infiltration.
2. What is the pathology of enterolithiasis?
3. Describe all of the pathological conditions present in a heart where mitral stenosis has existed for several years.

4. Describe a lung affected by broncho-pneumonia.
5. Describe the pathological conditions present in each of the forms of goitre.
6. What is the pathology of spina-bifida?
7. Explain the difference between congestion and inflammation.
8. Name the different modes by which bacteria propagate.
9. How would you obtain a pure culture of the Klebs-Loeffler bacillus?
10. What bacteria may cause cholecystitis?

## PRINCIPLES OF OSTEOPATHY.

1. Describe a lesion and give two causes explaining how.
2. Give technique of correcting an innominate which is forward and upward.
3. How would you correct an anterior condition of the 3d, 4th and 5th lumbar vertebrae?
4. What is the best way of correcting a spinal curvature in which the primary curve is convex to the right and is at the lower dorsal and upper lumbar region, the secondary curve being at the upper dorsal region?
5. Give technique of correcting the following:

(a) Anterior Atlas.

(b) Posterior Axis.

(c) Posterior 5th dorsal.

(d) Depressed 5th rib.

(e) Depressed 1st rib.

6. How would you treat a rotated spine?
7. In facial paralysis what nerves are affected and how would you treat?
8. Give treatment for torticollis.
9. Name four disorders caused by a depressed fourth rib and explain how.
1. Explain (a) Stimulation, (b) Inhibition.

## THEORY AND PRACTICE OF OSTEOPATHY.

1. Give etiology, prognosis, symptoms and treatment of hay fever.
2. Give etiology, symptoms and treatment of lobar pneumonia.
3. Give diagnosis and treatment of parenchymatous nephritis.
4. Give symptoms and treatment of the first stage of pulmonary tuberculosis.
5. Give symptoms, prognosis and treatment of chronic constipation.

6. Give pathology, symptoms and treatment of acute articular rheumatism.

7. Give prognosis and treatment of (a) Writer's paralysis, (b) Telegrapher's paralysis.

8. Give etiology, symptoms and treatment of sciatica.

9. Give treatment of paralysis agitans.

10. In what diseases are the following physical signs present: (a) Barrel shaped chest, (b) Sugar in urine, (c) Viscid rusty colored sputum, (d) Fecal vomiting, (e) Urinous odor from the skin and breath.

## CHEMISTRY.

1. Give the formula of:
  - (a) Cane sugar,
  - (b) Glycogen,
  - (c) Glucose.
2. How would you detect the presence of indican in the urine?
3. What is the clinical significance of leucin and tyrosin in the urine?
4. What is the difference between the mercurous and the mercuric compounds? Give an example of each.
5. What is the difference, regarding solubility, between alkaloids and their salts in each of the following: (a) water, (b) ether, (c) alcohol, (d) benzene.

## PHYSICAL DIAGNOSIS.

1. Give technique of auscultation of the lungs.
2. Name varieties and characteristics of the normal breath sounds.
3. Give symptoms and physical signs of right ventricular hypertrophy.
4. What clinical information is obtained by inspection of the tongue?
5. Give technique of examination of the palate, tonsils and pharynx.
6. Give results of general abdominal palpation and percussion.

## ETIOLOGY AND HYGIENE.

1. Give etiology and hygienic measures for prevention and treatment of tuberculosis.
2. Give etiology and hygienic measures for prevention and treatment of acute gastro-intestinal catarrh of infancy and childhood.
3. Give etiology and hygienic measures for prevention and treatment of typhoid fever.
4. Give hygiene of sickroom.
5. Describe personal hygiene.



## NEUROLOGY.

1. What are the general diagnostic symptoms of cerebral tumor?
2. What are the diagnostic symptoms of multiple sclerosis?
3. Give the location and function of Broca's convolution.
4. Give the etiology of multiple neuritis.

## RHINOLOGY AND LARYNGOLOGY.

1. What is the most common cause of obstruction to the posterior nares?
2. Differentiate between tubercular and syphilitic laryngitis.

## MEDICAL JURISPRUDENCE.

1. What are the diagnostic symptoms of morphine poisoning?
2. What are the characteristic post mortem findings after drowning.

\* \* \*

## Osteopathy Recognized In Hawaii.

## AN ACT

TO AMEND SECTION 1068 OF THE REVISED LAWS OF HAWAII.

Be it Enacted by the Legislature of the Territory of Hawaii:

SECTION 1. That the first paragraph of Section 1068 of the Revised Laws of Hawaii be amended so as to read as follows:

"Section 1068. No person shall practice medicine or surgery in the Territory of Hawaii either gratuitously or for pay, or shall offer to so practice, or shall advertise or announce himself, either publicly or privately, as prepared or qualified to so practice, without having first obtained from the Treasurer, under the seal of his Department, a license in form and manner substantially as hereinafter set forth. Such license shall only be granted upon the written recommendation of the Board of Health, provided however, that licenses to practice Osteopathy may be granted to graduates holding diplomas from any legally chartered and regularly conducted School or College of Osteopathy, and further provided that a Certificate to practice Osteopathy has first been obtained from the State Board of Osteopathic Examiners of the State of California, until such time as there is an Osteopathic Board of Examiners appointed for the Territory of Hawaii.

And provided further, that the practice of medicine as contemplated and set forth in this Act shall not be construed to exclude

the use of any method or means or any agent either tangible or intangible by any person licensed to practice osteopathy, for the treatment of disease in the human subject, provided that no person so licensed to practice Osteopathy shall, by reason thereof, be authorized to administer drugs or medicines.

Any person applying for a license to practice Osteopathy shall first file with the Treasurer a certified copy of such diploma and satisfactory evidence that the applicant is a fit and proper person to be so licensed to practice Osteopathy, and file with the President of the Board of Health a certificate from the Board of Osteopathic Examiners of the State of California, certifying that the applicant has passed the required examination, and is entitled to practice Osteopathy in that State.

No license shall be granted under the provisions of this Section unless the applicant shall pay an annual fee of Ten Dollars."

SECTION 2. This Act shall take effect from the date of publication.

Approved this 21st day of April, A. D., 1905.

G. R. CARTER,

Governor of the Territory of Hawaii.

\* \* \*

## Osteopathy For Singers.

I must tell you about some recent experiences among a number of great artists. I have been assisting in a musical festival here—an affair of great proportions—in which the Symphony Orchestra of Pittsburg (56 men) with Emil Paur, director, and Madam Gadski, Madam Linne (mezzo soprano), Holmes Cowper (America's greatest tenor) and M. Baerstein of Nuremberg, Germany (Bass)—participated. On the night of the appearance of Gadski her voice became hoarse and I was called off the stage to treat her. After the performance her manager asked me to accompany them to her private car, where I gave her another treatment. Baerstein also asked me to call at his hotel after I finished my work with Gadski. He is still in the city and taking regular treatment. But the remarkable thing was the fact that all—Cowper, Baerstein and Linnie—except Gadski were patrons you might say of osteopathy. I think it is a matter worth of publicity that these great singers have found in osteopathy a means for the relief of their

throats surpassing that of anything offered by any other system. It simply shows that these great artists from sheer force of necessity have selected the one treatment that not only appeals to common sense but meets the demands of their professional life.

J. L. HOLLOWAY, D. O.,  
Dallas, Texas.

\* \* \*

## The "Old Doctor" In New York.

After many invitations to visit the East, the Old Doctor at last accepted an invitation to visit the Greater New York Osteopathy society which he addressed at the St. Denis Hotel, May 20th. He was accompanied by Dr. C. E. Still, who was also a guest of the society.

He had planned to visit Boston and Washington on his eastern trip, but was disappointed in this, as after reaching New York he did not feel able to continue the trip as planned.

The banquet tendered to the "Old Doctor" and "Dr. Charley" is reported to have been a delightful affair. Dr. Evelyn K. Underwood, secretary of the society writes:

"It was the greatest event we have had in these parts. There were 175 present and every one delighted with the Old Doctor. He stayed through the dinner and speech making and gave his talk at the last. It was good to see him. Of course he was applauded on all occasions and every one wanted to and did shake his hand."

The program given at the banquet follows:

Toastmaster, Charles Hazzard.

Invocation, J. B. Banker.

A Friendly Chat, Andrew T. Still.

The Capitol, Ralph H. Williams.

Seeing New York, Charles E. Still.

Our Warriors, George W. Riley.

"Sunny Jim"—The Star of Hope, Harry L. Chiles.

What Doest Thou? Rev. George N. Nason.

\* \* \*

## Osteopathy in Washington D. C.

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

There is a charter membership of seven-

teen, and the officers are as follows: Dr. George P. Kirkpatrick, president; Dr. Alice M. Patterson, vice-president; Dr. Clarissa B. Tufts, secretary; Dr. Merton A. English, treasurer, and an executive committee of five—Drs. C. H. Stearns, C. O. Goodpasture, Kathryn Talmadge, W. O. Smith, and Emma O. DeVries.

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

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

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

Third, to promote sociability and fraternal feeling among ourselves.

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

CLARISSA B. TUFTS, D. O.,  
Secretary.

\* \* \*

## A Correction.

In the May number of the Osteopathic Physician there appeared a statement to the effect that Dr. H. W. Forbes of Des Moines, had refused a flattering offer to become a member of the A. S. O. faculty at Kirksville. This is a mistake as no chair at Kirksville has ever been proffered to the doctor.

C. E. STILL.

\* \* \*

FOR SALE:—Practice and office fixtures, in Central Illinois town, population, 8000. One other osteopath in city. Practice last year \$3000 cash. Man and wife could do splendidly. Reasons for selling given prospective buyer. Office leased until Jan. 15, 1907. Address, L. & C., care Journal of Osteopathy.

## Notice.

I desire to announce to osteopathic physicians that I will be in Denver during the meeting of the American Osteopathic association in August and will take pleasure in showing our new treating table, The "Hilo," to any desiring to see it. See our advertisement in this issue for full description.

L. H. McCARTNEY, D. O.,



## Personal Mention.

Dr. R. D. Stelle has located at 405 Fay Bldg., Los Angeles, Cal.

Died, on March 23d, the wife of Dr. F. A. Pardee, of Rochester, Pa.

Dr. F. K. Walsh has recently located in the Waite Bldg., Colfax, Wash.

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

Dr. Esther Whittaker announces her return from Springfield, Ill., to Perry, Ill.

Dr. Lulu L. Cramb has changed her location from Denver, Colo., to Fairbury, Neb.

Dr. Harry M. Gifford has opened an office for the practice of his profession at Louisiana, Mo.

Dr. J. H. Overton of Dallas, Texas, announces that he has moved to No. 415 Wilson Bldg.

Dr. A. E. Robertson of the last graduating class has located at Winnipeg, Manitoba, Canada.

Dr. Arthur Kew of Philadelphia, has opened a branch office at Champion Apts., Atlantic City, N. J.

Dr. Cecil J. Huntington of the February class '05, S. C. O. has located at Jamestown, Kansas with a good start in his work.

Married, at Columbia, Miss., May 10th, Dr. G. C. Maxwell of Huntington, Ind., and Miss Nellie Ford of Columbia, Miss.

Married, at Visalia, Calif., Feb. 8th, Dr. Mina Abbott of Visalia, Cal., and Chas. E. Robinson of Hanford, Cal.

Married, at Port Tampa City, Fla., May 31st, Dr. Victor P. Urbain of Hamilton, Ohio, and Miss Jessie Handay of Port Tampa City, Fla.

Dr. A. F. Shaw has recently located at Hollywood, Calif. He is building a new home there and expects to make it his permanent location.

Drs. N. J. Sickels & Lamar K. Tuttle of New York City, have opened a branch office for the practice of osteopathy in Morristown, N. J.

Dr. Charles E. Crow, of Muscatine, Iowa, recently read a valuable paper on "Osteopathy and Child Birth" before the Mothers' Club of his home city. This is his second appearance before the club and gives evidence that his first services were appreciated.

Drs. Murray & McCall of Elgin, Ill., announce the opening of a branch office at Batavia, Ill. Their Elgin offices are at 32-35 The Spurling.

Married, at Edwardsville, Ill., July 12, 1904, Dr. F. G. Crowley of the A. S. O. faculty and Miss Frances Tinkham, a member of the faculty of the Kirksville State Normal.

Drs. Tucker, Nicolson & Tucker, formerly of Port Arthur, Texas, have dissolved partnership. Drs. Tucker go to Van Buren, Ark., while Dr. Nicolson will practice in Fulton, Mo.

Dr. R. E. Chantry of the June '04 class, S. C. O. has located in the Alaska Bldg., Seattle, Wash., for the practice of his profession. He is fortunate in getting into the best office building in the city.

Dr. W. J. Hoagland, of the S. C. O. has removed from Norfolk, Neb., to Central City, Neb., where he is successfully engaged in the practice. He was succeeded at Norfolk by Dr. O. R. Meredith.

Drs. Peirce & Peterson of the February '05 graduating class at Still College, Des Moines, have located at Calgary, Alta, Canada, for the practice of their profession. These are two thoroughly equipped osteopathic physicians who will succeed.

Drs. W. E. and E. M. Whealen have located at 948 Belmont St., Portland, Oregon. This is in East Portland where there are no other osteopathic physician and our friends will doubtless have an early prosperity.

On May 1st, Drs. Skeen & Loving of Jacksonville, Ill., dissolved partnership by mutual consent. Dr. G. S. Skeen has located in Decatur, Ill., Room 2, Haworth Blk. Dr. A. S. Loving succeeds to the business in Jacksonville and retains the office rooms, 12-16 Morrison Blk., formerly occupied by the firm.

Dr. Elmer D. Rogers has purchased through Miller's Real Estate Agency the handsome 12-room residence of Fred Grace on North Street for \$10,000. This will afford Dr. Rogers the most elegant offices in this city. Since coming to New Castle Dr. Rogers has built up a lucrative practice and the decided and steady increase in his business compelled him to seek more commodious quarters.—New Castle Times.

The following alumni visited the A. S. O. during the past month: Drs. Emma E. Cain, Hannibal, Mo., Minnie Potter, Memphis, Mo.; William Thorington, Memphis, Mo.; Orie Coppennoll, Wilber, Neb.; J. A. Crow, Memphis, Mo.; M. J. Magers, Seymour, Ia.; David Spicer, Boonville, Mo.; M. A. Smoot, Aberdeen, Wash., and Retta Collicott, Fredericktown, Mo.

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## Removal Notices.

Dr. V. L. Springer, from New Albany, Ind., to No. 404 Rich Ave., Richmond, Ind.

Dr. F. A. Pardee, from Leaf Bldg., to Mitchell Blk., Rochester, Pa.

Dr. E. E. Harden, from Columbia City, Ind., to Butler, Pa.

Dr. C. L. Richardson, from 122 Euclid Ave., to 946 Rose Bldg., Cleveland, Ohio.

Dr. Stanley Jones, from York, Pa., to 903 "H" St., N. W., Washington, D. C.

Dr. L. E. Scott, from 105½ Arlington, to 12 Logan Pl., Cleveland, Ohio.

Dr. P. R. Kamp, from Lock Haven, Pa., to Williamsport, Pa.

Dr. A. L. Wilson, from Los Angeles, Cal., to Anaheim, Cal.

Dr. W. W. Adams, from Anaheim, Cal., to Oxnard, Cal.

Dr. J. E. Snyder, from Chadron, Neb., to 573 Commercial St., Astoria, Ore.

Dr. J. P. Fitzharris, from 695 Franklin Ave., to 1293 Bedford Ave., Brooklyn, N. Y.

Dr. Jesse L. Near, from Visalia, Cal., to Tulare, Cal.

Dr. M. E. Morgan, from Ft. Smith, Ark., to Box 56 Santa Clara, Cal.

Dr. B. H. White, from Holton, Kans., to Payette, Idaho.

Dr. H. E. Bedley, from 3149 Pine St., to 407 S. Jefferson, St. Louis, Mo.

Dr. S. W. Willcox, from 579-24th St., to 253 Bacon Blk., Oakland, Calif.

Dr. J. S. Conner, from Mt. Vernon, Mo., to West Plains, Mo.

Dr. W. O. Wait, from St. Louis, Mo., to W. College Ave., Jacksonville, Ill.

Dr. A. D. Morrow, from Clinton, Mo., to Richmond, Mo.

Dr. L. E. Downs, from Chicago, Ill., to Clinton, Mo.

Dr. C. A. Camp, from Bloomington, Ind., to 36 W. Market St., Huntington, Ind.

Dr. A. Taylor, from Citizen's Bk Bldg., to Carpenter Bldg., Northfield, Minn.

Dr. Katherine Woltman, from Neeper, Mo., to Delaware, Ill.

Dr. Ollie E. Elam, from Seneca, Kans., to Marysville, Kans.

Dr. Ida Andrew, from Abilene, Tex., to Boulder, Colo.

Dr. A. M. King, from Roswell, N. Mex., to Box 27, Lake Arthur, N. Mex.

\* \* \*

## Baseball.

The baseball season for the A. S. O. team has just closed for this year. Manager Rust reports a very successful season, the boys having won a majority of the games and the receipts were more than sufficient to cover all expenses. Following are the games which have been played this spring:

April 1st, A. S. O. vs. Bles Military Academy, at Macon. A. S. O. 4, Bles, 5.

April 14th, A. S. O. vs. Bles Military Academy, at Kirksville. A. S. O., 6, Bles 4.

April 21st, A. S. O. vs. Kirksville State Normal. A. S. O., 7, Normal, 12.

April 28th, A. S. O. vs. Kirksville State Normal. A. S. O. 7, Normal 13.

May 6th, A. S. O. vs. Quincy Business College, at Kirksville. A. S. O. 1, Quincy 11.

May 19th, A. S. O. vs. Still College, at Des Moines. A. S. O. 6, Still 4.

May 20th, A. S. O. vs. Highland Park College, at Des Moines. A. S. O. 1, Highland Park 7.

May 30th, A. S. O. vs. Chillicothe Normal, at Kirksville. A. S. O. 11, Chillicothe 3.

June 2nd, A. S. O. vs. Still College, at Kirksville. A. S. O. 9, Still 3.

June 3rd, A. S. O. vs. Still College, at Kirksville. A. S. O. 3, Still 6.

June 3rd, A. S. O. vs. Highland Park, at Kirksville. A. S. O. 7, Highland Park 6.

\* \* \*

## Milwaukee Society Addressed by Dr. C. P. McConnell.

At the May meeting of the Milwaukee Osteopathic society, Dr. C. P. McConnell, of Chicago, was the guest of honor and addressed the society on the "The Present Situation." At the conclusion of Dr. McConnell's address, a banquet was held at the Pfister Hotel at which the following program was carried out:



Toastmaster, Dr. J. Foster McNary.  
 Invocation, Rev. D. T. Denman, D. D.  
 Greetings from the State Association, Dr. W. B. Davis.  
 Response, Dr. C. P. McConnell.  
 Our Organization, Dr. Rose King.  
 Solo—"Selected", Dr. Essie S. Cherry.  
 Ethics, Dr. Louise P. Cram.  
 "The Battle of the Schools," Dr. S. A. L. Thompson.  
 "The Greatest Thing in the World," Dr. G. T. Elton.

We had a delightful and helpful meeting, owing to Dr. McConnell being present, and his able address on "The Present Situation." We greatly appreciate his coming to us for this meeting. We hope to make a success of our city association. Our next meeting will be held in the club room of the Hotel Pfister on the first Tuesday in June at eight o'clock. Dr. S. A. L. Thompson and Dr. Rose N. Klug are the presiding officers for the June meeting.

BESSIE C. CHILDS, D. O.,  
 Secretary.

\*\*\*

The osteopathic examination board composed of Dr. J. M. Rouse of Oklahoma City; president; Dr. A. J. Price, secretary of Perry, and Dr. J. W. Slade, treasurer, of Guthrie, examined ten applicants to practice osteopathy in the territory, all of whom passed successfully. They are as follows:

Dr. G. W. Neff, of El Reno; Elizabeth Johnson, of Oklahoma City, W. H. Willard, of McLoud; Gordon Dinsmore, of Guymon; O. F. Heisley, of Ft. Worth, Texas; M. C. Smyth, of Oklahoma City; Olive Sturgess of Cherokee; Daisy S. Dennison, of Guthrie; Ruth Jones, of Guthrie; J. H. Malone, of Piedmont.

The next meeting of the association will be held in November at Enid. The meeting, yesterday was a special called meeting.

Those in attendance yesterday beside those taking the examinations were as follows:

Mrs. Dr. Neva Triplett, president, Enid.  
 Mrs. Dr. C. W. Wallace, vice-president, Blackwell.  
 Mrs. Dr. H. S. Wiles, secretary, Ponca City.  
 Dr. Margaret E. Pluss, treasurer, Chandler.

Mrs. Dr. Clara Mahaffy, Oklahoma City,  
 Miss Dr. Stevens, Stroud.  
 Dr. O. L. Leeper, Guthrie.  
 Miss Dr. Ruth Jones, Guthrie.  
 Mrs. Dr. Denniston, Guthrie.  
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Since the American Osteopathic association has demanded a three years' course and all our recognized colleges have complied with that demand by instituting a three years' course, and since three-year laws have been recently passed in several states, and, without doubt, all future legislation regulating our practice will be upon that basis, the advantages of this course are self-evident.

The practice of osteopathy during the past few years has made rapid strides towards a more scientific basis—much of error has been eliminated and much of truth incorporated. It is our intention to give in this course practical instruction along osteopathic lines with special attention to diagnosis and treatment so as to more completely equip our graduates to conduct a general practice.

Our new hospital will be in operation by Sept. 1st so that post-graduate students can and will be given special instructions in the treatment of surgical and acute cases. The course of instruction is as follows:

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Pathology and Bacteriology.....	Dr. Hoffman
Clinical Osteopathy.....	Dr. G. M. Laughlin
Surgery and Physical Diagnosis.....	Dr. Young
Dissection.....	Dr. Young
Physiology of Nervous System.....	Dr. Gardine
Gynecology and Obstetrics.....	Dr. Clark
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Diseases of Skin and Venereal Diseases, 1 mo.			Physiology of the Nervous System 2 mo.	Medical Jurispru- dence, 2 mo.			

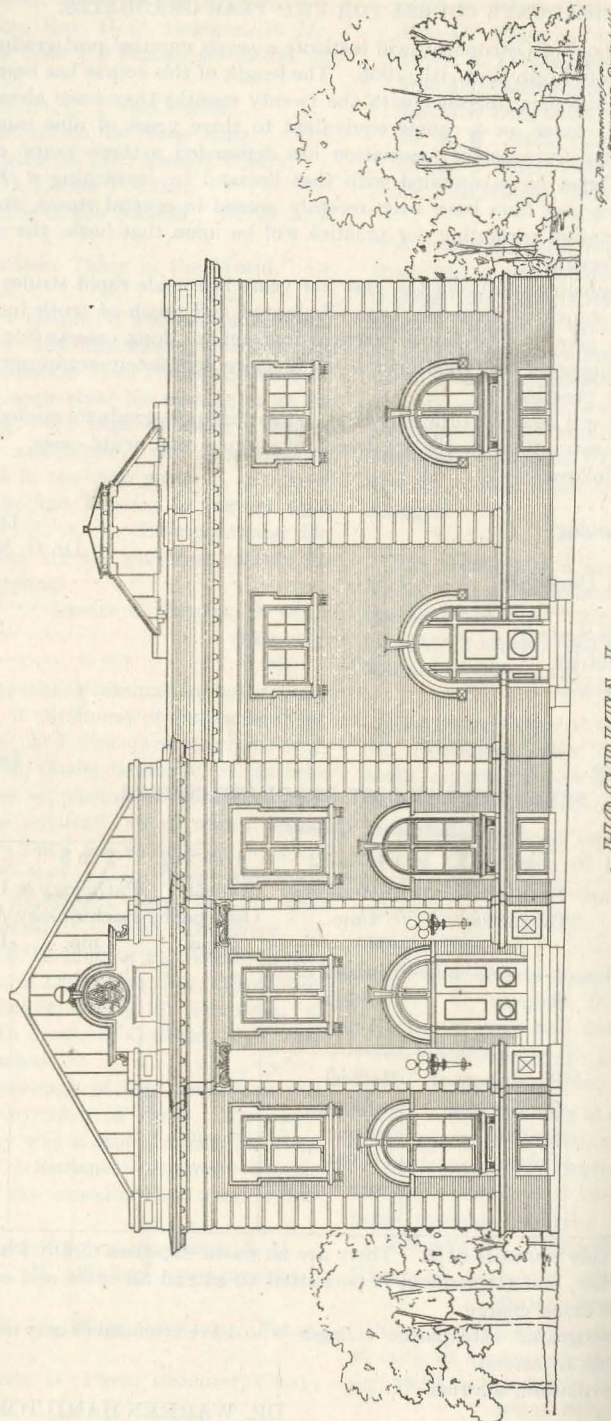
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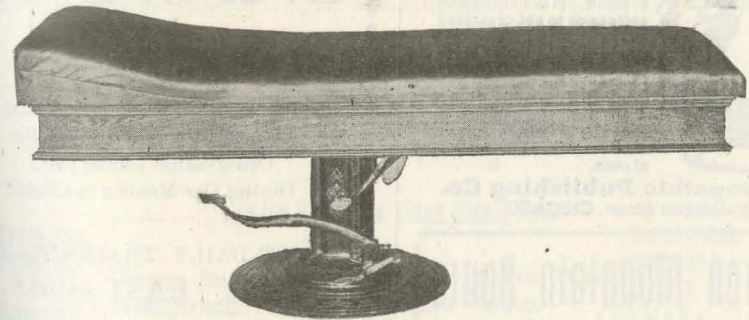
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BALTIMORE, MD.—July 5 to 10, 1905. Account Christian Endeavor meeting.

BUFFALO, NEW YORK.—July 7, 8 and 9, 1905. Account Elks' Convention.

DENVER, COL.—June 30 to July 4, 1905. Account of Epworth League Convention.

DENVER, COL.—August 12 and 13, 1905. Account Eagles' Convention.

INDIANAPOLIS, IND.—June 19 to 22, 1905. Account National Turnfest North America.

MILWAUKEE, WIS.—June 16 to 19, 1905. Account Modern Woodmen Encampment.

PITTSBURG, PENN.—August 21 to 26, 1905. Account K. of P. Convention. (Colored.)

PORTLAND, SAN FRANCISCO AND LOS ANGELES.—May 23 to September 30. Account Lewis and Clark Exposition and various Conventions.

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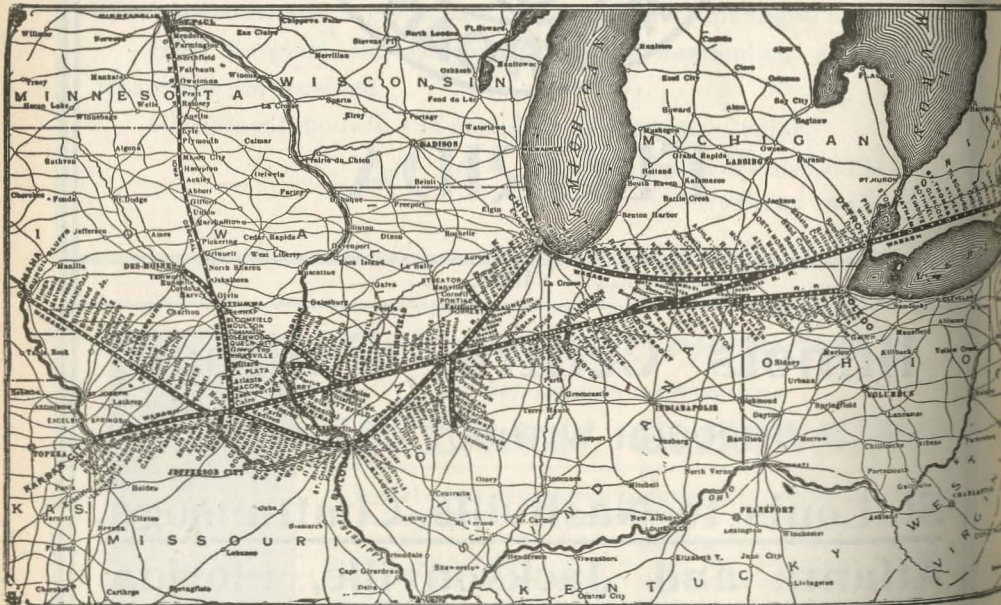
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