

The Journal of Osteopathy

August 1910

Vol. 18, No. 8

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The Journal of Osteopathy

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Published monthly by the Journal of Osteopathy Publishing Co., Kirksville, Missouri. Subscription \$1.00 per year in advance; Canada, \$1.10; Foreign, \$1.25. Those sending in, requesting changes of address, will please send both old and new locations, so that the change may be made promptly.

Vol. XVIII.

August, 1911

No. 8

CONTENTS OF THIS NUMBER.

PROFESSIONAL CARDS	574
EDITORIAL	579
BONE-SETTING AND THE FACULTY—A VINDICATION	584
MESSAGE TO THE GULF STATES OSTEOPATHIC SOCIETY	600
RANDOM IMPRESSIONS OF THE CHICAGO MEETING	605
PROGRAM OF THE A. O. A. MEETING	607
THE FORUM	610
LEGAL AND LEGISLATIVE	614
ASSOCIATIONS	616
PERSONALS	619
BUSINESS OPPORTUNITIES	621
MARRIED	621
LOCATIONS AND REMOVALS	635
DIED	635

Entered at the Post Office at Kirksville, Missouri, as Second Class Matter.

"John Bull," another English magazine, in the issue of July 15, 1911, speaks editorially as follows:

The Courage of Conviction.

It needs no small courage for one of the Faculty to champion the cause of Dr. Barker, the manipulative surgeon. Dr. Walter Whitehead is one of the most distinguished of living surgeons, and when he boldly says, in the English Review, that the time has come when this successful bone-setter—this man who in case after case has cured where the surgeons, even the great surgeons, have failed—should have justice done to him by a medical inquiry into his methods, it may be taken for granted that there is more to be said for Mr. Barker than would appear from the abuse and approbrium and slander with which he is assailed by the medical profession.

The Challenge by the National Association Nothing which could have been planned would have gained more general publicity than the challenge issued by the A. O. A. to the three opposing schools of medicine. The newspapers from California to Maine have taken it up either as simply a matter of news or with editorial comment. In this respect the publicity is about equal to the Flexner report which our medical friends pulled off. From the standpoint of honesty of purpose, the osteopaths are ready to have their challenge taken seriously by any school of healing which thinks it has a better method than the osteopaths; while, from this standpoint, the less said about the Flexner report the better. With this report, the medics sought to wield political influence adverse to osteopathy and to promote the erroneous impressions which, thanks to their efforts, exist in a certain proportion of the lay mind; the osteopaths have issued the challenge to fight on scientific grounds, being entirely willing to be judged by results. The challenge has not been accepted, but like the Scriptural "dog returning to his vomit," these medical men are falling back upon their ancient ridicule. Even Dr. Edwards of Northwestern says we are not "educated." We personally know of a lot of fairly intelligent students pouring hours and hours over "Edwards's Practice of Medicine," in fact for a whole year with a recitation for an hour every day—wouldn't it perhaps be advisable to change textbooks? Besides, we hope the esteemed doctor will chance to see the article in another part of this number of the JOURNAL, by another famous Englishman, whose opinion seems to be quite to the contrary to the one outwardly cherished by himself. Let us hope also that when he is reading the article, some propitious impulse or spirit-prompting

will cause him to waken up to the fact that notwithstanding the good work he has done he "may be a little slow."

Other medical men of political note have expressed themselves viewing the challenge as purely "a bluff." We are not surprised at this. This is the commodity they deal in principally, and why should they not pose as judges? But, what a beautiful opportunity this challenge affords to "show up osteopaths and osteopathy!" If it is only a bluff, why do they not prove it? Surely nothing could be so effective or decisive as to show by actual test that what they have been saying about osteopathy is real truth. Strange that the exposure which osteopaths have thus invited should not appeal to these medical men as "a real opportunity." If the challenge be not accepted, a certain advantage must and will rest with the makers of the challenge. To this, ridicule and slander, in the popular mind, will be an answer entirely inadequate. In our opinion, it is up to this class of ridiculing, sneering medical men to either "put up or shut up."

The Death of Dr. Warren Hamilton

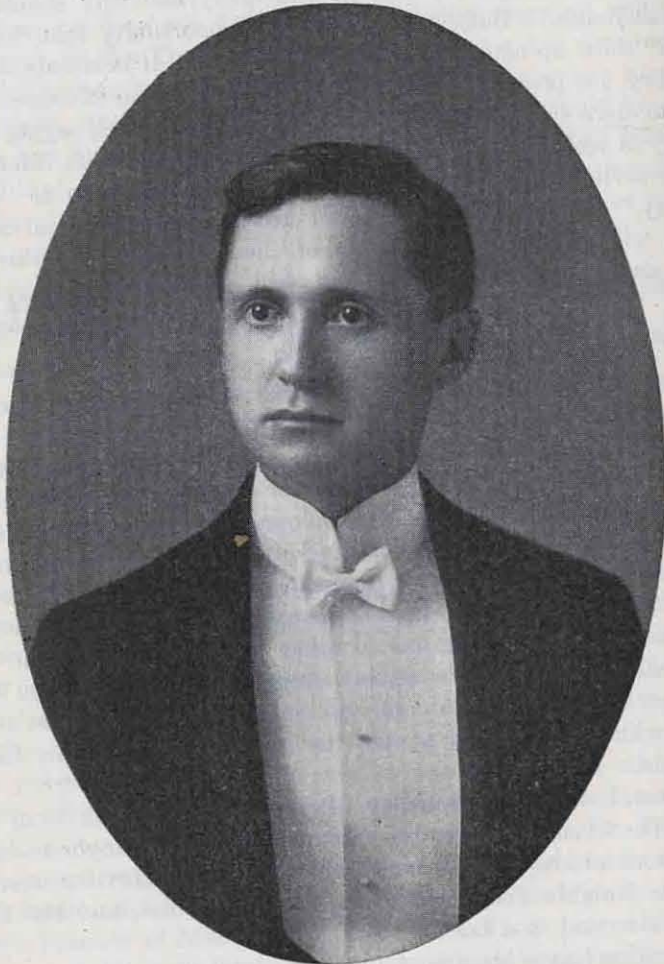
With the passing of Dr. Hamilton the American School of Osteopathy has lost an efficient business manager and financier. Had it not been for his efficient guidance of the business affairs of the school during the earlier stages of its development, it is doubtful whether the school would so quickly have reached its present flourishing status. Dr. Hamilton was for thirteen years the secretary of the American School of Osteopathy, and he has for many years been identified with the business interests of a number of other Kirksville institutions.

His death occurred on Wednesday, August 2, at his home on West Pierce Street, and was due to complications arising from Bright's disease, from which he suffered acutely for some time. He was forty-two years old.

The funeral was held Thursday afternoon at 4 o'clock from the residence. The business houses were requested by the Mayor to close during the hour of the funeral, which they did. The services were in charge of the Knights Templar, the Knights of Pythias, and the Elks lodges, who attended in a body.

Dr. Hamilton leaves his wife and one son, Arthur, aged fifteen years; his parents, Mr. and Mrs. H. S. Hamilton; four brothers, Charles A., Will and Dr. R. E., all of Kirksville; Frank Hamilton, of La Plata, and one sister, Mrs. J. F. Curtis, of Ft. Benton, Montana.

Dr. Hamilton was born in Knox County. He was educated at the Kirksville Normal School and took his D. O. degree at the A. S. O. He studied banking and corporation law, and was admitted to the bar in



DR. W. B. HAMILTON

Kirkville under Judge Ellison. His first business venture was when he became secretary of the State Building and Loan Company, in Kirkville, and since then he has been connected with a number of other concerns. At the time of his death he was a stockholder in the Union Station Bank in St. Louis, of which he was one of the founders; of the Kirkville Light, Power & Ice Company; of the Masonic Hall Association, and he was vice-president of the Citizens National Bank, besides his connection with the American School of Osteopathy.

For the past two years he has been unable to take but little part in the affairs of the companies of which he was a member, but continued to act in an advisory capacity. For the past ten weeks, he has been in bed, and the members of his family had scarcely dared to hope that he would recover.

Dr. Hamilton has long been known as one of the most enterprising citizens of Kirkville, and the city suffers a serious loss in his death. When any public movement looking toward improvement in Kirkville was under way, Dr. Hamilton always gave liberally of his business acumen and means to further the work. He was a man of remarkable business foresight, and his trait was especially valuable to concerns with which he was identified.

As Secretary and Treasurer of the American School of Osteopathy, he handled the finances of the institution and was the active business head of the school. At the inception of the present A. S. O. Hospital a great many business men thought it too great a financial undertaking, but his enterprise and genius have played no small part in putting the Hospital upon the flourishing basis on which it now is. There is no doubt that his connection with so many enterprises and particularly with the large interests of the school, were a severe strain upon his not robust constitution, and was the means of shortening his life. In Dr. Hamilton the science of osteopathy has lost a staunch advocate and friend.

Succeeds

**Dr. Warren
Hamilton**

At a meeting of the Board of Directors of the American School of Osteopathy on Monday, August 14, Mr. Eugene C. Brott was elected a director of the corporation and Secretary and Treasurer of the Board, succeeding Dr. Hamilton. Not being able, on account of his illness, any longer to attend to his duties at the school, Dr. Hamilton some time ago relinquished the active work of the Secretary- and Treasurership to Mr. Brott, and his experience and training, together with the efficient manner in which he has conducted the business of the corporation during Dr. Hamilton's inability, make him pre-eminently the man for the place, and we bespeak for him the entire confidence of the whole profession.

Bone-setting and the Faculty

A VINDICATION

BY WALTER WHITEHEAD, F. R. C. S., F. R. S. (Edin.)

The writer of this article, Mr. Walter Whitehead, F. R. C. S., F. R. S., is one of the most distinguished of living surgeons, and his methods of operation are employed all over the world.

He was President of the British Medical Association in 1902, and is consulting surgeon to some of the leading hospitals in England; late Professor of an Examiner in Clinical Surgery, Victoria University; Fellow of the Medical Society, London; author of *Statistics of English Surgery*, *Excision of the Tongue* followed by *Tracheotomy and Gastrostomy*, *Excision of the Cæcum*, &c. &c.

It was my privilege to sit through the three-days trial of the action *Thomas v. Barker*, which, it will be remembered, was an action brought by a Mr. Thomas to recover damages placed at £5000 for the loss of his leg, which loss, it was alleged, was due to the negligent treatment of Mr. Barker, the eminent bone-setter of Park Lane. I may remind my readers that the verdict was one in favour of the plaintiff, and the compensation awarded for the loss of his leg was twenty guineas. Possibly the matter has already been relegated to the realm of forgotten facts. With me, however, it still remains as a vivid memory. When I dwell upon the verdict I am amazed and indignant. Amazed that any intelligent body of men could possibly come to a decision which saddled a man, against whom not one derogatory word had been said in court, with the burden of odium inseparable from an adverse verdict, and yet shrunk from awarding the plaintiff, who they declared by their verdict had made out his case, the damages he was entitled to recover from the defendant! Twenty guineas damages means, in this case, very much what a farthing means in a libel action. They are contemptuous damages, and indicate what, in their hearts, the jury think of the action. But I am indignant at the verdict in the face of the evidence brought by Mr. Barker to rebut the allegations made by the plaintiff. Either it was true or the witnesses were stating what they must have known to be false. They declared with absolute unanimity, after examination of the amputated limb, that it had been doomed long before Mr. Barker even saw it. They had arrived at that conclusion with no difficulty. Both these gentlemen—who swore that whatever Mr.

Barker did or did not do made no ultimate difference to the fate of the limb, it was bound to be amputated sooner or later—had had exceptional experience with tuberculous disease of the knee-joint. Before the trial came off I myself had an opportunity of examining the amputated limb. I have no intention of inflicting upon my readers a technical account of what I saw. It must suffice if I indicate my conclusion, which in no way differed from that arrived at by the two surgeons who had examined the limb at the earlier stage. Tuberculosis had been present for years. In my opinion, nothing could have saved a limb which presented such evidence of advanced disease. The medical theory upon which the plaintiff relied for the substantiation of his allegation might be true or untrue. But here it had no possible application. The limb was doomed, and to make Mr. Barker responsible for the loss of a leg which had been a source of trouble for over nine years was preposterous. It might be true that rough handling would have the effect which the medical witnesses called by the plaintiff suggested. But to affirm that such rough handling took place upon either of the two occasions alleged—viz., the two occasions Mr. Thomas was placed under an anæsthetic—was to affirm what the evidence placed before the court absolutely disproved. The anæsthetist, Dr. Axham, who assisted Mr. Barker, swore that no violence of any kind was employed, and that the gentle movements of the leg during examination could not possibly have had the effects alleged by the doctors called by the plaintiff. Further, the medical witnesses who had had the widest experience of this disease declared that had Mr. Barker used the force or violence it was alleged he did use, the plaintiff would have been in such a state of immediate collapse that not only would he have been unable to leave Mr. Barker's consulting-room, but he would have required the immediate attention of medical men, and possibly an operation to save his life within forty-eight hours, and within a week at the very utmost. The operation did not take place for nearly THREE MONTHS after Mr. Thomas's last visit to Mr. Barker! I affirm with the utmost confidence that had the violence alleged been used nothing could have so long postponed an operation, and I marvel and am indignant that members of the Faculty should have lent the weight of their influence to support an allegation that will not bear investigation on scientific lines.

The evidence tendered by the plaintiff himself showed that all the conditions necessary for encapsulation had been violated by him. Absolute rest is the indispensable condition for at least twelve months, and in the autumn of the year in which the plaintiff visited Mr. Barker

he was engaged in tennis-playing and swimming! To have established the plaintiff's case it was necessary to show that he had a reasonable chance of recovery, that Mr. Barker destroyed that chance by his negligent treatment, and that such violence had been used by HIM as to irreparably damage the leg. Not one of these things was shown. The evidence went all the other way. Yet, in the face of that evidence, the jury returned a verdict which places upon Mr. Barker the responsibility of an act which no one knows so well as he, could only be the act of a fool or madman!

Sir Edward Carson, in the course of his opening speech for the defense, used a phrase which, when he uttered it, made me uncomfortable: "Had Mr. Barker been a qualified man this action would never have been brought." It implied so many things which one would rather not admit. It implied that had Mr. Barker, being a properly qualified medical man, been guilty of the negligence alleged, no member of the Faculty would have countenanced an action or lent the weight of his influence to it, no matter what the degree of his culpability. It suggested that not only was this action sustained by the active assistance of members of the Faculty, but that it had been prompted by them. That the Faculty had no love for Mr. Barker was an open secret. But one would have thought that the instincts of English gentlemanliness and fair play would have secured for him at least immunity from an attack in which, unless aided by an almost impossible combination of circumstances, he could put up no adequate defense. All the dice were loaded against him. He came before the court with the stigma which the word "quack" always leaves upon a man. There was no likelihood of his finding medical or scientific assistance in the preparation of his defense. It seemed a foregone conclusion that the case would go against him, simply from weight of surgical evidence which he had no means of rebutting. I do not doubt in my own mind that these considerations were frankly set before the plaintiff and his friends in order to induce them to pursue this action and to encourage them in the belief that considerable financial benefits would accrue from it. The event scarcely justified their confident anticipations. Doubtless the plaintiff today regrets the step he took. So far from gaining financially he must have incurred considerable expense which he could not charge Mr. Barker with, and the damages he recovered would scarcely repay him for that most painful experience he endured in the witness-box. The whole affair was mean in the extreme.

Here I leave the matter, expressing my regret that a man of Mr.

Barker's character and work was made the object of professional prejudice so obvious and unwarranted.

For what are the facts? Here is a man who for many years has been practicing certain methods with startling success in a field which has been neglected by the whole surgical world. I speak as one of the senior surgeons of England. For years I shared the prejudice and bitterness which animates the average member of the Faculty. "Bone-setters" as a tribe were anathema, and Mr. Barker, as the outstanding exponent of the method of manipulative surgery, was the special object of my suspicion, as well as of those of the Faculty as a whole. Let me be perfectly frank. I had no special knowledge either of the man or the methods. But he was unqualified and presumed to practice the healing art, and—unpalatable truth—with considerable success. Perhaps he had his failures—though I never heard of one—but they did not bulk so large in the public eye as his astonishing success in CERTAIN SPECIFIED CASES. He succeeded where surgeons of repute and experience had utterly failed. That no one could deny. It was easy to ascribe his success to happy accident, but his success has been continuous and growing, and, so far as the methods could be established by experience as sound and scientific, their worth has been proven conclusively. The time has surely arrived when the profession should abandon their policy of silence and aloofness. Either the methods are what Mr. Barker claims for them or they are not. This cannot be determined by any other means than by investigation, by demonstration, by a searching examination of all the available evidence from whatever quarter it may be forthcoming. Frankly, my purpose is to ask, with all the weight of influence my reputation can command, for an investigation into the value of methods which in the hands of a technically unqualified man have AT LEAST shown themselves to be worthy of the attention and scientific study of those who are charged with the treatment of suffering humanity.

I plead for this with all the more earnestness because I am convinced that the attitude adopted by the medical world toward the method of manipulative surgery is only adding another regrettable page to those chapters in its history which it recalls with profound shame. Blinded by professional prejudice, the medical world has stolidly opposed nearly every innovation and discovery which has been submitted to it. In an article in the British Medical Journal of September 3, 1910, this finds complete recognition. "Not to go so far back as Harvey, who was denounced by the leaders of the profession in his day as a CIR-

CULATOR, or quack, we need only recall how the open-air treatment of consumption was ridiculed when the idea was first put forward by Bodington, and that years later a member of the Medical and Chirurgical Society asked that enlightened body should be 'protected' against such papers as one in which the late Sir William MacCormack's father had enunciated the same doctrine. When Villemin submitted to the Academie de Medicine experimental proof that phthisis is an infectious disease, his doctrine found no favour. Famous physicians refused to listen to Pasteur because he was not a medical man; Lister was scoffed at; the laryngoscope was sneered at as a 'physiological toy'; the early ovariologists in this country were threatened by colleagues into the coroner's court; electricity was looked upon with suspicion; massage within our own memory was regarded as an unclean thing. Even now the vast field of physiotherapy is largely left to laymen for exploitation." Is this long and damning list to be lengthened because the successors of the men who stoned the prophets and now whiten their sepulchres are too blind to perceive the value of methods which "hold within them large possibilities of usefulness for the relief of suffering"?

But I am told that whatever is worth knowing of manipulative methods is already known to the Faculty. I read with interest the article which appeared in the Times of February 24 by a medical correspondent on "Bone-setting: Its History and Dangers."

Briefly, what is the contention of the writer? It is that, owing to the private investigation and study of Hutton's methods by Dr. Wharton Hood, who published in two volumes the results amplified by his own practice of them, the knowledge of those methods "soon became well and widely known (through the books) in the profession. Up to that time there had been the so-called 'hinterland of surgery'; it was a hinterland of surgery no longer. It had been fully explored, and everything connected with it had been disclosed to all who would be at pains to learn."

Now this is a very sweeping claim. Even the writer is conscious that if the claim is subjected to a rigorous examination it would be difficult to justify it by the PRESENT STATE OF KNOWLEDGE of the methods among not simply the rank and file of the profession, but amongst those who are the recognized masters of surgery. For he proceeds to show why the methods have not been adopted and practiced by the Faculty as a whole. And the reason turns out to be that they have never learnt them because the teachers of Dr. Wharton Hood's day did not sufficiently accept them, and excluded them from the curricula of the schools. "If

Dr. Wharton Hood," says the writer, "had held an appointment in a London hospital and had done his work before students, it would long ago have been universally known and imitated by surgeons. But the actual teachers were not sufficiently prompt to acknowledge and welcome the WORK OF A MAN WHO WAS NOT A MEMBER OF THEIR OWN BODY (referring to Hutton), and the students had no opportunity of seeing its value." I maintain this is so far true that it completely disposes of any claim on the part of the Faculty to a knowledge of the methods of manipulative surgery, even as practiced fifty years ago by Hutton. And, if further proof of this view were needed, it is found in the important article on "Mechano-Therapy in Disease." by Dr. Alexander Bryce, in the same issue of the British Medical Journal. He refers to Dr. Wharton Hood's book on Hutton's methods, closing with this significant sentence: "But this book has been almost forgotten and his precepts neglected." I venture to affirm that there is an almost total ignorance of even Hutton's methods, and that of Mr. Barker's methods—and I speak with knowledge of their results—there is a profound ignorance on the part of the Faculty. I am forced to press this further. How could there be any knowledge of methods which have never been seriously studied by the teachers of the medical schools or investigated by any section of practitioners? Dr. Alexander Bryce stands almost alone, though I am thankful to find that there is a distinct movement in a more sane direction on the part of individual members of the Faculty. On the part of the vast mass of practitioners, however, there is nothing but uninformed prejudice against the methods and the men who employ them, and a stupid refusal to give the men who can instruct them the opportunity of doing so. I deeply regret having to say this, but honesty compels me to openly affirm it. To me it is inexplicable. If the scientific mind is open to any influence, it is surely open to evidence. The evidence proving the worth of manipulative surgery in CERTAIN WELL-DEFINED cases is, to my mind, overwhelming. If I have, after years of opposition to the methods, say, as practised by Mr. Barker, been convinced of their value, it has been by the mass of evidence which has been thrust upon me. The Osteopaths of America may make extravagant claims for their methods, as Dr. Alexander Bryce points out; but I am not thinking of the extravagances of men who are filled with enthusiasm for their art so much as of the sane, well-grounded belief in methods which have been discovered by patient investigation, by assiduous practice, and by unremitting study. It is by those means that Mr. Barker has won his way to the topmost position on this side of the Atlantic.

His present reputation has been won by actual achievements in the face of cruel and reasonless opposition by a series of successes, maintained through these years, in cases where the ablest surgeons, working on orthodox lines, have failed. On that score I have no doubt whatever. The evidence has convinced me. It has swept away the prejudice that for years made me an unrelenting critic, and such evidence accumulates daily, coming too from the highest quarters of society and intellect.

Day by day Mr. Barker adds to the number of those who owe a debt of gratitude to what he prefers to call "manual surgery." Occasionally one of those grateful patients becomes vocal and makes public acknowledgment of indebtedness to the methods of the man who employs them. Rarely has such an expression of gratitude been made as was recently made in the columns of the Times by Lady Exeter. It is so remarkable that I venture to reproduce it:

"To the Editor of the Times.

"Sir:—Having seen Mr. Heather Bigg's letter saying that the manipulative methods of Mr. Hutton and Mr. Barker are practiced by surgeons, I should like to state that, although I visited several doctors and surgeons at different times during seventeen or eighteen years, such treatment was never tried, or even spoken of. Allow me to give a short history of my own case.

"In 1893 or 1895, whilst running down a steep hill, I displaced the cartilage of my left knee, and was laid up for a fortnight at that time. After this the joint was a continual source of trouble to me. It would slip out whilst dancing, playing tennis, or even wiping my boots. I saw several surgeons about it, but they were unable to help me, beyond ordering me elastic knee-caps, etc, and finally a large 'cage,' which I wore for two years without benefit. My knee was then so weak that it went out on the smallest provocation.

"Over a year ago I consulted Mr. Barker, who at once diagnosed what was wrong with my knee, and after gas had been given the cartilage was put in place, and I left his house without any discomfort. After a few days' further treatment I was completely cured. I can now play tennis, dance, etc., without any support whatever, and in perfect comfort.

Yours truly M. EXETER.

"Burghey House, Stamford, Feb. 14, 1911."

Now, the writer of the article in the Times to which I have already referred goes out of his way to notice this very frank and convincing letter. Naturally it perturbed one who was engaged in special pleading! How does he reply to it? After indicating the trouble from which her ladyship suffered, he says: "The history is curious, and Lady Exeter must have been singularly unlucky in her early choice of advisers." On this singularly unlucky judgment I must be allowed to comment. The truth is that the most famous surgeons of the day were called in, and though "the accident," as the writer in the Times declares, may be "a very common one," and the treatment "as set forth in all the ordinary textbooks," be "in the first instance by manipulation, and in recurrent cases by operation," yet Lady Exeter remained unrelieved for eighteen years, and was only finally relieved by Mr. Barker. Yet in the face of the orthodox surgeons' failures the writer in the Times declares "there is certainly no hinterland here"! If it proves anything, it proves there is an absence of knowledge. If the methods of manipulation are known to the Faculty, why did they not in eighteen years effect the cure which Mr. Barker effected in two or three weeks?

Lord William Cecil's experience and ultimate cure at Mr. Barker's hands about the same date furnish an almost exactly similar example.

I leave that and go on to prove that even members of the Faculty itself when they come face to face with Mr. Barker's actual work are speedily convinced of its worth and importance. Mr. George Garrard, in a spirit of chivalry we cannot sufficiently admire, came forward on Mr. Barker's behalf at the recent trial, and gave evidence which, coming from one who was consulting surgeon of a hospital for consumptives, was decisive. Why did he risk all the odium which attaches to a man who takes sides against his own profession? Because he had been convinced by evidence he could not withstand that the manipulative methods as practiced by Mr. Barker were not only effective but were truly scientific and worthy of the attention of the Faculty. A short time ago he wrote a letter to the professional Press which is so striking that it deserves a place in this article. Mr. Garrard says:

"Some time ago I had a patient suffering from a painful and obscure affection of the ankle, which was causing her great pain and suffering, making walking almost impossible, and which for a long time refused to improve, though orthodox remedies were perseveringly tried. I advised her to see a famous London surgeon. She saw two at different times. She also went to Berlin and saw an eminent surgeon there. Their advice and treatment resulted in no improvement whatever.

"When she returned she told me she would like to see Mr. Barker, as he had cured a friend of hers. I agreed, and she did so. At the end of a few weeks she had made a complete recovery, relief being afforded almost immediately.

"My own son was at that time suffering from an ankle injury which also refused to yield to treatment by three surgeons at different times. It prevented him from indulging in any kind of sport at the University. Having already had experience of Mr. Barker's methods, I took my son to him and witnessed the treatment. The patient was put under gas, a few dexterous and determined manipulations of the joint were effected, and the patient was immediately all right. His words as he left the house were: 'I've never been able to walk so well before.' He has been quite well ever since, and now plays football and other games without feeling anything of the old trouble. I join with Dr. Bryce in pleading for the admission of this scientific mechano-therapy, or bone-setting, amongst recognized methods of treatment."

Now, I do not claim for Mr. Garrard that his knowledge of modern surgery is exhaustive, nor do I claim that when he says surgeons at home and abroad failed to be of service, that therefore no surgeon in England could have cured the patient by orthodox methods; but I am entitled to claim, and I do claim, that Mr. Garrard—even if he were an ordinary practitioner, which he certainly is not—does know the actual resources of his art, and how far and in what way the skill and knowledge of his colleagues can aid and relieve sufferers. If, as the medical correspondent of the Times confidently affirms, manipulative methods are well and widely known, how does he explain the failure of a capable and successful member of the Faculty to secure for a patient and FOR HIS OWN SON the aid which they needed; how does he explain the failure of the masters of orthodox surgery at home and abroad to deal with these cases, and how will he dispose of the fact to which a responsible member of the Faculty bears convincing testimony, that where these orthodox surgeons failed the unqualified man succeeds? Are there not many surgeons who—if they would—could bear similar testimony to Mr. Barker's skill?

I have dealt with the cases of Lady Exeter and the two submitted by Mr. Garrard, because they are instances of the value of Mr. Barker's method to which no adequate reply has been, or can be, attempted by the Faculty. But I am convinced from my own knowledge that these cases are only types of many which can be cited literally by the hundred from Mr. Barker's case-books, all presenting the same

features with wearying regularity. First, the family doctor or local general practitioner is consulted; then the patient goes to the nearest hospital or consults a specialist, according to his means; finally, after years, it may be, of suffering, expense, and inconvenience, the patient tardily and often fearfully betakes himself to Mr. Barker, and finds himself cured!

But evidence of a kind that will even more strongly appeal to the mind of the average medical man is not wanting. In every branch of science and art there are those who love truth beyond all dogmas of the schools; those who pursue truth at all costs and risks, who are insatiable in their desire for and search after truth. It is because their restless minds have faithfully followed the bent of their genius that the boundaries of human knowledge have ceaselessly been extended. So it has been in this matter of manipulative surgery. Fifty years ago Dr. Wharton Hood investigated Hutton's methods, saw what was essentially true in them, adopted them, advocated them, made them known to his generation, and was called a "quack" for his pains! But he added to medical knowledge, and if his work did not bear the fruit it might have borne it was because the folly and prejudice of men prevented it from doing so. Very recently Dr. Alexander Bryce has made further examinations into what he aptly terms "THE NEW FORM OF SCIENTIFIC BONE-SETTING," the results of which he gives in the papers already referred to in the British Medical Journal. Dr. Alexander Bryce's phrase at once separates modern osteopathy from the more undeveloped methods employed by Hutton, or, if it does not separate, at least plainly indicates that Hutton's methods are not the last word in the bone-setter's art. The Times correspondent does not even seem to be aware of it, but the truth is that the methods have been enormously developed by Hutton's successors in the fifty years which have elapsed since he ceased to practice. Mr. Atkinson made great headway, and—despite the opposition which surrounded him—two or three members of our own Royal Family were submitted to his care; whilst Mr. Barker's methods include operations of which Hutton had not the slightest idea. The chief value of Dr. Bryce's paper is that it directs the attention of the whole Faculty to manipulative methods, and emphasizes the vast possibilities they present of increasing the power of the medical man to relieve human suffering. I do not propose to deal with Dr. Bryce's paper, much as it calls for discussion, but I am concerned to point out that Dr. Bryce has stated the case for manipulative methods and shown their value in a manner that cannot be disregarded by the Faculty.

"My success," he says, "in the following cases is entirely due to the study I have made of the subject, and I am sure I would have failed to be of service to any of the patients without a knowledge of osteopathic methods." Whilst his criticism as to the value of manipulation is shown in the plea he makes for the recognition and adoption by the Faculty of modern osteopathic methods: "I do not hesitate to plead for the admission of this new form of scientific bone-setting among the recognized methods of treatment practised by the medical profession."

That plea I would support with all the strength and influence I can command. I can speak with greater fairness and impartial authority, because the more active portion of my career is over. I cannot look idly on when younger men are investigating a domain of surgery hitherto largely neglected without trying to the utmost of power to second their endeavours. I am deeply interested in Mr. Barker's work, and do not hesitate to avow my desire to see that work appreciated at its true value and his methods adopted by the Faculty. Dr. Bryce's investigations are to my mind valuable just because they add considerably to the knowledge of this "hinterland of surgery," and distinctly hasten the day when these methods will have their proper place in the healer's art. I would be sorry to think that this should be opposed by the Faculty, because the method has been, in the main, discovered, developed, and employed by laymen. It is necessary for me to remind my professional brethren that not a few of the most remarkable discoveries in modern medical science and surgical art have had the same origin? Lithotomy was introduced by a layman; the first Cæsarian section was performed by one who held no diploma; cinchona was introduced to Europe by priests, and ether was first employed as an anæsthetic by a non-professional man. Ideally, one willingly admits, the interests of science are best served by those of "the household of science." But a truly scientific man can surely hold THAT as a part of his scientific creed and yet admit the possibility of great and valuable service rendered by one of those who are without. At least, before the possibility is denied and before the service is rejected, surely the scientific instinct, no less than the instinct of fair play, would demand a thorough investigation of what was offered should be made. Why has not this calm, dispassionate investigation of methods whose utility cannot be denied been conceded by the medical world long ago? Mr. Barker has asked for it, offered to submit the methods to any tests that commend themselves to the Faculty. There are no reasons why this fair demand should not be admitted—save reasons

which the Faculty might hesitate from plainly and bluntly avowing to the public. Like the great innovators I have referred to, Mr. Barker has been subjected to obloquy and scorn by men who surely "knew not what they did," but in the future his name will be remembered in the history of progress, as it is remembered today with gratitude by thousands of relieved sufferers all over the world.

As one who has devoted his whole life to surgical work, and whose chief interest in comparative retirement is its progress and development, I must be permitted, in the face of silent but none the less uncompromising attitude taken up by the Faculty towards Mr. Barker, to place on record my profound regret and disappointment, and to express my equally profound conviction that the real and vital interests of the Faculty are as genuinely sacrificed to a false and unworthy professional pride as are the interests—surely the supreme interests from all points of view—of those sufferers whose relief and cure are the solemn charge and responsibility of our profession.

Ethical Publicity

BY A. L. EVANS, D. O., MIAMI, FLA.

Osteopathy is essentially an educational movement. Not only do we seek to implant new ideas concerning disease and its cure, but it purposes to supplant a system that comes to us hoary with age and strongly entrenched behind the bulwarks of law, custom and tradition. It is not enough, therefore, that the new practice is good in itself, but, like other reform movements, its virtues must be made known. If our wisest statesmen see in publicity the surest remedy for the giant ills attending the combination of capital so prevalent in modern times, surely we may believe in its efficiency in propagating a reform in the healing art.

When we speak of publicity we mean not merely that the virtues of osteopathy should be proclaimed, but that the necessity for a reformation should be made apparent. This involves the publication of the error, the weakness, and the inherent harmfulness of the system practiced by the dominant school of medicine. We can never convince a public that is more and more assuming the attitude of wanting to be "shown" that it should embrace something new, unless we can point out the wrong of the old. Publicity means the turning on of the light.

But when we speak of Ethical Publicity, it is implied that there may be an UNETHICAL VARIETY, as indeed there may. One way of manifesting this in osteopathic publicity is to adopt the muck-raking style of literature in treating of the fallacies of medicine. Attacks upon individuals, exaggerated denunciations, and unsupported statements should be scrupulously avoided. A wholesome regard for the truth should be sufficient reason for this, but in addition it may further be urged that it is unprofitable—this in accordance with the axiom that "vinegar never catches flies." Sufficient and convincing argument against current medical practices is furnished by the authorities in medicine, and in reprinting these we are open neither to the charge of being abusive nor undignified. Besides, according to the well-known rules of evidence, that "declarations against interest are considered the best evidence of a fact," we are giving the strongest testimony in support of our contentions that can be adduced.

When we consider the strong trend toward amalgamation among the various schools of medicine, the effort the dominant school is mak-

ing both in state and national legislation to grip more firmly the reins of power, its persistent decrying of osteopathy, and the further fact that even our friends have only a hazy idea of the scope of our school of practice, it would seem that no argument would be necessary to convince those in our own ranks of the great need of further publicity.

I wonder if most of us have not had some such a telephone message as this: "Mr. Blank will not have his treatment today; he is not feeling very well," or "Mrs. Jones is not doing very well, and we have called in Doctor Pills; when she gets better she will resume treatment." Now, while there is an element of humor in this, it hardly compensates for the humiliation it entails. Of course, we know that if a man is not feeling well he needs osteopathic treatment, and if a woman is not doing well she needs more treatment; we know that osteopathy is for sick folks. But we must make other folks know it. The answer is not that we must do better work at the treatment table, though that is true, also. Good work helps our practice because one cured of an ailment will tell others that osteopathy is good for that particular ailment—and go elsewhere for treatment for an ailment more easily managed.

We must carry to the people the truth that osteopathy is a school of healing, and that its scope is about as wide as the range of disease.

It should be further borne in mind that osteopathy is not yet so well entrenched in the statute books that we can afford to neglect the cultivation of an enlightened public sentiment in relation to it. So long as it can be generally known that we are seeking only fair play; that our cause is just, we can rely upon the people and their chosen representatives to see that no injustice is done us.

It is not, however, so much the purpose of this paper to argue the necessity for publicity as to discuss ethical methods of promoting that end.

There have been some attempts in our profession to introduce the lecture means of publicity. This cannot be said to be in any way unethical, and those in our ranks who have talent in that direction should never fail to respond to any invitation to address clubs and societies that may invite them. But it has been my observation and information that when public addresses have been given, or open sessions of our conventions have been held, that no policemen were necessary to prevent a stampede for advantageous positions in the lecture hall. Osteopathy, we consider, is a most important subject, yet we must admit it is not especially thrilling. While our best friends will come to the lectures and listen with patience and interest, yet these are not ex-

actly the people we are trying to reach. It is my conclusion that the lecture method will prove about as efficacious in osteopathy as have our fashionable churches in religion in solving the problem of how to reach the masses.

Personally, I know of no better way than through printing. The press is the most potent agency, the mightiest instrumentality for the promotion of reform in the world today—except possibly public sentiment, and public sentiment is dependent for its enlightenment and crystallization upon the press.

If we can agree thus far, we have but to consider the best, most effective and most ethical methods of utilizing printer's ink. Of course, it goes without saying that nothing in the way of handbills should ever be used, and equally, of course, all professional cards, letter-heads, etc. should be neatly printed on good paper without any effort to exalt the merits or credentials of one practitioner above another.

It is a matter of common knowledge and universal agreement in the profession that the articles on osteopathy that have appeared in the literary magazines, such as the *Cosmopolitan*, *Metropolitan*, *Independent*, *Ladies' Home Journal*, *The Fra*, the *Delineator* and others, were not only eminently ethical, but that they did more to bring our science into general prominence than any other agency employed or any publication that had previously been made concerning it. That avenue, however, is now practically closed to us. The articles were printed because they treated of a live subject and conveyed information that the editors considered of interest. But, when they have once printed a story the magazines do not repeat it. In this instance they are chary of giving any advertising. It may occasionally yet happen that osteopathy will get into the preiodicals, but not with sufficient regularity that we can afford to rest our propaganda on the chance of it.

There is a vehicle that stands ever ready, for a compensation, to deliver our message—I refer to the newspaper press. The publishers and editors of most of these are now willing, without compensation, to print any legitimate news item pertaining to our science. Many of them are generous enough to give even more space than the news value of the items merit. This is a proper means, and we should be enterprising enough to avail ourselves of this method of publicity upon every suitable occasion.

I believe, too, that there are times when, and localities where, our practitioners could profitably unite, providing the exploiting of individual physicians is omitted, in bearing the expense of the publication

in the newspapers of a certain class of carefully written articles on osteopathy. Our educational campaign cannot safely be left, however, to this kind of publicity, for two reasons. The very fact that it appears in a newspaper and is not news carries with it the implication that it is an advertisement, and all advertisements are more or less discounted, if they are read at all. The second objection is like unto the first, and refers to the casual manner in which newspapers are read. We all know how a paper is seized, the big headlines glanced at, possibly some of the meat of some news item in which the individual is specially concerned is scanned, then it is turned to the stock market, the editorials or the baseball news according to the bent of the particular reader, after which the paper goes into the waste basket, garbage can or kindling heap. The newspaper is an ephemeral type of literature.

There remains to consider what I deem the most effective ethical means—and no means that is not ethical can be ultimately effective—of reaching the public, I refer to the popular osteopathic periodical. If the articles in the literary magazines have created an appetite for osteopathic literature, the osteopathic magazine supplies the means of satisfying it. It may be sent into the homes of the class of people we wish to reach, and its literary appearance will tend to rescue it from immediate incineration. If it keeps going it will be read; if it is read it will interest and instruct. All who read may not become patients, but they will imbibe a respect for the science, and the opinions that people entertain about it become a part of that public sentiment upon which we must rely in time of stress.

While these publications are not perfect, they appear regularly, the articles are usually well written, the subject is presented from many angles, and osteopathy is presented in its true perspective as an independent science and art, while the narrower conception so commonly held, is constantly combated.

At one time it was proposed to proscribe the professional card that is usually printed on the cover of these magazines, but that proposition has not made much headway, because it is realized that such a rule, if enforced, would cut the nerve of publicity. There are few so altruistic as to put their money into an educational campaign unless they have a fair prospect of getting it back. But to me the work of publicity seems so important that I feel that no member of the profession, no matter if he has all the practice he can attend to, is doing his full duty if he does not in some ethical way contribute to spread the knowledge of osteopathy among the people.

There are some in our profession that have gotten their idea of ethics from the medical profession, and in many respects their ideas are good. Especially is this true so far as they condemn that publicity some charlatans seek who boast of their education, ability and cures. But it should be borne in mind that there is this fundamental difference between allopathy and osteopathy: the former has much to conceal; its policy is to mystify and bewilder the public, while the latter has from the beginning taken the people into its confidence. Having a rational basis for its therapy, it has nothing to lose, but everything to gain by a frank and full discussion of its principles, and in pointing the way to health. It may be well to remember, too, that the medical profession is not altogether idle when it comes to publicity. We know it has a man in the field lecturing ostensibly on hygiene, but really in the interest of the measures wanted by organized medicine. The papers and periodicals, too, have much to say about the wonders of modern medicine, and especially, of surgery.

Message to the Gulf States Osteopathic Society

DR. CHAS. E. LORENZ, PRESIDENT.

In my address to the Gulf States Osteopathic Society there are some things I wish to say that may perhaps be of some benefit to at least some of you. Most of what I expect to say is based upon my past twelve years' experience in the practice of my chosen profession.

To begin with, I would like to say that no doubt what little success I have attained I attribute to my firmness of conviction, and in my past experience I am sorry to say that there seems to be a disposition upon the part of some of our profession to weaken or at least a lack of firmness. Why this should be I cannot say, more especially so when the medical world teaches us so plainly the inefficiency of the use of poisonous remedies as a means of therapeutics. When such men as Dr.

Wm. Osler get up before a large body of his school in Philadelphia and deliberately make the assertion that there are but four remedies that are of any therapeutic value, also declining to name them, I think it is about time for us to sit up and take notice.

It was no other than Dr. Oliver Wendell Holmes who in retiring from the practice and professorship of Harvard Medical School because he could not consistently and conscientiously give drugs as a means of relief that is responsible for the saying "It would be better for the sake of suffering humanity if all the physic were cast in the ocean, but it would be hard on the fish."

Another eminent physician in retiring from practice says, "That if there were no drug doctors or drug stores there would be fewer deaths." After thinking of the number of people that are made to suffer on account of wrong treatment, perhaps the assertion is not far from wrong after all. After several physicians in Atlanta had given up to die a prominent lady, saying they did not know what the trouble was, Dr. Wm. Osler of Johns Hopkins, was sent for, and just to think of the simplicity of treatment after no doubt being made to suffer at the hands of those other physicians. She was advised by Dr. Osler that what was killing her was what was in her stomach. With that he proceeded to get a stomach-pump and wash out her stomach, and with this simple treatment she was made well.

A retiring physician of twenty-five years in practice, and his wife retiring after practice of ten years of East Aurora, N. Y., had this to say, "People did not need drugs, they needed mental adjustment and that it was the constant demand placed upon drugs that caused physicians to resort to them so much," thereby acknowledging the wholesale dispensing of drugs.

Do you know that just recently in a hospital in the north, in which there were doctors from the Allopathic, Homeopathic and Eclectic schools, that the Allopathic physicians got together and acknowledged that the Allopathic practice had been killing patients suffering with pneumonia for years. Now how they came to this conclusion was this: In this hospital there were more Allopathic physicians than Homeopathic or Eclectic, and the Allopathic physicians found that while the others were not using stimulants in the treatment of pneumonia, that they were, so they decided that pneumonia was not a disease to be treated by stimulants. Yet this same thing goes on from the fact that a great many general practitioners have not been informed.

It was not left for Osteopathy to come along for therapeutics to

make a change, for the trend of medicine had already been away from drugs. The only thing especially new along the line of drug therapeutics is serum-therapy, and I don't think that is far from exploding, for such writers as White, Sajous and others will in my opinion finally show. Sajous in his work of two volumes on Internal Secretions and Principles of Medicine, plays right into our hands when he goes to prove that in such glands as the adrenal, thymus, thyroid, pituitary body, as well as perhaps other glands, furnish the antitoxins for the body. He does not offer any solution in case they do not perform their function, but whom is it other than the Osteopath that opens up the avenues of tissue builders by making every arrangement through perfecting as near as possible the tissues of the body, so that the fresh arterial blood and nerve vigor may reach their destination and put these glands in a condition so they can again send out their vital forces that destroy the toxins. After all, isn't this the right way?

There is one thing that I would like very much to relate in regard to therapeutics, and that is that our method of therapeutics is all wrong. The Japanese no doubt have the only right method today, and that is that they pay their physician as long as he keeps them well, but he gets no pay for treating them while they are ill. The Japanese physicians are paid by the year, which is done in other countries to some extent. In this way it makes it practically health insurance. Now by our method of therapeutics we pay the physician for treating us for illness. By the Japanese system the inducement to the physician is to keep his patient in good health, for he gets his pay for doing this. By our method the inducement is to get a sick patient and get them sick unto death if possible, and still more one needing an operation, because there would be more money realized. Now when we accept the Japanese method Osteopathy will be accepted more, for it will necessitate frequent physical examinations of people by the Osteopath, and instead of our system being one of the wholesale dispensing of drugs, and of mutilation of the body, it will be one which will make us medical supervisors, medical advisors, health officers, sanitary supervisors, and the like.

Now as to fees under this method, I would say that Dr. Wood Hutchinson has hinted at the right solution. He says "there are 14,000 physicians and that they care for about 600 people at an average income of \$1200.00 per annum," also "by charging \$6.00 for each of the 600 cared for, he would have \$3600.00, or three times as much as the average physician now has."

Now I would say that we could regulate it by charging one to ten

dollars per individual, or according to circumstances or amount of service rendered. By so doing people would get more real value out of our service, there would be fewer operations, fewer deaths, and a decidedly healthier race.

It might be well for me to mention a few things that may have something to do with our weakening. It may be because we do not have courage enough to tell people not informed of our profession that I am an Osteopath! as though the monster were too curious for them. It may be on account of thinking that the M. D. has more prestige. It may be on account of so many coming to us and informing us that Osteopathy can't cure certain diseases, and it may be on account of lack of confidence but whatever it is, let us see for a minute if we can't remedy it.

Now in the case of having the courage to tell people, I am an Osteopath, it does seem to me that this is a good time to promulgate Osteopathy a little by telling them what an Osteopath is and more about Osteopathy, which would make us more appreciated and help the cause.

In regard to the M. D. having more prestige, we may improve our prestige by conduct and effort. If on account of people telling us we cannot cure certain diseases, I think a little firmness will do here. If a lack of confidence, a little more Osteopathy is necessary.

Now some about the M. D. degree. After taking the course that is taught in our schools, what is there in the M. D. degree that we should desire? If *Materia Medica*, why not get you a treatise on *Materia Medica*, especially so if for the sake of informing yourselves of the physiological action of drugs, etc. It convinces me that the M. D. degree is not a necessity when so many of our eminent physicians continually inform us by mouth and by medical treatise that other methods are much more preferable. I could not term a physician good or great that has to use poisons or the mutilation of the body to cure the sick, but the man that can accomplish the relief and cure of the ailing by the simpler means is the man to be desired and the great physician.

Now I also want to inform you as to what I think our course and practice embraces. I consider other than Osteopathic procedure that the following subjects are common to all schools of the healing art, no matter whether they be Allopathic, Homeopathic, Eclectic or Osteopathic: Toxicology, Surgery, Orthopædic Surgery, Massage, Mechano-Therapeutics, Hydro-Therapeutics, Mental Therapeutics of all kinds that we may see fit to resort to, Hygiene, Public Health, Physical Culture, Exercise, Gymnastics, etc., and as to internal medication, I have never seen any great need for, so why should we weaken?

Now in regard to the future of Osteopathy, I will say that instead of thinking of the M. D. degree and the study of *Materia Medica*, etc., we should spend the time studying Osteopathy, I believe we would almost perfect our science to the extent of controlling the functions of organs and parts of the body, as we now press the button to ring a bell, turn a switch to light the incandescent and wind the clock to put it in motion. This to me, as no doubt to you, seems wonderful as well as strange in our being able to accomplish this.

Now what I have related is true, for I as well as you have experienced some of it in our work. I might mention a few things along this line. I had one case of palpitation of the heart that I could relieve sometimes in a quarter of a minute. It took strychnine two to ninety-six hours, so I was informed by the patient. Another I relieved in six to twenty minutes. It took morphine three to six hours. I have accomplished other results almost as miraculous, and just think of how wonderful our science will be when we all get together and make a strong effort to perfect it.

"In union there is strength." In organization and organized effort we may accomplish everything, so now we have in our Gulf States, Osteopathic Society, the beginning of a large and growing association. At the first meeting held in Montgomery, I suggested the name, Southern Osteopathic Association, as I thought at that time we might want to grow, but we did not see fit to do so at that meeting. At our last meeting it was suggested again and was decided we would formulate such an association at the meeting we now have, so I want to see this take place, also to include as many other States as we may determine. We, in the South, must help ourselves if we get help. We need Osteopathic schools in the South to make our profession stronger and have more prestige in the South. We need Osteopathic hospitals. We need Osteopathic surgeons, specialists and nurses in the South. We must grow in our beloved Southland. Let us get busy and make ourselves proud.

(Read before the Gulf States Osteopathic Society held at New Orleans, Louisiana.)

Random Impressions of the Chicago Meeting

DR. MORRIS LYCHENHEIM.

If there was one thing more than another that stood out at the Chicago Meeting, it was the spirit of comradeship and good fellowship. The leaders in the work of bringing about unity accomplished their object. I did not hear anything but words of praise for the leaders who accomplished their work for harmony.

The effort to make the D. O. degree equal to the M. D. degree by making the course four years instead of three, as recommended by the Educational Committee, will likely be successful. As Pennsylvania, for instance, now allows D. O.'s to practice in hospitals receiving State appropriations, it is likely that D. O. internes will be admitted in Isolation Hospitals where contagious diseases, such as smallpox, diphtheria, etc., are treated. When our practitioners have had practical experience in the treatment of every disease that man is heir to, we will have a true therapeutic system developed.

As I saw Hulett the Treasurer, and the heads of the various committees with energetic assistants losing through their work, the opportunity of hearing the fine papers and clinics presented, I felt that the spirit of the "Old Doctor" was present. Service, after all, makes for the millennium. In these days of monopoly, when many men try their utmost to absorb and give as little as possible and get as much as possible, the spirit of service shines out all the more.

The advantage of giving papers and clinics before the entire body was obvious. At the close of the convention one felt as if they did not miss anything, as must be the case when section meetings are held. The clinics given were certainly instructive. In speaking with a member I remarked that a demonstrator usually prefaced his remarks by saying, "Of course, I do not expect to teach you by my method of manipulation, as it may not be anything new, etc., etc." Now this was the essence of various introductory remarks. My D. O. friend thought it proper to make such remarks because some experienced practitioners may feel they have nothing to learn from procedures with which they may be familiar, and the meedesty of the demonstrator would therefore forestall criticism. Personally, I think we can dispense with these

remarks, for no one could fail to be benefited by seeing the work and hearing explanations of technique.

The papers and demonstrations were of a high order. Nearly every speaker carefully prepared him or herself with notes. This proves the thoroughness of preparation and appears necessary when time is limited. Rambling remarks are thus avoided. I venture to say no more instructive program has ever been given. What added to the enjoyment was the splendid weather enjoyed. The writer must tell of the joke he unwittingly played upon himself at the Denver meeting. Asking at that meeting for the next convention for Chicago, he gave the maximum, minimum and mean or average temperature for the current week. Opposing speakers emphasized the statement made and placed particular stress on the MEAN, saying it was particularly mean. I called on all visitors to our city last week to disprove the libel. "All's well that ends well."

When one attends court proceedings one hears a person with the voice of an auctioneer announcing the various cases to be considered. When one considers the labor of preparing material for an Osteopathic Convention one regrets that few have sufficient voice to fill the hall and consequently much of what is said is lost. Would it not be a good idea to select some one to read the papers, who can enunciate clearly and strongly when the writer cannot do so? It would be well to discuss this point.

The value of a good presiding officer was seen in the smooth procedure managed by Dr. Hildreth. The work outlined was accomplished on time and there was not a hitch or jar throughout. When a person considers that officers are nearly all changed annually, it speaks well for our presiding officers to be able to do so well with so little experience, except as obtained in other organizations.

In a plea for support of our publications by book publishers, Dr. Chiles, our Secretary, said, "It was but stating a fact that Osteopaths bought more medical books (perhaps excluding works on practice) than any other body of practitioners. If some of our learned Osteopaths would get together and cull the best on all subjects requisite to study for Osteopaths, at the cost of a few thousand dollars Osteopaths would have a literature on all subjects that would save a great deal of unnecessary work. The sifting process has been carried on to some extent, but not as largely as it ought to be. I look for a 'Reference Handbook of Osteopathic Science' from the pen of Osteopaths."

The banquet was a magnificent affair. The wit of the speakers

was contagious. It was better than a theatrical performance. Those who departed before the occasion must not let it happen again. The Soloists, quartette orchestra and banqueters singing from printed verses of old and popular songs made an affair long to be remembered. The banquet hall was crowded. Very few more could have been accommodated in the main room. But I suppose like on a crowded car, there is always room for one more.

The guests assembled on the balcony overlooking the main floor and made their descent down a handsome staircase in the main portion of the hotel and then turning to the left to enter the large banquet hall. It was a beautiful sight to see the handsomely dressed women and men. Quite a crowd of other guests saw the procedure and it did honor to our profession to secure so large a number of guests.

The Convention was an inspiration. No Osteopath can afford to stay away from these gatherings. May our convention next year at Detroit have every member of the profession present.

Program of the A. O. A. Meeting

Monday, July 24.

Meetings of State Organizations. Evening—Reception.

Tuesday, July 25.

9:30—Invocation, Rev. Harry C. Harmon, Pastor of Woodlawn Park Church. Address of Welcome, Mr. Maclay Hoyne, First Assistant Corporation Counsel. President's Address, Arthur G. Hildreth. 10:30—The Significance and Importance of the Osteopathic Lesion (25 minutes), James L. Holloway. 11:00—Skiagraphs of Osteopathic Lesions (Stereopticon) (30 minutes), Sidney A. Ellis. 11:30—Photographical Osteopathic Lesions (Stereopticon and Special Skeleton) (30 minutes), Charles E. Fleck. Clinics, Frank C. Farmer, Chairman. Clinics (Demonstrations on actual cases emphasizing (a) diagnosis and therapy, (b) sane and safe treatment. 2:30—Technique of Cervical Region, Charles E. Still. 3:00—Technique of Dorsal Region, C. W. Johnson. 3:30—Technique of Curvatures, J. W. Hofsess. 4:00—

Technique of Pelvis (Innominata, Sacrum and Coccyx), Ella D. Still. 4:30—Osteopathic Treatment of Organic Kidney Lesions, Frank H. Smith. Evening—Reunions, etc.

Wednesday, July 26.

9:00—Osteopathy in the Field of Preventive Medicine (25 minutes), D. W. Granberry. Section—Gynecology and Obstetrics, Olive Clark, Chairman. 9:30—Diagnosis of Pathological Pregnancy (25 minutes), Lillian M. Whiting. 10:00—Dysmenorrhœa (25 minutes), Louise P. Crow. 10:30—Bony Lesions versus Pelvic Lesions (25 minutes), Barbara MacKinnon. 11:00—Some Common Structural Abnormalities of the Uterus (15 minutes), C. A. Whiting. 11:45—Report of Committees on Education and Publication. 2:30—Demonstration of Osteopathic Lesions on Articulated Spinal Column (20 minutes), H. H. Fryette. 3:00—The Hypothetical Lesion (15 minutes), Henry S. Bunting. 3:30—Fallacies of Internal Medication, George A. Still. 4:00—Etiology and Pathology of Certain Affections of the Spinal Articulations (25 minutes), Ralph K. Smith. 4:30—Osteopathic Treatment in Disorders of Children (20 minutes), Roberta Wimer Ford. Evening—Report of A. T. Still Research Institute (Research results of the past year), E. R. Booth, Chairman.

Thursday, July 27.

9:00—Pathology and Treatment of Pulmonary Tuberculosis (25 minutes), W. B. Meacham. 9:30—Report of A. T. Still Research Institute. 11:00—Business—Election. CLINICS (Demonstrations on actual cases emphasizing (a) diagnosis and therapy, (b) sane and safe treatment). 2:00—Technique of Hip-joint (Tubercular and Dislocations), George M. Laughlin. 2:30—Technique of Pelvis (Innominata, Sacrum and Coccyx), Clara Wernike. 3:00—Technique of Ribs and Flat Foot, Homer E. Bailey. 3:30—Technique of Curvatures, and General Treatment, Herbert E. Bernard. 4:00—Osteopathic Hygiene (25 minutes), L. Ludlow Haight. 4:30—Treatment of Typhoid Fever (20 minutes), Arthur M. Flack. Evening—Report of Committee on Legislation and Medical Council, Asa Willard, Chairman. (Public Meeting of Legislative Conference, Thursday Evening, July 27.)

Friday, July 28.

Section—Eye; Chas. C. Reid, Chairman. 9:00—Clinics—Optic Neuritis, Chas. J. Muttart. 9:30—Glaucoma, Percy H. Woodall. 10:00—Obstetrics (resume of experience) (25 minutes), M. E. Clark.

10:30—Business. 2:00—Open. 2:30—Neuritis (20 minutes), Mrs. Furman J. Smith. 3:00—Treatment of Pneumonia (20 minutes), J. A. Overton. CLINICS (Actual Demonstrations). 3:30—Technique of the Cervical Region, Harry W. Forbes. 4:00—Technique of the Lumbar Region and Abdomen, Joseph H. Sullivan. 4:30—Presentation of Cured Cases, F. A. Turfler. Evening—Dinner—Alfred Wheelock Young, Chairman.

*Public Meeting of Legislative Conference, Thursday Evening, July 27th.—Report of Legislative Committee, and Address on Legislation, Asa Willard. Discussion, led by A. G. Hildreth, Harry M. Vastine, Orr Sanders. Consideration of Vital Statistics Bill; How These Otherwise Meritorious Measures Are Frequently Manipulated by Medical Trust Doctors to Humiliate Osteopathy, E. M. Browne. Consideration of School Physicians' Bills, Frequently Drawn to Eliminate all but "Regulars" from Being Examiners; Other Objections, C. L. Kingsbury. New Jersey's Legislative Experience; Results Gained, C. E. Fleck. Gleanings from New Jersey 1911 Campaign, D. W. Granberry. The Iowa Campaign; Whys and Prospects, U. M. Hibbets. What Colorado D. O.'s have Continuously Stood for; Results, C. C. Reid. Lessons and Incidents from Colorado's Last Legislative Fight, D. L. Clark. The Kansas Situation; Where We Stand, C. E. Hulett.

Friday Night: Speakers at Annual Dinner.

Toastmaster, A. G. Hildreth. "The Healing Touch," Clarence V. Kerr. "A Subluxated Bank Account and Its Relation to Public Health," E. C. Pickler. "The Ideal Osteopath," George W. Riley. "Our Old Doctor," Edythe Ashmore. "Brudder Bones: A New Version," Asa Willard.

The next annual meeting will be held in Detroit. The following officers were elected: President, Dr. James L. Hallway, Dallas, Texas; Vice-President, Dr. Edythe Ashmore, Los Angeles; Secretary, Dr. H. L. Chiles, New York; and Treasurer, Dr. M. F. Hulett, Columbus, Ohio.

The Forum

Ellensburg, Washington, Aug. 2, 1911.

THE JOURNAL OF OSTEOPATHY, Kirksville, Mo.

Gentlemen:—In the July issue of the JOURNAL, among the "Personals", I notice you make mention of "The Human Rattlebox". This ordinary acrobatic clown is a fraud; and he is, wherever he dare do it, holding himself out to be a specialist in bone manipulation; and he practices osteopathy so far as he is able under the protection of medical doctors. He ought to be made known to the osteopathic profession so they may not be duped into innocently patronizing this illiterate, loose-jointed fool.

In December, 1909, this Ellis Whitman dropped off the train in Ellensburg for the sole purpose, as he told me, of doing his little acrobatic stunt before the medical doctors and picking up a few dollars among them. This plan failed to be of profit, but I will tell you at length what I know of his operations here.

T. S. Wasson, M. D., is an irregular, unscrupulous and unethical practitioner of this town, as you will see from his relations with Whitman. He is a cripple, having received injuries some years ago about the hips, from which he has never recovered. He was at one time a patient in the "Ward Infirmary", Kirksville, Mo., where he received great benefit. The girl who afterwards became his wife was a patient in the Infirmary at the same time, and was cured of a disease pronounced incurable by the medical doctors. You see, Dr. Wasson must know something about the practical side of osteopathy from experience. I understand he afterwards traveled with a Mechano-therapist and practiced with him in Denver and other cities of the West, finally locating in Ellensburg for the practice of medicine.

Dr. Wasson met Whitman on Friday evening, and concocted a scheme for deceiving and defrauding the innocent people of this community. The next afternoon he had an article printed under glaring headlines, on the front page of our local daily paper, in which he claimed that Ellis Whitman, "The Human Rattlebox," had adjusted one of his hips after the most eminent specialists and orthopedic surgeons of the United States had failed; that Whitman's work was "both scientific and methodical"; and that next day, Sunday, he expected Whitman to adjust his other hip.

This naturally caused lots of talk and speculation. Then on Monday Dr. Wasson was parading the streets without his cane telling every person he met that Ellis Whitman had adjusted both hips and that in a few weeks he would, without doubt, be entirely cured of his deformity. Nobody could dispute these statements, for nobody knew the nature of the Doctor's injury, and he did brace up and look straighter without his cane. Monday afternoon the local paper printed a more sensational article under more glaring headlines (all this advertisement cost Dr. Wasson nothing, of course), saying that Dr. Wasson was entirely cured, and that he had claimed that Whitman's work had "eclipsed" all former knowledge of the subject.

The unsuspecting public began flocking to Wasson's office and for some six weeks Whitman worked the streets and the town during the day and practiced in Dr. Wasson's office at night under the Doctor's protection. Wasson examined the patients and collected the fees, mostly in advance, of course, and they divided the profits. During the six weeks Whitman deposited some \$600.00, his part of the graft money. Wasson is a prominent member of the Christian Church, and, in order to work the congregation more profitably, he had Whitman join the church; and the pastor introduced him as "Dr. Whitman, whose name is on every lip." This little piece of strategy was a temporary success, financially.

When business began to be a little quiet in Ellensburg, Whitman went to Cle Elum, Washington, twice a week, and continued his graft under the protection of one of the Cle Elum doctors. Finally, becoming infatuated with one of our Ellensburg girls and his attentions not being graciously received, he attempted suicide in one of our hotels while under the influence of some drug, presumably cocaine. Dr. Wasson was called and as soon as Whitman was able to travel he dropped out of sight, and the next I heard of him was in a letter from Dr. Franklin Fiske of New York City. I wrote Dr. Fiske fully concerning his operations here, and I enclose the Doctor's letter herewith. (It is needless to say that neither Dr. Wasson nor any of Whitman's other patients were benefited, so far as I know).

Attempt was made to arrest Whitman while he was operating here, but he was so completely under Dr. Wasson's protection we could not get at him.

Dr. F. J. Feidler, D. O., of Seattle, told me that he knew Ellis Whitman, "The Human Rattlebox", in Seattle some four years ago; that he had loaned Whitman 25 cents at four different times with which

to buy meals; that a few months after this he had received a letter from Whitman in the State Penitentiary at Walla Walla, Washington, asking for the loan of a dollar, saying that he was serving a term for forgery, and was "busted".

The only reason I did not make this matter known to the public at the time was because I did not see how I could do it without appearing in the light of knocking an unfortunate competitor of mine, Dr. Wasson.

You are at liberty to use any part of this letter you may see fit in exposing this illiterate, loose-jointed pretender. I do not consider him very dangerous while working alone, he hasn't sense enough, but I believe he can be used by the medical doctors as a means of defrauding the unsuspecting public.

You have no doubt noticed what the Northern Ohio Osteopathic Society says about Whitman in the July Journal of the A. O. A. I heartily endorse Dr. L. C. Sorrensen's statement. Very respectfully,
—L. H. WALKER.

Correspondence with an Insurance Fraternity

In response to the request of Dr. Preston for a list of insurance companies recognizing osteopaths as competent examiners, a list such as has been published by this Journal and the Osteopathic Physician was sent to him, and the following letter is a reply to Dr. Preston concerning this list, which was submitted to the undersigned physician:
Dr. Walter A. Preston, 611 Consolidated Realty Bldg., City.

Dear Doctor:—Your communication of July 4th, received, and in accordance with your request I am returning the list which you enclosed.

I would suggest that if you have an opportunity that you write to these companies, and I think you will find that the list is quite erroneous.

Yours very truly,
C. W. PIERCE,
Supreme Medical Director, The Fraternal Brotherhood.

JOURNAL OF OSTEOPATHY, Kirksville, Mo.:

Your letter of June 26th received, giving me the names of some twenty insurance companies accepting osteopaths as their examiners. At the request of Dr. C. W. Pierce, Supreme Medical Director of the Fraternal Brotherhood of Los Angeles, I mailed your letter to him. His reply is as above.

The fact of the matter is, in this city especially, there is quite a strong dislike for the osteopaths. The medical society has a ruling that no member shall perform any surgery for osteopaths who wish it, and I know of one case at least, where a member was given to understand in writing, that if he did not quit he could resign. He was man enough to resign, at least they are not ruling him for the present.

I also have a circular letter mailed me saying I was eligible to city, county and state medical society which then would allow me to join the A. M. A., providing I was NON-SECTARIAN. While I am, in a sense, yet at this writing I am not kneeling to them. The California law is such I can do as I see fit and I do not have to call in any A. M. A. doctor to assist me in operating.

Concerning the insurance matter, in June I was asked to be the examiner for the Fraternal Brotherhood order in and for Bell and Audrey acreages near my residence. As the pay is but \$1.00 each (taking you twice as long as it would to treat a patient, besides having to take out a policy, pay lodge dues. etc.), I told party if patients were bunched I would examine for them, figuring I could obtain some advantages which would assist me in building up my practice. In due time I received notice that they would have to withhold commissioning me, as I was an osteopath. As I am licensed by the California Medical Board, and according to the laws, I am a physician in every sense of the word, I naturally felt indignant, knowing they had osteopaths in other parts of the state, and this action seemed to me nothing short of an insult. This is why I write you that you may publish, if you see fit. One more slap in the face and osteopaths should be warned to take insurance in companies who are broad minded enough to be fair to us, even if we are "osteopaths." Fraternaly,—WALTER A. PRESTON, D. O.

Legal and Legislative

Medics Decline Challenge.—Denouncing in no mild terms the challenge of the osteopaths for a competitive treatment of germ diseases as of purely mythical origin and framed solely for advertising purposes, members of the medical profession of Chicago refused to treat the subject seriously. The osteopaths contend they are barred from the navy and the hospitals. Also, they wish to prove, under impartial auspices, that they are able to cope with the medics in the treatment of typhoid and pneumonia.

"Certainly the osteopaths are not allowed to practice in the hospitals," said Dr. Arthur E. Edwards, dean of the Northwestern University Medical School. "You can't allow the hospitals to be invaded by men without education or training, or without knowledge of disease. Medicine and disease are not the speciality of the osteopath."

Dr. H. R. Chislett, president of Hahnemann Medical College, declared he thought the osteopaths conscientious, but out of their sphere. "I do not think they are foolish enough to be serious in their challenge," he said.

At the session of the osteopaths in the Hotel La Salle the challenge to a contest of skill on 800 patients was renewed. Dr. Joseph H. Sullivan admitted that no response had been received. The challenged are the American Medical Association, the American Institute of Homeopathy and the American Association of Eclectic Medicine.

Urges More Aggressive Campaign for Osteopathy.—"May God forbid that any more of our state legislative committees listen to the siren songs of equality sung by our medical brethren. Let us make our stand and fight for legislative battles entirely independent," said Dr. Arthur G. Hildreth of St. Louis, president of the American Osteopathic Association, in his opening address before the fifteenth annual convention of that body.

He said further: "We have now reached the time and place to assert ourselves as osteopathic physicians and prove our ability to take our place side by side with other physicians."

In drawing a comparison between osteopathy and the practice of medicine by the use of drugs, Dr. Hildreth said: "Ours is a natural field and limitless; theirs is an artificial and a created one; ours seeks to add to and never take from, and theirs seeks to destroy or prevent."

A major portion of the address was taken up with the history of the association and the different fights made in the various states for legal recognition. In outlining the policy of the association for the ensuing year, Dr. Hildreth said: "If a national secretary of public health is established the osteopathic profession demands that a man be selected to fill the position who is non-sectarian and that he be guided by a council of physicians, one to be chosen from each of the different schools of therapeutics, with no one dominating."

It was further advised that a publicity bureau be appointed to work in conjunction with the publicity committee and endeavor to enlighten the public as to the methods and results of osteopathy.

Passes on Rights of Osteopaths.—"What rights have osteopaths in the prac-

"the therapy of heat is as old as the art of healing. Its mode of application has improved with the progress of medical science.

Any form of treatment which survives for so many centuries must perforce be rational and valuable.

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tice of medicine in West Virginia?" This question was propounded to the attorney-general by a member of the state board of health for the purpose of securing an interpretation of the law as passed in 1907. Following a number of the definitions and opinions of the highest courts in several states, the attorney-general concludes his opinion as follows:

"From the definitions given it is not exactly clear to the unprofessional mind just what portion of the medical field the practice of osteopathy covers; as above stated, it appears that this particular question would be more properly solved by the state board of health. It is clear that the statute under consideration was designed to regulate the practice of the curative art, whether conducted by the allopath, homeopath, osteopath, eclectic, or any person under whatever cognomen who appended 'M. D.' to his name, who professes to the public to cure disease. I do not believe it was the intention of the legislature that a general license to practice medicine should be awarded to a person who only took and passed an examination for the practice of surgery, and vice versa; and I am of the opinion that those applicants who adhere to the school of osteopathy, and who propose to practice osteopathy should only receive a license to practice osteopathy. The osteopath is supposed to practice that which he professes and on which he received his examination, and hence the provision of the statute that the state board of health might call to its assistance in the examination of a homeopathic, osteopathic or an eclectic, a physician entitled to practice medicine in this state under that act.

Osteopaths Cannot Certify to Deaths.—Only duly licensed physicians can sign death certificates according to an opinion given to the state board of health by Assistant Attorney-General Charles O'Connor. Osteopathic practitioners who have not been licensed as physicians cannot sign death certificates, says the assistant attorney-general, in view of the recent decision of the supreme court. The board of health asked the attorney-general's office for an interpretation of the decision of the supreme court in the Smith divine healer case, in which the court ruled against the healer.

Will Hold Examinations.—The Michigan Board of Osteopathic Registration and Examination will hold its regular annual meeting at Lansing, Michigan, September 4th and 5th, 1911, and at that time an examination will be conducted, also several who are eligible under a previous practice, five-year clause in the law, will be issued licenses. The president of the board is Dr. Carrie C. Classen of Ann Arbor. The secretary of the board is Dr. Wm. H. Jones of Adrian, to whom all correspondence should be addressed. The other members of the board are Drs. B. A. Bullock and T. L. Herroder of Detroit, and Dr. Glenn Hicks of Jackson.

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Associations

Sacramento Valley Meeting.—At the regular meeting of the Sacramento Valley Osteopathic Society, held in Sacramento Saturday evening, July 23, many matters of importance were discussed. Dr. J. C. Rule spoke on "Osteopathy in Emergency Cases," while Dr. A. T. Gibson spoke on "All Possible Lesions of the Cervical Region." The next meeting will be held at Lodi.

Hold State Meeting.—The North Carolina Association of Osteopaths held its annual meeting July 15, in the green room of the Guilford Hotel. There were three sessions, morning, afternoon and night, the latter being a business meeting, at which time officers for the ensuing year were elected. Dr. A. H. Tealy, of Goldsboro, the president of the Association, presided throughout the meeting.

The Board of Examiners also met and examined four applicants. They were all successful, and were Drs. Davis of Waynesville, Crutchfield of Durham, Shepard of Fayetteville, and Munger of Salisbury, who are now fully licensed to practice osteopathy in the state. The examining board is composed of Drs. E. J. Carson of Fayetteville; A. R. Tucker of Durham; E. H. Tucker of this city; R. M. Armstrong of Salisbury, and W. J. Blackmer of Wilmington.

The morning session was devoted to hearing several interesting and instructive papers and to a clinic. Several interesting cases were studied in the clinic and this was probably the most interesting part of the morning's session, as the cases were of the most difficult known to the profession. The diseases studied in the papers and clinic were antero-polio-myelitis; the fracture of the neck of the femur; a dislocated kidney; goiter; pulmonary tuberculosis; tubercular joints, gall-stones and Bell's palsy.

The session in the afternoon was much as the morning session had been. Several interesting and carefully prepared papers were read and listened to with interest. The session in the evening was of short duration, being merely the business end of the convention and election of officers for the coming year.

The following officers were elected for the ensuing year: Dr. Elizabeth H. Tucker, President, Greensboro, N. C.; Dr. E. J. Carson, Secretary and Treasurer, Fayetteville, N. C. The Governor has just appointed Dr. A. H. Zealy, of Goldsboro, N. C., to fill the unexpired term of Dr. R. M. Armstrong on the Board.—E. J. CARSON, D. O., Secretary and Treasurer.

Alberta Osteopaths' Association Formed; Dr. Church President. (From News-Telegram, August 5, 1911)—The Alberta Osteopaths' Association was formally organized at a meeting held in this city on Saturday, which concluded with a banquet in the Calgary Dining parlors in the evening, at which Miss Dr. McKinnon of Los Angeles, who was passing through Calgary on her way home from attending the National Convention at Chicago, was the guest of honor.

There are now twelve practicing Osteopaths in this province, all of whom attended the meeting held here and registered as members of the Association. The meetings were held at the offices of Drs. Church, Sage and Walker in the Alberta Block, and several matters of interest to the profession were brought up and discussed,

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following which the articles of the Association were drawn up and the following officers elected: President, Dr. M. E. Church, Calgary; Vice-President, Dr. Frank C. Ghostly, Edmonton; Secretary-Treasurer, Dr. N. L. Sage, Calgary; Assistant Secretary-Treasurer, Dr. H. E. Walker, Calgary.

It was decided to hold two meetings of the Association each year, the first to be held in Calgary in August of each year, and the second in Edmonton, in March.

At the banquet in the evening, Dr. McKinnon gave an interesting address on the work done at the National Convention, and talks were also given by other members of the newly formed Association, which promises to grow very strong, as the members have received word from other osteopaths who are coming to locate in Alberta in the near future.

The Association was formed for purposes of social benefit and professional advantage to the profession, and the new members are enthusiastic at the result of their organization meeting.

Among those who attended the banquet and meetings in Calgary were Dr. R. C. Ghostly, Dr. W. H. Albright and Dr. C. V. McNeal, of Edmonton; Dr. E. D. Plummer, of Red Deer; Dr. L. B. Mason, of Lethbridge; Dr. S. V. Detweiler, of Medicine Hat, and Drs. M. E. Church, N. L. Sage, and H. E. Walker, of Calgary.

Dr. McKinnon, of Los Angeles, only arrived in the city in time for the banquet in the evening.

Indiana Osteopaths' Meeting in Chicago.—The Indiana Osteopathic Association met conjointly with the American Osteopathic Association at the La Salle Hotel, Chicago, July 24th to 29th. Dr. John F. Spaunhurst, of Indianapolis, is state membership committeeman and chairman of the program committee. A good attendance and interesting meeting is reported.

Illinois Association Also Meets in Chicago.—The Illinois Osteopathic Association met July 24, with one hundred members in attendance. Legislation was the principal topic of discussion. Dr. Pauline Mantle read a paper on the history of the legislative fight for recognition of osteopathy in the state of Illinois in 1911. Her paper showed the power and influence of the American Medical Association in politics in the state of Illinois; how they are trying to force on the people of this great commonwealth allopathic therapeutics and using every sort of obstacle against all other other systems of treating human ailments by sending out pledge cards to various candidates of the general assembly, urging them, under bane of being put on the black list, to support measures favorable to the American Medical Association, which they see fit and proper to introduce, and to vote against all measures not to their interest.

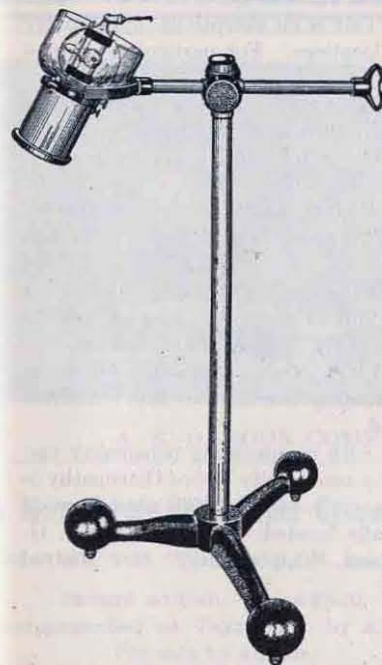
Dr. E. R. Proctor read a paper on "Obstacles to Overcome in Legislation." He said that osteopaths must treat the "legislative problem" as a severe case of sickness, and insisted on the legislature giving the osteopaths, homeopaths and eclectics a square deal and the people of the state of Illinois the right to choose their own therapeutics and physician.

The following officers were elected for the ensuing year: President, Dr. Emery Ennis, Springfield; Vice-President, Dr. John Lucas, of Chicago; Secretary-

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Treasurer, Dr. A. P. Kottler. Dr. Cannedy Wendell, Peoria, and Dr. E. R. Proctor, Chicago, trustees for two years.

Supplementary Report.—The South Carolina Osteopathic Association held its third annual meeting, June 15, 1911, at Columbia. In the absence of the president, Dr. R. V. Kennedy, the meeting was presided over by the vice-president, Dr. W. E. Scott. Four recent graduates who had taken State Board examination, were welcomed to South Carolina.

Dr. W. E. Scott was elected delegate to A. O. A. The following officers were elected for the coming year: Dr. W. E. Scott of Greenville, President; Dr. W. K. Hale of Spartanburg, Vice-President; Dr. Mary Lyles Sims of Columbia, Secretary and Treasurer; Dr. T. C. Lucas re-elected to look after the legislative interests. Case reports and matters of general interest were discussed. The meeting was held at the Colonial Hotel, where the local D. O.'s entertained them at dinner, which was greatly enjoyed by all.—MARY LYLES SIMS, D. O., Secretary.

Married

Dr. Nellie B. Scott of Champaign, Ill., and Dr. F. C. Hill of Homer, Ill., were married at Lake Geneva, Wis.

Dr. A. P. Howells and Dr. Elizabeth Lane, both of the 1911 class, A. S. O., were married July 8, 1911, at Portland, Oregon.

Dr. Helene Eugene Larmoyeux and Dr. Charles F. Kenney were married August 3rd. After August 20th they will be at home at Middleton, Ohio.

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For Sale.—Practice in city of Southwest, 40,000, health resort. \$4,000.00. Price \$300.00. Furniture extra. Address "814", care of the Journal of Osteopathy.

For Sale or Rent.—I want to do P. G. work the coming year and will sell my office furniture in N. W. Missouri town cheap as dirt or would like for some one to take charge of my business. Address "400", care of the Journal of Osteopathy.

For Sale.—A practice in Maryland town of 11,000. Only osteopath in the county. Good trolley connection with small surrounding towns. No law. Address E. L. Schmid, 125 N. Market St., Frederick, Md.

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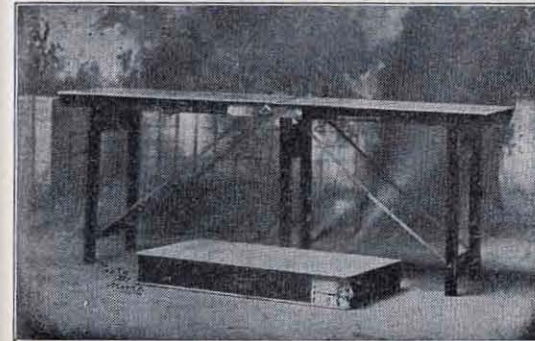
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Personals

Opens Offices in Piquia, Ohio.—Dr. J. E. Hoskins of the June class, A. S. O., has opened an office in Room 534 Orr-Flesh Building, Piquia, Ohio.

Practice of the Late Dr. R. B. Arnold Taken.—Dr. B. A. Woodward, who has been practicing at Harvard, Illinois, has acquired the practice of the late Dr. R. B. Arnold of Galena, Illinois, and has been located there since the first of August. This leaves a good opening for an Osteopath at Harvard.

Called at the Journal Office.—Dr. W. Dawes of the June '06 Class, A. S. O., called at the Journal office, August 12th. Dr. Dawes has been practicing in Dillon, Montana.

Change in Location.—Dr. J. Worling Bereman announces that he has sold his practice in Lyons, Kansas, to Dr. S. L. Dilley, and has purchased the practice of Dr. E. Randolph Smith, in Garden City, Kansas.

Touring Europe in Automobile.—Dr. Lallah Morgan of Providence, R. I., is touring Europe in an automobile.

Another Location.—Dr. Homer E. Clarke of the June Class, A. S. O., has located at El Paso, Illinois, and reports good prospects.

Practicing in Grand Junction, Colo.—Dr. Riley D. Moore, a graduate of the A. S. O., who is practicing in Grand Junction, Colo., is giving special attention to the treatment of non-surgical disorders of the eye and ear, in connection with his general practice of osteopathy.

The A. T. Still Osteopathic Association Meets.—The June meeting of the A. T. Still Osteopathic Association of Massachusetts, was held on the 24th in Boston; Dr. F. W. Gottschalk presented a case of paralysis; Dr. Geo. W. Goode presented a case of neurasthenia and deafness. Dr. W. E. Reise of Toledo, Ohio, was present and addressed the members.

Opening for Good Osteopath.—The people in a college town of 1600 inhabitants, in southwest Iowa, want a good osteopath. Information regarding same may be obtained from Dr. George Estes, of Northfield, Minn. When writing him give school and date of graduation.

Gone Abroad.—Dr. Wm. C. Hall sailed from Montreal, July 29th, for Europe, where he will spend a few months in study and travel.

Visited in Kirkville.—Dr. Walter J. Ford of Seattle, Wash., stopped in Kirkville for a short visit on way home from the Convention in Chicago.

Surprised Friends.—Dr. Nellie B. Scott of Champaign, Illinois, and Dr. F. C. Hill of Homer, went to Chicago ostensibly to attend the Convention of Osteopaths. On Saturday, however, they went to Lake Geneva, where they were married.

Enters Field to Practice.—Dr. Emmet Hamilton, who has been Dean of the American School of Osteopathy for a number of years, has resigned his position and gone out into the field to practice. He has opened an office in St. Joseph, Mo., Suite 8 in the Tootle Block.

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June Graduates Located.—Dr. E. H. Calvert has located at 10 Adams Ave., West Detroit, Mich.; Dr. V. H. Edson at Medford, Oregon; and Dr. T. E. Childress at Wellsville, Kansas. They are all graduates of the A. S. O.

An Error.—In regard to the personal which appeared in the July issue of the JOURNAL, we have a letter from Dr. Walter L. Beitel, in which he says: "I am in receipt of a copy of the JOURNAL with its flattering but incorrect report of my trip. It is true that I have just completed a tour of some 8,700 miles through the United States and Old Mexico, and that I was charmed with the beauty of the city of Redlands, but I was accompanied by my brother and sister. Being a bachelor I naturally haven't a son and daughter. Besides there isn't any Pennsylvania College of Osteopathy, so I can't be president of any, can I? Outside of these trifling irregularities the report is entirely correct. I am charmed with the glories of Southern California and intend sooner or later to create a permanent residence there. In fact, I left my brother and sister out there, and expect in the course of a month or so to send my parents also. As to whether it will be Redlands or no I have not decided, but for the time being, my folks will make Los Angeles their headquarters."

Taking Post-Graduate Work at the A. S. O.—Among those attending the summer school at the American School of Osteopathy, are the following: Dr. Elizabeth Austin, San Diego, Calif.; Dr. Bell P. Lowry, Ennis, Texas; Dr. Mary Keller, Loveland, Colo.; Dr. J. R. Bechtel, Lawrence, Kansas; Dr. C. Frederik Witche, New York City, N. Y., and Eugene Pitts, Bloomington, Ill.

Removed to Los Angeles, Calif.—Dr. Fannie Shaffer, formerly of Centerville, Iowa, has located at 1151 W. 36th Place, Los Angeles, Calif.

Another Removal.—Dr. R. T. Quick has removed from Frederick, Okla., to Sioux City, Iowa.

Brought Patient to Hospital.—Dr. P. B. Snavely of the '04 Class, A. S. O., who is located at Ottumwa, Iowa, brought a patient to the hospital for an operation recently.

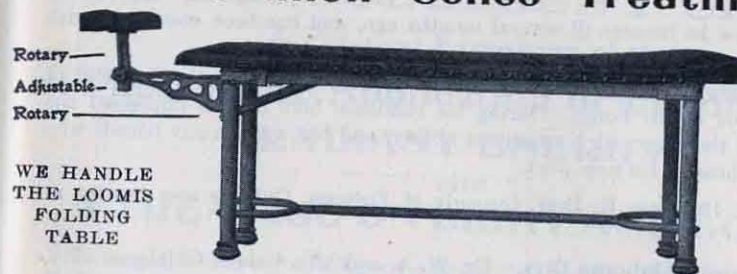
Resumes Practice.—Dr. Evelyn Young, who sold her practice in Iola, Kansas, to Dr. Hull over two months ago, and has been resting since that time, has located in Lawton, Okla.

Osteopathic Physicians Locate in Corvallis, Oregon.—Dr. A. P. Howells and his wife, Dr. Elizabeth Lane-Howells, Osteopathic physicians, and graduates of the American School of Osteopathy, have located in Corvallis, Oregon. The superior educational advantages offered by Corvallis induced them to locate there, as Mrs. Howell's two children will attend the high school.

Visits in Corvallis.—Dr. Nellie Ferris is visiting at the home of R. M. Johnston, in Corvallis, Ore. Dr. Ferris is well acquainted with Drs. A. P. and Elizabeth Howells, who recently located there, having attended the American School of Osteopathy at the same time.

Elected Secretary-Treasurer of the A. S. O.—At the meeting of the Board of Directors of the American School of Osteopathy, August 14, Eugene C. Brott was elected to fill the unexpired term of Dr. Warren Hamilton as director and secretary-treasurer of the institution. Mr. Brott has been doing most of Dr. Ham-

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ilton's work since he became ill several months ago, and has been connected with the A. S. O. for almost a year.

Before coming to the A. S. O., Mr. Brott was chief deputy for the Collector of Internal Revenue at St. Louis. During his residence here he has impressed the business men of the city with his business ability, and has made many friends who will be glad to hear of his new work.

Removal.—Dr. Vera E. Derr, formerly of Fostoria, Ohio, is now located at Bellevue, Ohio.

Visitors from Oklahoma City.—Dr. W. A. and Mrs. Cole of Oklahoma City, spent a few days in Kirksville about the 10th of August. Dr. Cole is a member of the 1902 class, A. S. O., and is the inventor of Cole's Perfect Sight Restorer, an instrument which is soon to be placed upon the market.

West Needs Osteopaths.—Dr. J. A. Van Brakle has located in the Farlow-Rhodes Building, Ashland, Oregon. He says, "I am favorably impressed with the West as a whole. It needs more Osteopaths."

Will Practice in Colorado Springs.—Dr. H. C. Rolf, who has been located at Pratt, Kansas, has removed to Rooms 46-48, First National Bank Building, Colorado Springs, Colo.

Class Meet.—The June Class, '08, A. S. O., held a class banquet Tuesday evening of the A. O. A. Convention week at Hotel La Salle, which was to those present a most enjoyable affair. Drs. Margaret Hawk and Esther Sandus made all arrangements during the afternoon. Those present were Dr. A. W. Tindall, J. C. Bieneman, Leona Woolson, Geo. M. Whibley, Lorena Kagay, Mary Allspach, Esther Sandus, W. C. Brown, Nora Brown, Frances Saunders, F. M. Turner, E. P. Irwin, Minnie Irwin, P. W. Gibson, Betty R. Dyer, D. F. Miller, F. C. Thiele, Margaret Hawk, K. W. Shipman, G. A. Still, F. C. Cluett, C. Woolson, and Mrs. J. C. Bieneman. Dr. Geo. Still, guest of honor, said he was grandfather to this class, for he had carried it through "three generations."

Toasts: Lorena Kogay, "Reminiscences"; F. M. Turner, "Riches"; A. W. Tindall, "Tremors"; W. C. Brown, "Bumps"; J. C. Bieneman, "Family Jars"; Nora Brown, "Dips"; P. W. Gibson, "Babies"; Betty Dyer, "Pickinninies"; Mary Allspach, "Travels"; E. P. Irwin, "A Chance to Talk." K. W. Shipman was toastmaster. A committee was appointed to arrange for a class meet in connection with the A. O. A. Convention next year, P. W. Gibson, chairman.

Location.—Paul S. Emerson of the June Class, A. S. O., has opened an office at 410-411 Trust Building, Indiana, Pa.

Sold Practice.—Dr. A. D. Glascock of Charlotte, N. C., has sold his practice to Drs. A. J. Little and O. D. Baxter.

Changed Location for the Summer.—Dr. A. E. Chittenden's summer address of 400 Merriman Ave., Syracuse, N. Y.

Spent a Few Days in Kirksville.—Dr. J. B. Kissinger of Rushville, Indiana, made the JOURNAL office a pleasant call while visiting in Kirksville, the first of August. He has been very successful in his work since completing the course at the

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THE JOURNAL OF OSTEOPATHY.

A. S. O. in 1900. From Kirksville, he went to Oklahoma to look after his business interests there.

Post-Graduate Course in Boston.—Under the auspices of the A. T. Still Osteopathic Association of Massachusetts, a post-graduate course was given in Boston, July 5-11. Dr. Frank P. Pratt, professor of Applied Anatomy and Technique at the A. S. O., was the lecturer. It was one of the best post-graduate courses of instruction ever given in Boston. The work included causes of lesions, the anatomy of the spine, ribs and other articulations, and the methods of treating the same. Dr. Pratt has spent five years in special work in the Rush Medical College, and the Cook County Hospital, in Chicago, and he is in every sense of the word a thorough bony lesion Osteopath. Dr. Charles E. Fleck, of New York, gave a demonstration of his new spinal machine. At the close of the course the post-graduates tendered Dr. Pratt a dinner at the Hotel Lenox.

Resolution January '03 Class, A. S. O.—Class of January, 1903, assembled in Class Reunion at the A. O. A. Meeting, La Salle Hotel, Chicago, July 29th, 1911.

"WHEREAS, the members of the class present enjoyed the benefits of the A. O. A. Convention, and believe it to be of great profit and value to every Osteopath, therefore be it

"RESOLVED, that we heartily endorse the work and objects of the National Association, and recommend that every member of our class become a member of the Local, State and National Societies, and make every effort to attend all meetings."

Willis R. Proctor, born at Kirksville, Mo., during our school term, was elected honorary member of the class.

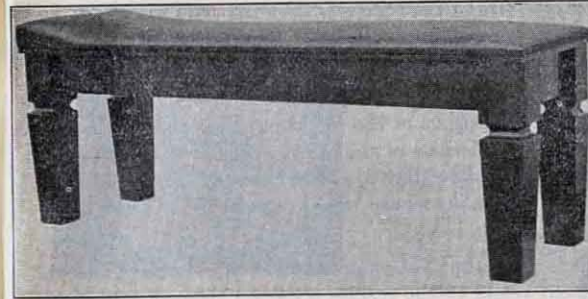
Voted to send greetings to Dr. A. T. Still on his birthday, August 6th, 1911.

Fifteen members of class present. Hope to meet you in Detroit next year.

K. T. VYVERBERG D. O., Secretary.

A Support Meeting Anatomical Requirements.—A supporter that does not, but instead exerts pressure or constriction at the wrong place, is not only a source of discomfort, but it a positive detriment as well. The proper appliance, therefore, must meet anatomical requirements, must be light and flexible so as to accommodate for intra-abdominal pressure, and must be easy to keep clean. These advantages are exemplified in the Storm Abdominal Binder. Its elasticity and flexibility does not depend upon rubber and whalebone. It is light and comfortable and is as easy to wash as underwear. Its use means comfort and proper support in patients with prolapsed viscera, such as enteroptosis, movable kidney, abdominal hernia, obesity, and as a post-operative support; in fact, any condition in which an abdominal supporter or binder is indicated. The Storm Binder is the invention that took first prize offered by the Philadelphia Hospital, and the ever-increasing sales testify most strongly to its efficiency and worth.—Int. Journal of Surgery, June, 1911.

Dust Deals in Death.—CONSUMPTION SPREADS IN DUSTY TRADES. GOVERNMENT MAKING STUDY—OPEN WINDOWS, VENTILATION, AND CLEANLINESS THE CURE.—A warning against the dangers of dust was issued in a statement made today by the National Association for the Study and Prevention of Tuberculosis, in which it is shown that the percentage of deaths caused by tuberculosis in dusty trades is more than double that for all employed men in the registration area of the United States.



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As a result of the dangers from consumption to those exposed to various forms of dust, and at the request of the National Association, the United States Government has recently appointed a commission to work in co-operation with state authorities in making an investigation into the conditions of the metal mining industries in the United States, with special reference to diseases of the lungs. The work of the commission engaged in this special task will follow lines somewhat similar to those worked out by the Royal Commission of Australia, whose report was recently received in this country.

"Dusts are of three kinds," says the National Association; "factory, street, and house dusts." The statement refers to the results obtained through investigations made for the Bureau of Labor, by Frederick L. Hoffman. While among males generally in the registration area of the United States 14.5 per cent of all deaths are from consumption, the mortality among grinders from this disease is 49.2 per cent, and in hardly any of the dusty trades is it below 25 per cent. The percentage of deaths from tuberculosis among those exposed to metallic dust is 36.9 per cent; to mineral dust, 28.6 per cent; to vegetable fibre dust, 28.8 per cent; to mixed animal and other forms of dust, 32.1 per cent; to street dust, 25.5 per cent; and to organic, or dust coming from articles being manufactured, 23 per cent.

The statement speaks also of the dangers from house dust, especially in rooms that are not well ventilated. The Association warns against dry sweeping, and against the use of the feather duster, or other devices that scatter, but do not take up the dust.

Since the ordinary dust blown about in the streets is impregnated with disease germs, the National Association urges the adoption of methods that will prevent further dissemination of such bacilli. It also urges for the coming months of fall and winter, more open windows and more fresh air in the house, shop, and schoolroom.

Insane Hospitals Lack Tuberculosis Accommodations.—DEATHS FROM CONSUMPTION DOUBLE ORDINARY RATE—ONLY ONE-THIRD PROVIDE FOR DISEASED.—Out of more than 225 public hospitals for the insane, with a population of fully 150,000, only 70, or less than one-third of them, make any provision for their tuberculous inmates, and this, too, when the percentage of deaths from this disease is very high. This is the substance of a statement made by the National Association for the Study and Prevention of Tuberculosis.

Seventy hospitals in twenty-eight states, providing all told about 3,350 beds for tuberculous insane patients, sum up the provision made for this class of sufferers.

"When it is considered," the National Association says, "that the percentage of deaths from tuberculosis among the insane is from 50 to 200 per cent higher than among the general population, according to the institution, the need for special provision is apparent." Autopsies made in New York State Hospitals and elsewhere show that tuberculosis is an active disease in about 20 per cent of the cases, as compared with about one-half that percentage in unnormal population. Superintendents of various hospitals in all parts of the United States testify that among the insane institutions, tuberculosis is manifest in from 20 to 38 cases in every thousand. In the country as a whole about 10 to 15 people per thousand are afflicted with the disease.

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Because of the habits of the insane, and the difficulty in teaching many of them the rules of cleanliness, the National Association says that separate buildings for the tuberculous should be provided in every hospital for the insane where tuberculosis is at all prevalent. In many cases, where insane persons through outdoor sanatorium life have been cured of tuberculosis their minds have also been helped, and some of them discharged as mentally sound, who would otherwise have died, both insane and tuberculous.

The Missouri Commission on Tuberculosis appointed by Governor Hadley, July, 1910, composed of the following members: Archbishop John J. Glennon, Chairman, St. Louis; Dr. E. W. Schauffler, Vice-Chairman, Kansas City; Dr. W. A. Clark, Treasurer, Jefferson City; J. Hal Lynch, Secretary, St. Louis; Executive Committee—Dr. Geo. Homan, Mr. W. K. Bixby, St. Louis; Dr. Jacob Geiger, St. Joseph; Mrs. Philip N. Moore, St. Louis; Hon. A. A. Speer, Chamois. Members: Dr. Jacob Block, Kansas City; Dr. Frank B. Fuson, Springfield; Hon. Geo. W. Humphrey, Shelbina; Dr. Chas. B. Irwin, Kansas City; Mrs. Walter McNab Mille Columbia; Dr. Julia A. Meyer, St. Louis; Dr. H. E. Pearse, Kansas City; Mrs. Kate Pierson, Kansas City; Miss Mary E. Perry, St. Louis; Mr. Walter C. Root, Kansas City; Col. Otto Stifel, St. Louis; Dr. W. J. Williamson, St. Louis, made a thorough investigation as to the facilities existing in Missouri for the care of consumptives. They report that outside of St. Louis, Kansas City and St. Joseph, there is no provision by any city for consumptives and in these three cities the hospital facilities are woefully inadequate.

In Fulton Insane Hospital No. 1, a hospital for the tuberculous insane is being built with a capacity of ninety beds. In Nevada Insane Hospital No. 3, two small buildings are being built, to contain twenty beds each—one for men and one for women tuberculous patients. In Jefferson City State Penitentiary about seven beds are set apart for tuberculous patients. In St. Joseph Insane Hospital No. 2, there is no segregation of consumptives. In Farmington Insane Hospital No. 4, there is no provision for segregation.

It follows then that the consumptive patients mingle with other patients in our insane hospitals in Missouri.

A. S. O. European Trip in 1920

Additional names have been received as follows:—Dr. and Mrs. Sherrill and Dr. Nettie M. Hurd of the class of 1911.

JESSIE A. WAKEHAM, D. O. Secretary.