

The Journal of Osteopathy

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THE Journal of Osteopathy

KIRKSVILLE, MISSOURI, AUGUST, 1907.

The Osteopathic Profession.

WILLIAM SMITH, M. D., D. O., KIRKSVILLE, MO.

Dozens of times in the past years the question has been asked of me "who make the best and most successful osteopaths, professionally and financially?" Since, in the great majority of cases, professional success means financial success the two may be considered as including one another, but the question is asked advisedly, it is meant to cover the wide area embraced in the following queries, "Is osteopathy a good profession for a young man to adopt," "When the osteopathic profession is adopted secondarily to some other profession, does its practitioner usually achieve success," "From what ranks and professions do the successful osteopaths come." In all these questions the word "man" must be understood as including the female sex.

These questions seem simple, but if put to one knowing the facts it is extremely hard to answer any of them. Take the first; if the young man is a student, if he has the habit of study or is willing to study, and study hard, if he is serious in his work and not "going into osteopathy to please the old man," or "because it is an easy job and plenty of money," then he is likely to turn out a credit alike to himself, his Alma Mater and the osteopathic profession. There is no royal road to osteopathy any more than there is to any other profession demanding knowledge, and of the osteopath knowledge is demanded; osteopathy is still a young profession, it has to make its way by the success of its practitioners, and the faithful performance of their work means much to it; that work cannot be performed without knowledge, and that cannot be obtained without work. I could point out many young men who have reached positions of credit and comfort to themselves before the age when had they been in other professions they could have attained a post returning them

one-quarter the income or one-tenth the social position and recognition which they then enjoyed. On the other hand I could point out half a dozen cases in which the young man has fallen short, has not entered upon osteopathy as he should have done, as a serious life-work, a life-work involving not only his own money-making but calling for the most painstaking application and frequent self-sacrifice, since upon his shoulders rests frequently the health or even life of the persons entrusting themselves to his care. The practice of osteopathy is more serious than selling peanuts, and demands more conscientious work than smoking cigarettes in an office, hence to the drone or the one looking for an "easy job" or a "soft snap" the practice is not to be commended; to the earnest young man it offers advantages presented by no other profession.

To the second question in its turn we must make exceptions. A man does not in life select a profession, practice it for a time and then desert it in favor of another save for one of several good reasons, among them; first, the profession does not support him; second, he realizes that he has a stronger inclination to follow other work than that with which he is at present occupied; third, he has been at first in such financial position that he could not do other than take up some temporary occupation, or other similar reason. But there is another, and a very large class, men who are failures in their present business and see, as they think, an easy method of accumulating money; like the easy-going young man already mentioned they are counseled to stay away. If a man selects the right profession, applies himself, sticks to it—success must come; if you do not believe this, read no further, for the writer is one of those who does not see the word CANNOT in the dictionary, you CAN if you WILL, and if a man is a failure in one business through want of application, it is a practical certainty that he will not apply himself in another, but spend nine-tenths of his time explaining to himself, and to any sufferer weak enough to listen to him, just how it was that things went against him. But of the three groups which I have mentioned above we meet with legitimate examples daily. It would be easy to say that "a man should enter upon the study of the healing art only when impelled by the highest motives and with no consideration of money," but this is A. D. 1907, and we do "take some thought for the morrow," we find "two changes of raiment" fairly handy at times, the grocer is liable to become importunate if we "have no money in our purse," and the man who looks after the bodies of the sick has as much right to think about the "loaves and the fishes" as has the man who attends to the souls of the sinful. Some of the most successful osteopaths have come from the ministerial ranks, they have left the church in some cases, (and

it is a shame to have to say it,) because the financial returns were too small to allow them to live as their parishioners considered that they ought to live. One of the most successful osteopaths in New York City was a successful traveling salesman; he could not live as he wished, he had to be apart from his family much and the recompense for his labor and his discomfort seemed insufficient; he comes under the first and second classes, he had seen the benefits of osteopathy in his own case and that of his wife, he was naturally of a studious mind, consideration of osteopathy made it appeal to him—he was a professional and financial success from graduation.

But there are many men in business who realize that opportunity to benefit themselves in their profession is uncertain, or that they can only reach a certain point when advancement ceases, they can go no higher; the family may increase, expenses grow, but there is no compensatory inflow to the exchequer. Is it possible for a man who has put all his thought for years in business to undertake the study of osteopathy and succeed? Dozens such could be pointed out; school teachers and principals of schools; men in various clerical positions; business men limited in their aspirations by conflicting conditions, to say nothing of a fair sprinkling of men of a studious turn of mind who realize that their bent is more in the lines on which osteopathy is founded than on those of farming, traveling or office work in its many different forms. Medical men have in a considerable number of cases taken up this method of treatment, dentists have entered the osteopathic ranks and in no case have they regretted doing so. Of course to some unused to study the work seems somewhat hard at first, but gradation of the severity of the course leads the student insensibly into the deeper paths of study, his mind soon gets into the routine of "brain-training," and a short time suffices, in the great majority of cases, to enable the work to be performed with little effort.

The successful osteopaths are found to have come from all professions and from all ranks in life; "the rank is but the guinea stamp, the man's the gowd for a' that," and what the osteopath has made himself by his study while at the school of osteopathy in grounding himself for his more extended study after graduation in the wide school of Experience and observation, he is, regardless of what his previous vocation or position in life may have been. Examples of all are easy to point out, successful osteopaths are to be found in every fair-sized city in the Union, men who have fought their way by dogged perservance and stick-to-it-iveness, a compound without which no success can come. There are over 3,000 successful osteopaths in practice, they come from every posi-

tion and occupation, and there is room for ten times as many more; and then for ten times the number of that aggregation.

At that last multiplication the ranks would seem to be getting a trifle crowded, but a little computation will show that, at the present rate of increase of the population, by the time such happens, say in fifty years, the estimate would be well within bounds. So there is still room for the congested professions to get breathing space, for the underpaid to increase his income, for the young man looking for an honorable and lucrative profession to enter an osteopathic school and lay the foundation of a profession, the practice of which will bring to him the grateful thanks of the sick and suffering restored to health through his ministrations.

* * *

WHY THEY STUDIED.

Some Letters to the Editor.

To one contemplating a certain line of work, among other questions, these at once present themselves, "Who have made the greatest success," "Have I equal or better beginning equipment and opportunity." What the requisites are for success, and what the present opportunity is, has been told by Dr. Smith; what your talents are, you know for yourself. That you should have specific examples; we have selected at random a few of the notably successful osteopathic physicians who give in the following terse letters, their reasons for studying and describe their present success.

* * *

GEORGE J. HELMER, NEW YORK.

Replying to your letter of recent date in which you request me to state my occupation prior to studying osteopathy, how I became interested, why I decided to study and my advice to young men as to taking up the practice; also to give an index of the approximate degree of success I have experienced.

I was born and lived on a successful farm in Canada, which life I pursued, and attended school until twenty-one years of age when I took up mercantile life in St. Paul, Minnesota. One of my earliest recollections was the desire to be a physician and, while successful in my mercantile pursuits, the desire increased with age. In 1893, under a tutor I began to study medicine.

However, medicine had failed to accomplish results in my own family and my attention being called to Dr. Still and his new method, I

went to Kirksville to investigate. After some days the information I was able to gather from the business men of Kirksville, the patients and students of Dr. Still and the Doctor himself, I was convinced beyond doubt that the claim of osteopathy was based upon scientific principles, the principles of anatomy and physiology—long but partially understood by the old school physician. I was convinced that the failures in the drug practice were due to the unscientific application of the principles of anatomy and physiology and that the mechanical, the adjustment principle based upon thorough knowledge of the structure and functions of the body had more promise, and years of experience have since proved that my conclusions were correct.

If a young man has chosen this profession for his life work, if he has a strong body and a healthy mind, if he is not afraid of hard work and if he is willing to equip himself with a thorough course of study, as our best osteopathic schools offer, there is no reason why he should not be successful. The danger of failure lies in the sad fact that the young doctor is often more troubled about how much money he is to get than what results he will obtain, whereas, if he would measure his success by the standard of results, he could be of real service to humanity and would find the financial part of his work satisfactory.

* * *

JOSEPH H. SULLIVAN, CHICAGO.

Answering yours of the 27th, asking me to reply to questions: Occupation before entering osteopathic practice, How I became interested, Why I decided to study, Advice to those contemplating studying osteopathy.

For several years prior to 1894 was engaged in manufacture of brick and tile following which I became interested in steam heating contracting.

Became interested through the invalidism of Mrs. Sullivan, who in 1894 and 1895 was a Kirksville patient.

Dr. A. T. Still invited me to enter the school, which I did; sacrificing my business interests, but convinced that I could make a greater success in osteopathy—and I guessed right.

My success has been most satisfactory to me and I ascribe it to my following absolutely the pathway pointed out by Dr. A. T. Still; not being turned aside by the longing for a degree of M. D. nor by the persuasions of the vibrator man nor the electric machine man. These things mar the truth of osteopathy and do much to tarnish the escutcheons of the osteopath who dallies with them and impair his success.

I should advise any energetic, healthy young man to engage in the

study of our science if he is convinced it is a complete system; if he is not he would better let it alone.

Am averse to making any sworn financial statement as to my income, suffice it to state that my appointments are all at my office and I work all day every day except Sunday and have been so doing for ten years. My yearly receipts run into seven figures, dollars and cents.

* * *

E. C. PICKLER, MINNEAPOLIS.

Replying to your favor of recent date I would say that at the time of commencing my study of osteopathy I was postmaster at Kirksville. I became interested from seeing the large number of patients who were receiving osteopathic treatment there, and the peculiarly unanimous way in which they endorsed the treatment. Added to this the fact that I had known the Old Doctor all my life and knew the wonderful success which he was making with a new and comparatively unknown treatment, and you can see I had strong motives to commence the study.

I would certainly advise any honest young man, who feels a preference that way, to commence the study of osteopathy, if he is willing to work hard and give himself wholly and unreservedly to the science, and to make it his life work. To such a one, imbued with strong convictions and love of the work, I think success is reasonably certain, both from a pecuniary standpoint and the good he will do.

As to you inquiring as to my success I would say that I am satisfied. I know I could never be as happy in any other work.

* * *

F. E. MOORE, LAGRANDE, OREGON.

Pleased to respond to your request for a short statement of my experience in the profession of osteopathy.

A dissatisfied bank clerk, I was seeking a change of occupation, with more promise of future enlarged remuneration, when osteopathy, then in comparative infancy, was brought to my notice through several good cures. Looking into the work I found a professional life in which there was a great and useful field for the exercise of one's best faculties; a science, whose principles, and the practice of which, in its true interpretation, deserves the name of science; a practice giving in return for sincere effort, a keen satisfaction of service well rendered and a monetary remuneration, measured only by the success and ambition of a practitioner.

In realization I have not been disappointed. I can truthfully say osteopathy satisfies me in every way. I always see a higher goal ahead and it is "life" to accomplish it. I want one thing more than any other, namely, osteopathic truths, and after that I want more osteopathy.

To the young man or young woman taking up the profession of osteopathy I wish to give one thought after eight years practice—study with the one purpose of becoming what I choose to call a lesion osteopath, use good judgment and tact and your success is assured.

* * *

One Way We Gain Practitioners.

B. F. STILL, A. S. O., '08.

(Mr. Still is a cousin of Dr. A. T. Still.—Ed.)

The accompanying letter from a personal friend of mine, whose home is in Omaha, Nebraska, is to a limited extent self-explanatory, and shows a way in which many people become interested in osteopathy, and the source of a large percentage of the recruits to the profession.

During my friend's three months stay in Kirksville, I became intimately acquainted with him and thereby learned much of the history of his affliction as well as of his personal affairs. He was for a number of years connected with the great implement firm of Parlin and Orendorff Co., being at the head of one of the clerical departments in the Omaha branch, and while there fell a victim to a serious nervous affection. He sought the best medical advice and for eleven years was constantly kept under the great "bromide" treatment, by three or four different well known specialists in nervous diseases, none of them materially varying the treatment. Under this treatment his symptoms were modified, thus enabling him to sleep, which he could not otherwise have done, but no other benefits were received, and on the contrary he grew progressively worse, and was often seized with a desire for self-destruction and had to be guarded to prevent its accomplishment. Also, at one time, he tried to assault a friend with a butcher knife, yet afterwards had no recollection of what had occurred. Periodical somnambulism, during which he would do all kinds of queer things, was another manifestation of his disease—at one time, to my knowledge, taking the door to his sleeping room from its hinges. Finally, (and strangely) it was left for a conscientious homeopathic physician of Denver, frankly to state that medicine could do nothing for him, and to advise him to TRY OSTEOPATHY, which appears to have been the only good professional advice he had received for all the money he had paid, up to the time of coming to Kirksville.

These details may appear unnecessarily extended, but are given for the purpose of contrast with his feelings as expressed in his letter, which letter tells the rest of the story.

MY DEAR MR. STILL:

Your very welcome letter was duly received and I was glad to hear from you and to know that you are all well.

My stay with you was so pleasant, and the cordiality of the people I met, and the beneficial results of the treatments have created a feeling in me that will last as long as I live. I talk osteopathy and Kirksville until, I fear, people may want to mob me. My plans are being made for going through that school, and while they may not be carried out, it will not be my fault if they are not.

* * * *

You can hardly conceive how different I am now, that the old load is taken off and I feel free from the bondage of medicine. Life is worth living now; there is something to live for and to strive for. My ambition is now aroused anew. I have "spit on my hands" and taken a fresh hold on life, thanks to osteopathy and the "Grand Old Man" who discovered it.

You and Mrs. Still could see the visible improvement, but no one could appreciate how it feels to have the burden of an apparently incurable disease removed. It is like being granted a pardon for one who is serving a life sentence in the "pen." The human race will owe a greater debt to the "Old Doctor," in years to come, than it will to any one who ever lived, and to that I allow no exceptions.

Now please let me hear from you, at your convenience, as to the matters referred to above, as well as to personal matters; and with my very kindest regards to Mrs. S. and the children and to your father when you write to him in Texas, I am, always

Your friend, _____

* * *

MONTREAL, JULY 21, 1907.

DR. A. T. STILL, Kirksville, Mo.

MY DEAR FRIEND:—I am this far on my way back from the Bay of Fundy, and will write you from Buffalo. Am glad to say I left my sister much better and out of danger to the surprise and happiness of all.

The medical doctors in my old home told the people osteopathy was a fake but I made every one of them eat their words by work on their own cases which I treated at their request, and had the pleasure of hearing them say that such a science could only come through a great thinker like Dr. Still to whom alone I ascribed all the honor and credit for what was done.

Will describe the cases to you from home next week. Trusting you are well and receiving great thoughts daily from Peter.

Your sincere friend,

HUGH L. RUSSELL, D. O.

The Advantage of Hospital Treatment

IN OSTEOPATHIC CASES.

WILLIAM HORACE IVIE, D. O., STAFF PHYSICIAN, AND INTERNE IN THE
A. S. O. HOSPITAL.

After a year of careful observation of the results obtained in the A. S. O. Hospital, I am firmly convinced that there is a great variety of chronic, as well as acute troubles, in which the best, as well as the quickest results can be obtained only when the proper hospital attention is added to the osteopathic treatment. This in spite of the fact that we have had a very hard list of cases to judge from, they being the refuse of both the medical and osteopathic professions. My position in this matter has changed materially. When I first entered practice, having had no hospital practice during my course, appreciating my lack of experience and fearing for my position, as I did not know their medical traditions, I was more afraid of hospitals, with their trained nurses, whom I felt surely knew more than I did, than any of my patients could have been. I well remember with what fear and trembling I went to meet my first trained nurse, one of the loveliest women I ever knew, and how I had to be almost forced to take my first case to a hospital. But such was the happy termination of this and other cases in the San Francisco hospitals and of so many difficult and varied cases here that I have little by little come to see a great light—hence this article.

I doubt if the average osteopath realizes the immense advantage the hospital accommodations would give him in the diagnosis and treatment of his cases and the large variety of his now so-called office cases in which a few weeks in a hospital is the logical adjunct to his treatment. That must be true for despite the fact that a majority of our practitioners are located where they could readily secure access to hospitals for their patients, if they so desired, very few are taking advantage of this greatest of legitimate adjuncts. Of course we all realize that surgical cases need hospital treatment and those of us, who have lived in cities where wards are provided and a strict quarantine is held against most infectious fevers, have come to accept that as proper also; but with our chronic cases, even those confined to bed, we have been satisfied with almost any makeshift. Now these frequently need hospital attention and no matter what other kind of treatment they are getting do best only when they are getting it, and so we have not done all for them to be done until we have treated them, or they have been treated under hospital auspices.

For instance, there are all those cases in which diet is of paramount importance either for diagnosis—say to distinguish between pancreatic and liver diabetes—or for treatment—say in acute or chronic gastritis and enteritis, gastric ulcer, diabetes, “liver trouble” and all forms of nutritional disturbances. They are largely hospital cases, for especial diets can only be prepared and enforced in the greatest proportion of cases in a hospital. Dieting at home is a farce, as most of you have found.

Advantage, or disadvantage,—as you may deem it—all well regulated hospitals are prepared to give to your patients almost any adjunct treatment you may desire—massage, various baths, or the rest cure to your nervous cases,—massage and hot or cold packs to your acute or chronic joint cases,—alternate hot and cold applications to your babies’



(By Permission.)

A HOSPITAL PATIENT.

eyes, where continuous work for a day or two may be necessary to save them,—Brand baths to your typhoids, which are rather difficult to give at home and of which, one with one treatment will do more toward reducing temperature than several treatments with almost continuous sponging, etc.

Whether you regard the frequent bathing or sponging which is compulsory in hospitals as an adjunct or not the fact remains, that it promotes the cleanliness of the patient to a degree not attainable in the home, especially in bad cases of bed sores, incontinence from any cause, etc., and materially assists those cases where the activity of the skin is to be promoted.

One of the other strong points in the hospital's favor is the great regularity in the habits imposed on its inmates. Everything is done

regularly; meals are served regularly—light, regular or special, as the case may be; the patients go to bed at an early and regular hour; all hospital adjunct treatments are received regularly as are also the baths and lastly but by no means least, the family, friends, or business associates are allowed to see the patient only during certain hours unless especially ordered otherwise. This last item is of the greatest importance in many cases—in nervous cases where the rest or semi-rest cure is being taken, or where the family irritates the patient or exerts a bad influence—in joint or other painful affections of children, where the patient is being humored to anything he wants and with whom you can do very little while the mother is around, but who ceases to whine, becomes obedient and can be treated as desired after a few days in a hospital—in cases where the family are unduly exercised and who by constantly watching your own or your nurses, chart and interfering in various ways make your own and your patient's life miserable.

The constant attention and supervision which your patient receives, not always obtainable with a trained nurse in a private home in all these particulars, can not be otherwise than very beneficial to your patients, and the daily reports and charts made by nurses trained to observe symptoms and the greatly increased control you have over your patients can not but be of great assistance to you. Consequently I am of the opinion that we should refer our chronic patients, both those in bed and those out of it to hospitals much oftener than we do and where either for lack of hospitals or because they are closed to us through blind prejudice we are unable to give our patients hospital treatment, we should rather than have them stop treatment uncured send them to some other city or town where a brother practitioner may give them such advantages.

* * *

Osteopathy appeals, from first to last, to facts. Nothing tells like results. Facts are the biggest forces that rule the world. Fiction can not be foisted upon a practical public as fact. The minds of to-day are impatient with mere theories and speculations. They clamor for facts. They ask for results and returns. Osteopathy does not evade the challenge of a critical and curious public. It courts investigation. It is not afraid of all reasonable tests. It stands only on its merits. It does not ask any one to bankrupt his reason and then pension him on a miserable allowance of faith. Its principles and philosophy are capable of illustration in disease, as are the rules of mathematics in numbers, or of forces in mechanics.

Another Osteopathic Milestone.

(Contributed.)

Every thinking person knows that a knowledge of the anatomy of the human body is essential to the practitioner of the art of healing, and that the dissection of the body is just as necessary in order to obtain that knowledge. With a view to securing material for dissection wise legislation has been enacted in almost every State, ordaining that the bodies of the unclaimed pauper dead be turned over to the medical schools of the State for dissection. Unfortunately, (and the reason is easily found) there is a strong popular prejudice against dissection, especially in rural communities, hence many bodies which ought by rights to be so employed are buried. Again, in the cities bodies which ought to be so employed are only too frequently autopsied when there is no just reason, often, it is to be feared, simply for practice. It is the result of both of these practices which has led to the popular clamor against dissection; the colleges required material, they must have it, if they could not get it in the manner which the law desired, subjects must be bought, when they could not be bought of the kind prescribed by the law as those suited for dissection (the unclaimed pauper dead) in more than one case the utterly reprehensible practice of grave-robbing was resorted to. When such was exposed the popular mind conceived the idea that it was the direct result of dissection, not the result of the avoidance of the very law which if properly carried out would guard against the sacrilege of the grave.

Missouri has taken the lead in the enactment of legislation which puts the medical and osteopathic schools of the State in the position where anatomical material will be regularly supplied, where no unclaimed pauper dead can be buried, or destroyed for the purposes of dissection without good and sufficient reason. And the enactment of that law puts a safe-guard on every grave at the same time as ensuring the proper means for the education of its future doctors. The American School of Osteopathy has been especially hard put to it in the matter of obtaining material; for years all which it employed had to be procured by negotiations; but let it at once be said that although grave robbers have often attempted to sell bodies to its management, no such body ever entered its walls. Less than ten years ago its teacher of anatomy was subjected to little short of persecution because he had, in the ordinary course of his professional duty, secured a few bodies in Illinois. But those times have passed, and the American School to-day stands on the same level

as the other medical schools of the State, and will receive its pro rata supply of bodies, based upon the number of students. As the number of students at the School is, roughly speaking, one-sixth of those in all the schools of the State, one-sixth of the bodies will be turned over to it for use in its anatomical class-room.

What this means to the School is great, what it means to the student is still more, but what it means to the public is inconceivable. The teaching of anatomy should now be better than ever, and all acquainted with the various healing methods know that the osteopath looks upon anatomy as the basis of all healing knowledge.

But the mere recognition of the rights of the American School of Osteopathy was not all. Dr. F. P. Young of the American School was a member of the legislature, it was chiefly through his efforts that this bill became a law, that legislation, which is hailed with acclamation by every medical school in the state, placed it in the hands of a legal board to say when a body shall be autopsied, when it shall be buried; in other words, a law rendering possible and practical the enforcement of pre-existing laws, laws which were all good, but which could be evaded. So thoroughly did the anatomists of the state, (who compose the Anatomical Board) recognize the merit of the labors of Dr. Young that he was unanimously appointed its treasurer; such confidence did they have in his ability that he was appointed a member of the executive board. Truly when the osteopath, the regular and the homeopath meet on common ground in such spirit of harmony, there is every reason for congratulation; it shows that the old feeling of animosity is passing away, that all recognize that each school has its points of merit, and that the true spirit in which all medical work should be undertaken is that of harmony; and it was that spirit which made success in this matter possible. Dr. Young may well feel proud of his work in the legislature which has led to this result; a result of vast importance to every medical school in the state, whether osteopathic, allopathic or homeopathic; one of importance to every teacher of anatomy, who was having to risk his liberty almost daily in yielding to the absolute compulsion which forced him to buy that which the law declared should be his by right; one of huge importance to every citizen in insuring that the medical schools shall have material enough properly to educate those who are later on to attend his family in sickness, and that such education can be attained without the possibility of need for that hideous wrong which the evasion of existing laws by communities rendered only too apt to occur, the rifling of graves.

This law now renders sure the procurement of an ample supply of

material; no longer will bodies be trafficked in; no longer will city undertakers hold up the bodies of the pauper dead and sell them to the highest bidder; no longer will coffins containing sand be buried, while the corpse which should have therein been buried is sold for dissection. These things happened,—because,—? the law was not enforced. This new law now enforces existent good legislation and has created new. There is now no excuse for the avoidance of the law, whether by destroying for experimental purposes dissecting material, putting a county to expense which it has no right to bear in the way of burials, or by the sale or purchase of material. To Dr. Young and his fellow legislators belongs all honor for their far-seeing action; future years will demonstrate their wisdom. Had such a law existed in Indiana the outrages of Cantrell and his band of fellow colored grave-robbers (they robbed over 3,000 graves, among them those of all ranks of society) would have had no pretence of excuse for existence; and the passing of this enactment by the Missouri legislature is confidently believed to be only the first of similar laws in all the states.

There is now secured to the American School of Osteopathy, and every other legitimate medical school in the state, an abundance of dissecting material, and just as the American School has been in the forefront in every step of advance in the interests of osteopathy or the public health, so it is here; truly this recognition of its rights is another milestone in its history of uninterrupted progress.

* * *

Osteopathy is in no way affiliated with pharmacy and medicine, except as the effects of these may be known to be avoided. Osteopathy runs a line of cleavage through the entire so-called "History of Medicine," and divides it into the facts of anatomy, physiology and hygiene, on the one hand, and the facts of pharmacy and chemistry on the other. The original practitioners were anatomical and physiological; the "chemical," or medical practitioners were irregular. So, osteopathy can show from history, reason, and nature, that the "Doctor of Medicine" is still irregular, and that the Doctor of Osteopathy alone is regular. The scholarship of the medical fraternity is challenged to deny this distinction. Osteopathy is a science; medicine is not, and never has been, and all its "doctors" can not show that it is.

* * *

A hint may be gathered from a witty remark of an Irish patient, who said that he liked osteopathy better than medicine, for an M. D., so "drenched him with drugs during his illness that he was sick for a long time after he got well."

Osteopathy Proved by Dissection.

F. P. YOUNG, A. B., M. D., D. O., KIRKSVILLE, MO.

(Five years in charge of Anatomical Laboratory, A. S. O.)

The questions have been frequently put to me during the last five years, What does the dead room show in regard to the osteopathic theory? Is the existence of osteopathic lesions proved by dissection? If so, to what extent? As a general statement I will say that inasmuch as the osteopathic theory is based upon the general idea that disturbed normal anatomical relations lead to perverted functioning, to a marked extent this is proved by dissection.

During the five years in which I have had charge of the anatomical laboratory of the American School of Osteopathy two hundred and sixty-seven cadavers have been dissected or used for the surgical laboratory.

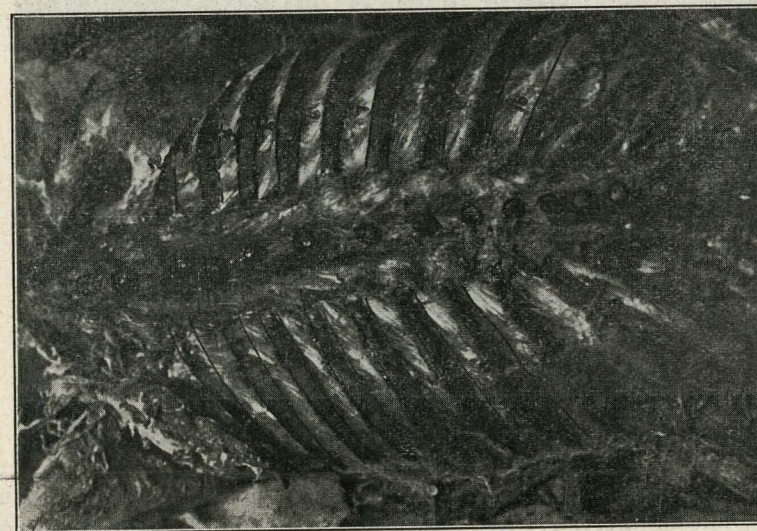


FIG. I.

Displacement of 3rd and 4th D. V. Twisted 3rd and 4th ribs.

I have not made painstaking observations, but in all cases I have carefully noted the pathological conditions, the probable cause of death and what if any bony lesions were present. Also, whether the lesions present were associated with the disease in question.

The illustrations published herewith are from photographs of dissections made by students in the anatomical laboratory.

Two of these show lesions. Anyone familiar with photography will understand that it is difficult to secure a good picture of dissections, especially showing subluxations of bones, such as vertebræ and ribs. The lines in the photographs have been reinforced by ink to demonstrate the lesions. In no instance have they been so changed as to exaggerate the condition. These lesions which were demonstrable and which apparently had connection with the existing diseased conditions were almost entirely confined to the spine, ribs and innominates. The existence or significance of malpositions in regard to other bones could not be demonstrated.

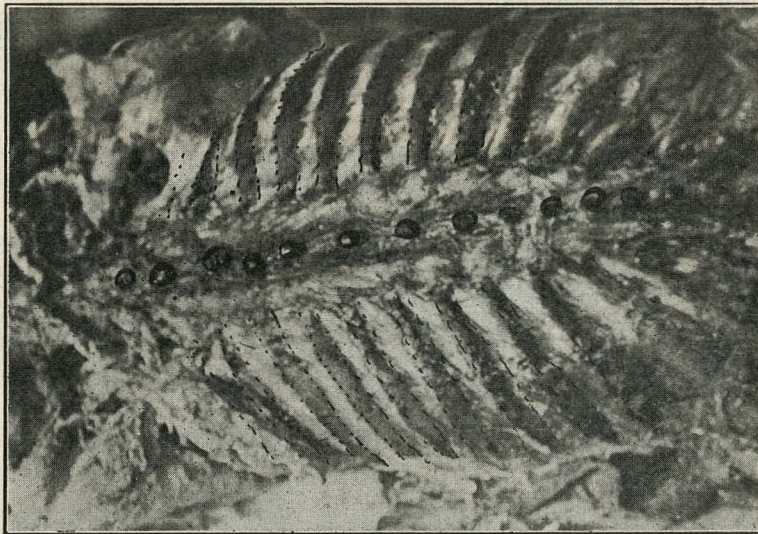


FIG. II.

3rd and 4th D. V. displaced. 5th and 6th separated. The 3rd to 7th ribs down.

Lesions observed consisted of subluxated vertebræ, ribs and innominates, one or more, existing singly or in combination, with or without curvature of the spine. In making these observations due consideration was given to the history of the cadaver, i. e., the amount of handling and the probability of the condition being antemortem or postmortem, also the fluid with which the body was preserved.

A glance at the cuts will show at once that in these cases no ordinary amount of handling nor hardly any possible violence could have produced the lesions postmortem. In other words, the evidence is almost conclusive that the lesions were antemortem. Now, when we consider what the disease process was in each instance, calling to mind anatomical

relations, nerve and blood supply, we are almost forced to the conclusion that the theory of osteopathy is proved.

In figure 1 there is a displacement of the third and fourth dorsal vertebræ and an approximation of second and third, and third and fourth ribs on the left side. In this instance the cause of death was mitral disease with the deposit of tubercles in the upper part of the left lung. It is well known that the vaso-motors, etc., distributed to the heart and lungs arise from this spinal segment. This latter anatomical fact is



FIG. III.

Dis-section showing the Sympathetic Nervous System in the Dorsal Region.

shown in figure 3 where the fibres are shown passing into the root of the lung. (These sympathetic fibres were stained black in order that they would show in the picture.) Therefore the relation of these lesions to the diseased process is readily understood, easily demonstrated and can be said to prove osteopathic teaching.

In figure 2 a very similar condition exists with the exception that more of the ribs were involved and also general curvature of the spine existed. The third and fourth dorsal vertebræ were displaced and the fifth and sixth were separated. The third to the seventh ribs were dis-

placed so that the intercostal spaces were markedly less than on the opposite side. Neither edge of the ribs was prominent.

In this case there was an old pleuritis involving the whole left pleura, also a pneumonic condition of the left lung. Both processes were tubercular. This condition was the cause of death. In both these cases the bodies were injected with a solution of chloride of zinc and formalin. In neither instance were the cadavers handled roughly. The preservative fluid would quickly fix the tissues so that displacements of the bones as here shown could not take place.

Therefore it may be considered that the above illustrations are fair illustrations of osteopathic lesions entering directly into the diseased process. The exact manner in which these lesions have operated, just what structures were interfered with and how is an interesting problem which at some future date I shall discuss.

Figure 3 is an illustration of the sympathetic nervous system showing the lateral chain ganglia, the rami communicantes and rami viscerales. These have simply been stained black as they showed through the pleura. This subject died of injury. There never had been any pleuritic inflammation to obscure the nerves.

* * *

CARE OF THE VOICE.

The apparatus with which you produce the tones of the voice, corresponds to that which controls other parts of the body—such as the arm, the leg, the foot, in regard to the way in which it should be used. The more you employ it—in the right way—the stronger it becomes; and you can easily impair its effectiveness, by a little injudicious treatment. You can break your leg, take improper or no care of it, and be lame for life; you can crush your arm, and be a one-armed man; you can smash up your voice, and be “a whisperer” or a broken-toned person the rest of your days.

The way to take care of the vocal organs is to use them frequently, smoothly, carefully, and within their proper degree of power. Constantly endeavor to extend these, in a way that shall improve and strengthen them. Give them plenty of air; inhale large quantities of it into them, and thus keep them clear of foreign and injurious matter. Before going into a hall where you are to exercise the vocal organs, and after leaving it, take in large quantities of the life-giving atmosphere that hangs all about you. Avoid the indiscriminate use of mixtures and nostrums that are sold for the purpose of “clearing the voice,” but are often hurtful—not only to the larynx, but to the stomach and the general health.

WILL CARLETON'S MAGAZINE.

The Journal of Osteopathy

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KIRKSVILLE, MO., AUGUST, 1907.

EDITORIALS.

Any person having in his, or her, possession a copy of the original typewritten script of “Crutches for Sale,” (the play, not the book written on the play by the late John R. Musick) is requested to communicate with Dr. Smith.

* * *

Dr. Walmsley Leaves With this issue of the Journal, Dr. Walmsley retires as Chief of Staff, having finished his post-graduate course at the A. S. O. Dr. Walmsley was in charge of the editorial work of the Journal for a number of months and his work having been very satisfactory, it is with regret that the Journal management sees him go into the field: His location has not been definitely selected as yet.

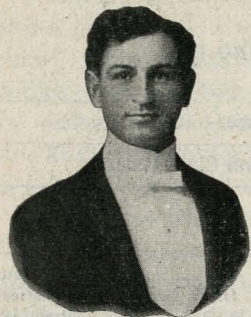
* * *

Novel Local Advertising. New ways of advertising the profession are constantly being developed, of which two recent examples deserve mention. One is the osteopathic picnic of the Denver O. A., when the busy osteopaths were able to stop “setting bones” and for one day devote themselves to “relaxing their muscles.” Special excursion rates were secured and the osteopathic benefactors and benefitted had a day of fellowship and enjoyment.

The other is the lecture to be given by Dr. William Smith under the auspices of the Toronto Association. This differs from lectures by Dr. McConnell and others in being a popular history of osteopathic advancement as well as a scientific demonstration of its principles, and will be somewhat along the line of the talk given at the Tri-State meeting. It is astonishing how much remains yet to be done, even in what are apparently osteopathic strongholds. The Editor was recently conversing with a gentleman who has lived for many years in Rochester and yet who knew nothing of osteopathy or its fight for recognition nor did he know Dr. Williams had been appointed to the State Medical Board.

The Oldest Osteopathic Teacher.

Dr. Frank P. Young, of the A. S. O., bears the honor of being the oldest teacher in the profession now serving—oldest, not in point of years, but in the longest uninterrupted term of service in the class room.



DR. F. P. YOUNG.

But his service to the profession has not been in the class room only; he is one of the most clever politicians in its ranks. His work secured success or laid the foundations for its future achievement in many a hard-fought legislative encounter. The most recent accomplishment is legalizing the surgically-equipped osteopath, and in placing osteopathic schools on a par with medical in this state in regard to anatomical subjects.

This latter law is advantageous to the medical as well as to the osteopathic schools as they also were often hard put to secure dissection material and they showed their appreciation in unanimously selecting him as treasurer of the State Anatomical Board and member of its executive committee.

Think what this new law means to the osteopathic student. No more will he be confined to one dissection; if he be studious, he may pursue the investigation further, the better to equip himself for his battle with disease.

To the sick it also means much, in that their physicians will be so thoroughly grounded in their studies, that they know whereof they speak.

* * *

Improvements at A. S. O. In order that the American School of Osteopathy may maintain its position in the front rank of educational institutions, some extensive alterations and additions are being made. First, the arrangements are now completed which will permit of the making of an immense number of lantern slides for use with the electric light stereopticon, which will be used in no fewer than six classes, viz., Anatomy, Obstetrics, Gynecology, Physiology, Histology and Pathology. What this addition will mean to the student he will not know until he sees the system in actual operation. The extent of the equipment may be judged from the fact that in the anatomical series alone it is expected to supplement the existent 800 slides by an additional 750.

Complete apparatus has been secured, the dark room is now in full swing and the slides are being turned out as fast as is possible, the opening of the session will find all in readiness. Further, the nucleus of a museum of Anatomy and Pathology exists in the school, but this has never been systematized. This is now being done.

Considerable change will also be noted in the dissecting room, and there the students will find, among other things, a complete series of over 70 large-size illustrations of dissections of all parts of the body with complete descriptions; the better ventilation of the room has likewise been attended to. The overhead lighting of the table in the amphitheatre is now excellent, while the room can be completely darkened for stereopticon demonstration. In addition orders have been placed in New York and Paris for some of the finest models made, for the department of obstetrics. One notable improvement is the painting and frescoing of the whole interior of the building. All round, in every department, a waking up is in progress which can only redound to the easement of the work of the student, the advancement of his knowledge and the comfort of the faculty.

W. S.

MRS. STILL IS A GOOD FISHERWOMAN.

The following, written on a piece of birch bark and addressed to Dr. C. E. Still, was received from Dr. G. A. Still, who is camping at Lake Emily, Minn. All the Professors at the A. S. O., are so imbued with the truths of osteopathy that it is impossible for them to speak anything but the truth. So you notice Dr. Still does not speak of his own prowess, but of that of his wife.

"MY DEAR CHARLIE:

SUNDAY

This sure is the wild woods. Harry Emeny, class '97, is at a nearby lake. All the fish are biting well. Ardella got a 10 lb. "muskie", Thursday.

GEORGE."

* * *

DR. W. R. LAUGHLIN TO ENGAGE IN PRIVATE PRACTICE.

Dr. W. R. Laughlin of Los Angeles, Calif., who has been teaching Anatomy for the past nine years—seven years at the A. S. O., and two at the Los Angeles College



DR. W. R. LAUGHLIN.

of Osteopathy—has retired from teaching and will hereafter devote his full time to his private practice at Los Angeles. During the two years the Doctor has been located there he has built up such a large practice that his entire time is insufficient for it. Dr. Laughlin is affectionately known to perhaps three-fourths of the profession as Dr. "Billy" as to him they owe their start in osteopathy. He it was who kept up their flagging courage when as freshmen they became appalled at the mountains of knowledge which they were required to master before receiving the "Old Doctor's plaudit of "well done." On the staff of the A. S. O. Infirmary under the personal tutelage of Osteopathy's Founder, Dr. Laughlin learned the truths of osteopathy which he has for the past nine years been successfully applying in actual practice.

His success in Los Angeles is the legitimate result.

* * *

BOOK REVIEWS AND NOTICES.

A revision and extra editions of a text are regarded as confirmatory of a text book's real worth. One of the osteopathic texts which has received this stamp of approval is the Manual of Osteopathic Gynecology by Dr. Woodall. The book was written as a text and being so well received by the general profession was rewritten and enlarged to meet the demands of the field practitioner. A recent endorsement is by Dr. G. A. Still of the A. S. O.—A Manual of Osteopathic Gynecology, Percy H. Woodall, M. D., D. O., formerly Professor of Symptomatology, Gynecology and Obstetrics—Southern School of Osteopathy. Second Edition, Cloth \$3.50, prepaid. Published by the author.

One of the features of the Put-In-Bay program was Dr. Burn's talk on osteopathic causes of eye trouble and with this as an index, the series of books to be prepared dealing with osteopathy and the sciences fundamental to it will form a valuable part of our literature. The first volume is on "Principles" and will be reviewed later. Its price will be \$4.50 prepaid. Published by the author.

* * *

FOR SALE—A \$3000 practice in a wealthy town of 3000 inhabitants. Address X Y Z, care of Journal of Osteopathy.

Letters to the Editor.

(In this department we will be glad to publish for any osteopathic physician now in practice, communications on any osteopathic subject, except personal attacks and articles which condemn but offer no remedy).

* * *

A REVIEW OF RECENT CANCER RESEARCH.

G. A. STILL, M. S., M. D., D. O., KIRKSVILLE, MO.

(Professor of Pathology, A. S. O.)

In the last four numbers of the Journal of the A. O. A. there has appeared a series of articles on "Cancer," which in my opinion more than justifies the contention of the author in the fourth paragraph of the first article that "his views are radically different from any other views." It is the only contention in the four articles with which I can agree from either an osteopathic, allopathic, or scientific standpoint, and if these articles represent modern osteopathy, I have overlooked a great deal in studying the subject. At the request of the graduates of four different existing colleges of osteopathy, the following criticisms are presented, and if in them there appear any statements which can be construed as "Personalities," kindly leave them out.

From a purely scientific standpoint, I object to the articles for the following reasons: First, the different definitions given for "Cancer" are incorrect, confusing and in some cases absolutely contradict each other, even in the same paragraph. Second, in spite of the statement in paragraph four, of the first article that no "Theories" or "Opinions" were to be followed, the entire paper is based mainly on theories of etiology, long ago exploded and most all originating from pseudo-scientific medical men of little or no reputation, many of the theories being absolutely opposed to each other and none of them proved. Third, the diagnosis is claimed to have been made in many of the seventy-eight cases cited by "Cancer experts," but in all of them the startling assertion is made that "The diagnosis was positively confirmed by the blood tests." The blood test described as "positively proving cancer" is of course ridiculous to any pathologist and one of the cells described is a normal histologic element of the normal blood. (See later).

Fourth, any series of cures based on such diagnosis, such ideas of etiology and pathology and with such definition must be open to question. Fifth, the "Antidotal Treatment" question, Is Homeopathy the latest Osteopathic discovery?

I will briefly discuss these five objections in order. Definitions: The author uses several definitions of "Cancer" as follows: (Page 249, March Journal.) "I use the term cancer in the broad sense to include all growths that tend to progress by insidious diffusion, starting in a localized nidus of some kind, back of which lies the true etiology, growth takes place around, in and towards this centre, so that a concentrated new formation of a vitiated and destructive type results, with vitiated metabolic processes and resultant vitiated assimilation products." Admitting momentarily that such a definition applies to what is generally called cancer it must certainly also include the infectious new growths of known etiology such as tubercular and syphilitic granulomata, leprosy, blastomycosis and innumerable other infections.

Page 251, "Cancer represents a malignant growth, involving the change of structure of an organ or tissue, in the dissociation or separation of the normal histologic cell structure, involving as it is claimed in pathology, a return to the simple continually recurring embryonal state of regenerating structure." Page 252, line 19-20, "Its chief characteristic seems to be hyperplasia of no specific type, there being a very rapid proliferation of epithelial tissue." This definition of course, excludes all malignant connective tissue growths although the next sentence copied from another author divides them into epithelial or carcinomatous and connective tissue or sarcomatous although the quotation itself is faulty in that it limits carcinomas to the epithelium of the epiblast and hypoblast while any pathologist knows that the mesoblastic epithelium also readily produces these growths. Page 251 says "Cancer represents a general condition of the system before the particular localized condition develops." While page 252 states that "The malignant growth is at first purely local and benign in character."

These things are confusing to the average reader but the matter is simplified in the summary by the statements that "Cancer is a nervous condition in which degenerated bioplasm exudes from the nuclei of trophic nerve cells into the cerebro-spinal fluid, thence to the lymph stream, thence to the blood and finally from a nidus in the tissue around, in, and toward which the growth takes place." Admitting any of the preceding definitions, the etiology and diagnosis which follow would still be open to question, but let us momentarily consider what scientists agree really are "Cancers."

The term itself is like the terms, "piles," "child-bed fever," "grocer's itch," "misery in the bowels," etc., not well used in a scientific article, especially one where the author is so ultra-scientific as to be able to detect the typical toxic reactions of cancer of the uterus in the ear-wax. (See case two of the series).

Of course, if it were not for the confusing definition in this article any practitioner would understand that "Cancer" referred to malignant epithelial neoplasms and that it excluded infectious granulomata and that, by usage, it might include sarcomas but the many ways it is used, even in the standard dictionaries makes a concise definition of some sort necessary. Dorland for instance, mentions under "Cancer" amongst others the following, Aran's green C., Black C., Lobsteins C., and Water C., the first three being sarcomas and the latter referring to gangrenous stomatitis, and is not even a tumor. True, to the lay mind, they present certain malignant characters that are in a way similar. Now if we admit all malignant appearing processes to be "Cancers" then we can hardly diagnose cancers by specific "Blood findings" and the treatment is no more similar than the treatments for piles and pneumonia are similar. That infections, granulomas, ulcers, etc., have been cured since the dawn of history we admit and that commonly "Cancer Experts" cure simple folks of simple ulcers or even syphilitic and tubercular ulcers which "have been diagnosed cancers," with vienna paste and such caustics or even "antidotes," I know, but even the subspecialists, though they misdiagnose cases, and call many things cancer, have in mind that it really is distinct and separate from syphilis, eczema, etc., in reality that it has a well defined class.

Pathologists have found certain characters that positively differentiate malignant tumors from other enlargements and also divide them into two distinct classes and these further into their varieties and subvarieties which are discussed in any text book on oncology or any chapter on malignant tumors in the more recent works on pathology. Bland Sutton is probably the best book for the average busy reader,

but these differential tables and classifications are too well known to the well posted osteopath to need discussion, and anyhow the following points of etiology are worthy more serious attention. A man named Dean Swift once wrote a take-off on the fallacies of his day and called the story "Gulliver's Travels," I refer the reader to this work for the origin of the sage theory that eating salt causes cancers and it is a fact that this etiologic factor is presented here with all the assumption and proofs that more modern Deans have used. "Drinking limewater," living a "High strung life," "Being civilized," "Getting cured of tuberculosis," "Having had la grippe in Chicago," and such statements, all of which are gravely presented in these articles, are bad enough but the limit is reached when an osteopathic public is asked to read an advertisement by Merck & Co., for a patent medicine called, "Idophin" and another by Parke Davis for a patent medicine called "Odalbin," these advertisements being sagely quoted on page 321 of the Journal of the A. O. A. to support the "Antidotal Treatment" because "Nutrition will take care of those poisons on the surface of the tissues and circulation but not those imbedded in the cells or dynamically bound up in the bioplasm." In other words drugs or "Antidotes" are needed as the author says to liberate the junk that is hidden in the bioplasm and he claims by the aid of "Antidotes," to have liberated "Cocaine, opiates, etc., many years after they were used." I am sure that all the average reader has to do, to disbelieve this collection of etiologic and therapeutic notes is to read them.

Now as to diagnosis. I certainly want to give the author full credit for discovering that the blood is acid in cases of cancer. Oftentimes before this era, chemists have found a reduced alkalinity of the blood but neither in cancer nor any other condition has any previous author been struck with the frequency of an acid reaction in human blood, and its being a test for cancer is worthy of more than passing notice as is also the statement that the microscopic blood test for cancer is the finding of "Poikilocytes, nucleated red corpuscles and unripe polynuclear cells which show a single dimly staining oral nucleus and a protoplasm which stains darker than normal." The reader who is a little rusty on poikilocytes, erythroblasts, etc., has only to consult a text on the blood or any reference to the blood finding in cancer to see that no findings like those quoted nor any other, as yet known blood test, is in any way pathognomonic of cancer.

The same thing might be said of the typical and characteristic toxic substances in the discharge.

It may be urged that "discoveries may have been made here and that these ideas of etiology, pathology, diagnosis, etc., are true in spite of the fact that they are not generally accepted ideas because many great discoveries have been opposite to existing ideas."

It is undoubtedly true that most discoveries were opposed to some existing notions but it lacks a long ways of proving anything to show that the opinions are "radically different from any other ideas." One has to have some other claim to being right except the fact that he doesn't agree with anyone else and to confirm the diagnosis of cancer by tests which all other pathologists find not conclusive and in no-wise diagnostic is far from proof.

For fear that some may be misled by various statements and references as to "Antidotal and other features in the cause and treatment of cancer," I will before closing briefly discuss the most promising one which is the wonderful specific cure for cancer "Trypsin." Most of page 250 is devoted to the presentation of this theory and amongst other uncriticised statements which leave the reader with the idea that

they are accepted, is this, "It seems more than probable that in trypsin has been discovered for the cancer cell that specific poison which must exist for every cell" and we are cited without comment for proof of this to the Journal of the American Medical Association for March 10th and December 15th, 1906. Now let me conclude by quoting from one of these very citations. The issue of March 10th gives the following and the last sentence in it is, it seems to me, very applicable to a series of 78 case reports published in the June Journal of the A. O. A.

"THE COMING CONQUEST OF CANCER."

"The interesting embryologic studies of Beard and his deductions therefrom, anent cancer, referred to above, have been utilized as the basis for more or less sensational and overdrawn statements in the lay press. An article in Harper's Weekly, by C. W. Saleeby, M. D., concludes with the following announcement: "It seems more than probable that in trypsin has been discovered, for the cancer cell, that specific poison which must exist for every cell. Only the philosophic few could have guessed for a moment that Dr. Beard's long and famous researches would ever enable him—as they would, indeed, appear to have enabled him—to place in the hands of the physicians a veritable cure for cancer."

Now, do the facts at hand really justify this startling conclusion? Beard holds that in fishes aberrant germ cells exist in all parts of the body, and reviews in a somewhat more definite and modified form Conheim's hypothesis of the origin of tumors, more particularly cancer, in persistent embryonal cells. In fish the cells in question disappear as the pancreas assumes its physiologic activity, hence the suggestion already acted on to use trypsin in human cancer. As yet, however, we have no really conclusive evidence that trypsin has any decisive effect on human cancer. It is not claimed, even by Saleeby, that trypsin has been shown to prevent the return of cancer after operative removal. There is no record of the cure of human cancer by trypsin. In experimental cancer of mice trypsin is said to cause the tumor cells to die and to crumble away, but it is plain that many more successful experiments are necessary at the hands of various investigators before it can be concluded definitely that trypsin cures cancer in mice.

We see that while the results obtained by Beard may warrant the continued study of the effects of trypsin on cancer, there is at present no basis whatsoever for the inference that a veritable cure for human cancer has been discovered. UNDER THESE CIRCUMSTANCES IT WOULD HAVE BEEN MORE PRUDENT, TO SAY THE LEAST, ON THE PART OF SALEEBY TO HAVE REFRAINED FROM MAKING STATEMENTS IN PUBLIC PRINT THAT ARE NOT READILY DIFFERENTIATED FROM THOSE 'PREMATURE, OUTRAGEOUS, AND, INDEED, BRUTALLY CRUEL ANNOUNCEMENTS WHICH CONSTANTLY INFEST THE PRESS,' AND WHICH HE HIMSELF CONDEMNNS."

(Three interesting letters crowded out.—Ed.)

* * *

BORN.

Born—To Dr. and Mrs. J. W. Barker, Savanna, Ill., July 9th, a son, James Gerald.

Born—To Dr. and Mrs. W. G. Sutherland, Mapleton, Minn., July 3, 1907, a daughter.

* * *

FOR SALE—Good practice, with office furniture; in a beautiful growing city, in Southern California. Two hours ride from Los Angeles. For particulars, address, Box 213, Corona, Calif.

THE A. O. A. CONVENTION.

To one who has never attended a national convention, it seems inexplicable that hard-working osteopaths will shut the doors on cash-laden patients, submit to cramped quarters in hot sleepers and worse inconveniences in hotter "summer" hotels, traveling across a continent just for a few days gathering. Yet they do, year after year. Would you know why, the best way is to go and see. Going once, you will go again. The following is what will greet you if you go this time.

MONDAY, AUGUST 26.

9:30 a. m.

Call to Order.

Invocation.

Response—C. W. Proctor.

Address of Welcome.

President's Address.

11:00 a. m.-1:00 p. m.

DEMONSTRATIONS OF TECHNIC—

- (1) Cervical Region, F. A. Turfler.
- (2) Thoracic Region, Geo. Helmer.

SECTION IN PRACTICE—

- Kendall L. Achorn, President.
- (1) Pulmonary Tuberculosis, F. D. Parker.
 - (2) Malaria, Ellen B. Ligon.
 - (3) Chronic Valvular Disease, E. C. White.

2:30 p. m.—OPEN PARLIAMENT—Topic, Diseases of Children. Conducted by Ella D. Still.

TUESDAY, AUGUST 27.

9:00-11:00 a. m.

SECTION IN RESEARCH—

Dain L. Tasker, President.

- (1) Sectional Anatomy, A. Still Craig.
- (2) Some Visceral Reflexes, Louisa Burns.
- (3) Experimental Pathology, H. W. Glascock.

11:00 a. m.-1:00 p. m.

SECTION IN GYNECOLOGY (CONTINUED WEDNESDAY,—

Edythe F. Ashmore, President.

- (1) The Menopause and Its Treatment, Marie Neely Adsit.
- (2) Prolapsus Uteri and Its Treatment, Eliza Edwards.
- (3) Pelvic Tumors Requiring Surgical Interference, George A. Still.

2:30 p. m.

OPEN PARLIAMENT—

Topic: Diseases of the Respiratory System. Conducted by C. C. Teall.

8:00 p. m.—Open Session of the Associated Colleges of Osteopathy.

SECTION II.

DEMONSTRATIONS OF TECHNIC (CONCLUDED,—

- (3) Lumbar Region, J. H. Sullivan.
- (4) Sacrum Innominate and Coccyx, W. W. Steele.

SECTION IN PRACTICE—CLINICAL DEMONSTRATIONS—

- (4) Eczema, W. A. Merkley.
- (5) Bright's Disease, R. K. Smith.
- (6) Chronic Prostatitis, F. P. Millard.

OPEN PARLIAMENT—

Topic: Diseases of the Digestive System. Conducted by C. E. Achorn.

WEDNESDAY, AUGUST 28.

9:00 a. m.-1:00 p. m.

Report of Treasurer.

Report of Board of Trustees.

- (a) Report of Committee on Education.
- (b) Report of Committee on Legislation.
- (c) Report of Committee on Publication.
- (d) Report of Committee on Endowment.
- (e) Report of Board of Regents.

2:30 p. m.

SECTION IN GYNECOLOGY (CONCLUDED)— SECTION IN PRACTICE—CLINICAL DEMONSTRATIONS (CONTINUED AT 11 TOMORROW)—

- (4) Versions of Uterus and Treatment, Percy H. Woodall.
- (5) Flexions of Uterus and Treatment, Frances A. Dana.
- (6) Lateral Displacement of Uterus and Treatment, Julia Foster.
- (7) Neuritis, Charles Hazzard.
- (8) Epilepsy, E. W. Cully.
- (9) Locomotor Ataxia, Jerome Knowles.

8:00 p. m.—Grand Ball. Hezzie Carter Purdom Moore, Floor Manager.

THURSDAY, AUGUST 29.

9:00-11:00 a. m.

SECTION IN OBSTETRICS (CONTINUED TOMORROW MORNING,)— SECTION IN RESEARCH (CONCLUDED)—

Marion E. Clark, President. (4) The Osteopathic Pathology of the Extra Spinal Cell and Its Relation to Treatment, T. J. Ruddy.

- Topic: I. Antepartum Treatment.
- (1) Spinal: When Indicated; Where and How Administered, E. H. Cosner.
 - (2) Stomach: Diet, Emesis, Treatment of Hyperemesis Gravidarum, R. C. Dugan.
 - (3) Affections of Lower Limbs, Innominates, Etc. (Including Varicose Vein, Sciatica, "Stitch in Back"), E. R. Proctor.
 - (5) Epithelial Invasions of Connective Tissues, C. A. Whiting.
 - (6) Graphic Representations of Spinal Curvatures, H. F. Goetz.

(3) Affections of Lower Limbs, Innominates, Etc. (Including Varicose Vein, Sciatica, "Stitch in Back"), E. R. Proctor.

11:00 a. m.-1:00 p. m.

(Clinical Demonstrations Continued.)

SECTION I.

OSTEOPATHIC ORTHOPEDICS—

- (10) Scoliosis, H. W. Forbes.
- (11) Pott's Disease, Geo. Laughlin.
- (12) Flat Foot, F. E. Moore.

2:30 p. m.—Election of Officers, and other business.

8:00 p. m.—Alumni and Class Meetings.

SECTION II.

- (13) Constipation, C. W. Young.
- (15) Neurasthenia, J. A. DeTienne.
- (16) Rheumatism, G. M. Smith.

FRIDAY, AUGUST 30.

9:00-11:00 a. m.

SECTION IN OBSTETRICS (CONCLUDED)—SECTION IN PRACTICE—CAUSES AND TREAT

(4) Bathing: When Indicated, and Kind of Bath. Why? Marie Neely Adsit. (1) The Osteopathic Lesions.

(5) Bowels: Constipation, Diarrhea, Hemorrhoids, H. C. Maxwell. (2) Headaches Due to Pelvic Disorders.

Management of a Case of Normal Labor, Marion E. Clark. (3) Headaches Due to Digestive Disorders.

11:00 a. m.-12:30 p. m.—Section III, Open Parliament. (4) Headaches Due to Eye Strain.

Topic: Some Acute Conditions. Conducted by O. J. Snyder.

2:00 p. m.—Unfinished business.

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Associations.

DENVER OSTEOPATHIC ASSOCIATION.

The Denver Osteopathic Association gave a very delightful one day outing to its members and friends Saturday, July 13th, 1907. The program committee consisting of Dr. E. C. Bass, chairman; Dr. Cara S. Richards and Dr. M. A. Bolles and with the aid of the entertainment committee, Dr. N. H. Bolles, chairman; Dr. M. A. Ellis and Dr. R. M. Jones decided that our regular monthly meeting at the Bown Palace Hotel for July at least should be dispensed with and a holiday planned for the mountain-rally. You eastern folks get more good of these Rocky mountains than we do. For when you do come to Denver, you take your time and see the beauties of our mountain scenery and we know they are here and plan to see them sometimes—and that sometime is slow coming—We Denver osteopaths have determined to see the beauties of our own state—on the little-at-a-time plan.

Our meeting was such a grand success that a number of the osteopaths asked the committee to arrange another day in August of this year and not wait for another year. One of the difficulties of the osteopaths and our state and city associations is a lack of close organization and a better understanding among the members of our profession.

Our school prejudices must give away to the broader and grander idea of a greater osteopathy. Many said to me, "well the trip to-day has served to bring us all nearer together than all the meetings of the past year." The doctor with the big practice mingled with the beginner and ideas were exchanged which will help the young practitioner to avoid the shoals of failure in starting a successful practice. The big (I ?) was relegated to the rear and all met on the common ground of good fellowship with a general feeling that we had advanced our science by coming together. There were nineteen osteopaths of our thirty-five in Denver present, others were detained on account of acute practice, but were with us in spirit I assure you. Those present were Drs. Stauffer, Ellis, Robinson, Sanford, Bartlett, Reid, Powell & Powell, Bush, Bailey, Bass, Bolles & Bolles, Richards and son, Dr. Vere Richards, Westendorf, McClain, Hilton, and Perrin and our friends came to the number of 1225.

Yours,

GEO. W. PERRIN.

MAINE OSTEOPATHS MEET.

The Maine Osteopathic Association held its quarterly meeting at the Somerset Saturday afternoon and evening, July 15th. Those present were: Dr. Lillian P. Wentworth, Augusta, Me.; Dr. Florence A. Covey, Portland, Me.; Dr. Sophronia T. Rosebrook, Portland, Me.; Dr. Viola D. Howe, Portland, Me.; Dr. D. Wendell Coburn, Portland, Me.; Dr. George H. Tuttle, Portland, Me.; Dr. Mary Warren Day, Portland, Me.; Dr. Ralph H. Williams, Rochester, N. Y.; Dr. Elizabeth B. Frame, Philadelphia, Pa.; Mrs. George H. Tuttle, Portland, Me.; Mr. Whibley, Portland, Me.

The afternoon meeting was devoted to business at which session they elected Dr. Lillian P. Wentworth of Augusta, Me., as delegate to the national osteopathic convention to be held at Norfolk, Va., beginning on August 26th and closing on August 30th.

At six o'clock the members of the association and invited guests had dinner at the Columbia.

Dr. Ralph H. Williams of Rochester, N. Y., member of the examining board of the State of New York, conducted a clinic at the evening session. A discussion of the clinic cases occupied the remainder of the session.

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CALIFORNIA OSTEOPATHIC ASSOCIATION.

The Osteopathic Association of the State of California held its sixth annual meeting at Oakland, June 28-29, 1907. The program was carried out as arranged by the committees, except some changes made necessary by absentees.

It was a source of regret that Dr. J. Martin Littlejohn was unable to be with us in person Friday evening, although he kindly forwarded his paper. A Symposium on Innominate lesions with practical illustrations was substituted.

Instead of the elaborate banquet scheduled for Saturday evening, the convention in a body attended the Alcazar Theater, in San Francisco where the osteopathic play, "Mrs. Leffingwell's Boots" was the attraction.

The annual dues were increased from \$1.00 to \$2.50. This includes the subscription to 'The Western Osteopath,' which was adopted as the official organ.

Drs. C. L. Whiting, Harry Forbes, and Effie E. York, were appointed delegates to the National convention to be held at Norfolk, Virginia, in August.

The officers for the coming year were elected as follows: President, W. W. Vanderburgh, San Francisco; first vice-president, Minerva K. Chappell, Fresno; second vice-president, Lena Cresswell, San Diego; secretary, Effie E. York, San Francisco; treasurer, Lester R. Daniels, Sacramento. Trustees: Isaac Burke, San Francisco; I. D. Cooper, San Francisco; D. C. Farnham, Oakland; J. R. Patterson, Pasadena; J. C. Rule, Stockton.

One regret was common, that two days made too short a time to accomplish much and suggestions were made to have a three days' session next year.

EFFIE E. YORK, Secretary.

* * *

PENNSYLVANIA OSTEOPATHIC ASSOCIATION.

The eighth annual convention of the Pennsylvania Osteopathic Association was held in the parlors of the Continental Hotel at Philadelphia, Friday and Saturday, June 28th and 29th.

We are pleased to say that this was one of the largest, most interesting and enthusiastic conventions ever held by this association, the whole state being well

represented. Each of the three sessions was largely attended and every number on the program contained items of great interest. The clinics were especially practical and interesting. The review of the past legislative campaign was received with enthusiasm, and the utmost confidence is felt that at the next session of the legislature we can not fail to obtain a law which will be entirely independent of the medical profession.

PROGRAM.

FRIDAY EVENING—Call to order 8:00 o'clock. Invocation, Rev. Dr. E. M. Coffee. Address, Hon. A. B. Eaton. Address, Hon. John Connell. Clinics, "Demonstrating the Osteopathic Technique in the Reduction of Dorsal and Cervical Lesions" by Dr. Geo. J. Helmer of New York. Discussion and Volunteer demonstrations.

SATURDAY MORNING—Call to order 9:00 o'clock. Invocation, Rev. Dr. E. M. Coffee. President's Address, "Medical Perversion of the Osteopathic Philosophy," by Dr. O. J. Snyder of Philadelphia, president P. O. A. Address, Dr. S. A. Ellis of Boston, president A. O. A. Address, Dr. Irene Harwood Ellis of Boston, late secretary A. O. A. Paper, "Some Suggestions in the Management of Cases of Uric Acid Diathesis" by Dr. Florence Brown Stafford, Pittsburg, Pa. Address, "Broader Education for Osteopaths," Dr. Chas. J. Muttart, of Philadelphia, vice-president P. O. A. Paper, (subject select), Dr. Wm. Rohacek of Greensburg, president W. P. O. A. Question Box—Answering of questions by volunteers. Fraternal luncheon at the Continental Hotel, at 1:00 o'clock.

SATURDAY AFTERNOON—Call to order 2:30 o'clock. Report of Officers and Committees including report upon the last legislative campaign. "The Hearing before the Governor" by Dr. Jane Scott of Philadelphia—(the only lady osteopath in attendance). Election of Officers. Explanation of the New York Law by Dr. Chas. Hazzard of New York. Clinics—Demonstrating some cases of Uric Acid Trouble and some cases of Disorders of the Feet by Dr. Charles Hazzard of New York.

At the afternoon session of Saturday the following officers were elected for the ensuing year:

President, Dr. O. J. Snyder, Philadelphia; vice-president, Dr. F. R. Heine, Pittsburg; secretary, Dr. J. Ivan Dufur, Philadelphia; treasurer, Dr. William Rohacek, Greensburg. Executive committee; Dr. O. J. Snyder, Philadelphia; Dr. J. Ivan Dufur, Philadelphia, Ex-officio; Dr. H. M. Vastine, Harrisburg; Dr. V. A. Hook, Wilkes-Barre; Dr. E. M. Downing, York.

Fraternally,

J. IVAN DUFUR, Secretary.

ARKANSAS ASSOCIATION.

A business meeting of the Arkansas State Osteopathic Association was held in the parlors of the Gleason Hotel, Little Rock, July second, meeting with the State Board of osteopathic Examiners.

Dr. C. L. Fagan of Stuttgart was appointed to revise the constitution and by-laws.

Officers for the ensuing year were elected: A. W. Berrow of Hot Springs was elected president to succeed C. E. Whitney of Little Rock, who has served continuously since the organization in 1902. C. L. Fagan, Stuttgart, first vice-president; J. C. Young, Jonesboro, second vice-president; F. H. Glenn Stuttgart, third vice-president.

A resolution was unanimously adopted and the officers of our association, instructed to take such steps as would be necessary, for the Arkansas Association to be affiliated or admitted to the Mississippi Valley Association, recently formed at Kirksville

It was decided to have a program at our next meeting and Drs. Kaiser, Fagan and Mohler to have charge of same.

Advisory matters pertaining to the State Board of Examiners were brought up and items of minor importance produced much discussion and the meeting adjourned—subject to call of its officers.

LILLIAN G. HIGINBOTHAM, D. O., Sec'y pro tem.

OREGON OSTEOPATHIC ASSOCIATION.

The Oregon Osteopathic Association met at Portland on June 21st, to confer with its newly appointed member on the Medical Board. The meeting was well attended and was in the nature of a celebration of our recent victory. Instructions were given by Dr. Moore in regard to our rights and privileges under the law. Applications for licenses must be in before July 25th.

Dr. Forbes of Los Angeles was present and discussed clinic cases and methods for correction of various lesions.

CENTRAL NEW YORK OSTEOPATHIC SOCIETY.

The members of the Central New York Osteopathic Society enjoyed a banquet at the Hotel Vanderbilt, Syracuse, N. Y., on the evening of June 22nd. The profession was well represented from Syracuse, Auburn and Oswego. After a delicious banquet was served, toasts were in order. Dr. H. L. Chiles acted as toastmaster. Dr. Albert Fisher responded to the toast, "Pioneers," in an interesting manner. Dr. Clara P. Beall made some pleasing remarks responding to the toast "The Ladies of The Profession." Several others present responded to "Reminiscences."

The next regular meeting of the society will be held the second Thursday in October.

E. W. TIFFANY, Secretary.

RESOLUTIONS.

Whereas, The sad and untimely death of our late president and much beloved Dr. Harry L. Brestol, which occurred April 12th, 1907, has occasioned deep sorrow in the hearts of all who knew him, and,

Whereas, Our society, the profession at large, and a large circle of patrons and friends are deprived of an efficient and zealous co-worker and physician, a man of sterling qualities and singularly strong character, one who possessed high ideals of life and of his profession, being steadfast in purpose, courageous, and sympathetic.

Be it Resolved, That out of respect to the memory of the deceased, his earnest and devoted services, his tireless labors and sacrifices, his matchless loyalty in promoting the best interests of the profession, we the members of The Central New York Osteopathic Society assembled this 22nd day of June, 1907, herewith express our sorrow and extend to the bereaved family our sincere sympathy.

Be it resolved, That a copy of these resolutions be sent to the bereaved wife of our departed brother, to the Osteopathic Journals and that they be spread upon the minutes of our society.

E. W. TIFFANY,

Committee: M. E. LAWRENCE,
A. G. FRENCH.

WANTED—An osteopath or medical doctor to join me in running a sanitarium. They must have some capital. Address S. A. Richmond, 221 St. Marys street, San Antonio, Texas.

LETTER FROM DR. DeTIENNE OF NEW YORK REGARDING PSEUDO OSTEOPATHS OF NEW YORK STATE.

There is very little known of the pseudo-osteopaths. Before the passage of the law nothing was known of them. Since then however it is apparent that they are seeking to convince the department of education of the state that they are bona fide candidates for certificates to practice. The plan probably is to have the department recognize the correspondence schools from which they have severally graduated.

A week or two after the bill became a law there was a meeting held at which an organization was formed of the Brooklyn Pseudo's. The report of their meeting in the Eagle (Brooklyn) made it appear to the uninitiated that for the first time our people had gotten together to bring about means to put into operation the law recently made.

The fact is there is nothing for us to do, save satisfy the department of education upon these points, viz.;

1. Moral character—certified to by an osteopath in good standing, i. e., a legitimate graduate of a recognized school.
2. Photo—certified.
3. Diploma registered.
4. In practice in the state at passage of act and
5. Cheque of \$10.

Of course the Pseudo's can't get in by look or crook. No organization to which they may attach themselves can aid them. I am told the president of this so-called osteopathic organization in Brooklyn sought to have a leading Brooklyn osteopath to sign his certificate of moral character. He was refused to be sure. It shows the straits to which they are driven.

Our state officers have warned us against signing certificates of that character. We are alive to the fact that they are seeking to become licensed and of course shall not be a party to any attempt made by them.

Now as to the likelihood of the board flunking people—candidates for license I think there will be no trouble with any who have had a course of three years of nine months each and who shall meet requirements of the regents with regard to preliminary education.

Fraternally,

J. A. DeTIENNE.

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CERTIFICATES GRANTED TO PRACTICE IN OKLAHOMA.

The Oklahoma Osteopathic examining board held its semi-annual meeting at the office of Dr. J. A. Price in Guthrie, Okla., July 2nd.

The following applicants passed the required examination and were granted certificates to practice in Oklahoma:

Drs. G. W. Dinning, Chickasha; M. B. Bartly, Enid; Lula M. McKinney, Eureka Springs; W. R. German, Goodwin; Katherine E. Curtin, Lawton; Ira L. Mahaffey, South McAlester, I. T.; E. L. Kalleisch, Newton, Kans. H. E. Thompson, South McAlester, I. T.

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LIFE INSURANCE EXAMINERS, ATTENTION.

We desire the names and addresses, companies served and when appointed, of all osteopathic life insurance examiners.

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LOCATIONS OPEN.

Osteopaths desiring to locate at Nashville, Tenn., Red Oak, Ia., Alpa, Mich., will learn something to their interest by communicating with the Journal of Osteopathy.

Still National Osteopathic Museum, Kirksville, MO

PERSONAL WITH THE EDITOR.

The Old Doctor's Book Free. Have you on your shelves the first osteopathic text book by Dr. A. T. Still? If not, you have an excellent opportunity to place it there at no cost to yourself. By sending in three yearly subscriptions to The Journal, you will obtain this book free. By request of many, we will accept three years in advance as equivalent to a renewal and two new ones. Act now, while you have the chance.

* * *

New Graduates. Do you know of a new graduate locating; of any osteopath "Other Osteopaths." in practice whose name, for any reason, was omitted from or incorrectly given in the last A. O. A. directory? We will refund the postage on the letter informing us, if you desire.

* * *

Field Literature Given Free. To you who can write—write articles that will pull patients. Write them and send to us, and if we can use them, we will be glad to give you a supply of field literature free. Any we cannot use, we will return. Every article used will be paid for. Is that fair enough?

* * *

The Journal of Osteopathy. How did you like last number,—how does this one impress you? We received many complimentary letters, do you think we deserved them? Now let me ask of you a favor. To make a success, a Journal must be able to command the loyalty of its subscribers. We wish to ask that you recommend us to any of your friends, who may, perchance, not be subscribers. Then you who can write, prove it to by sending us tangible results and we will reimburse you with field literature or Journals of Osteopathy. May we count on your loyalty?

* * *

Are You Reading If so, do you not think it is a good number? The others to follow a "Sample Copy?" will be as good or better. We have sent this issue to some whom we have dropped for want of a "remittance;" to some whom we know only by reputation. We would like to meet all of you regularly each month; would you like to have us call?

* * *

The Osteopathic Journal, Vol. III, No. 2. No. 1 was a hummer, did you see a copy? We received "postal card inquiries, trial orders and contracts," so many that we were early compelled to announce "all sold out." Many were too late. No. 2 is also up to standard, having the following excellent articles:

The Rational Remedy, J. L. Holloway, M. S., D. O.

Osteopathy Proved—(Three illustrations), F. P. Young, A. B., M. D., D. O.

One Way We Gain Practitioners, B. F. Still.

A Plain Statement of Facts, G. A. Gamble, D. O.

By Way of Explanation, Adapted by the Editor.

Osteopathic Notes.

Ready for distribution now. We can mail 150 to addresses furnished by you, with your card in each copy, for \$5.00 per month, total charges, on yearly contract, \$6.00 for a single month, the higher price being made necessary by the cost of setting up and stereotyping your card. How many do you want, or would you rather make sure of service by sending us a contract?

PERSONALS.

Dr. Nettie Olds-Haight of Des Moines, Ia., is taking a rest at McKinney, Texas.

Miss Ada Burham of 1121 Birch St., Baraboo, Wis., is anxious that an osteopath should locate at that place.

Dr. Minnie E. Dawson, '00, of Detroit, Mich., was a visitor at the Journal office. Dr. Dawson was in charge of the Journal in '99-'00.

Dr. Julia M. Gladman of 1054 E. 75th St., Chicago, Ill., who has just finished a P. G. at the A. S. O., is spending the summer at Niagara-on-the-Lake, Ontario, Can.

Drs. S. C. Matthews and R. H. Beeman and families left on Saturday, June 29th, for Europe, where they are spending their vacation.

Dr. Frank Clyde Leavitt, 775 Boylston St., Boston, Mass., has decided to take a much needed rest from practice for an indefinite period. Dr. C. A. W. Howland will take charge of Dr. Leavitt's practice.

Drs. Crow & Crow have erected a new building at southwest corner of Second & Franklin Sts., Elkhart, Ind., which they have christened "The Osteopathic Home," and are now receiving their patients there. Drs. Crow & Crow are among the eminently successful practitioners of Indiana.

At the state Board examination held in Ohio recently Drs. Roy W. Sanburn of Akron, Jennie C. Gleason of Akron, Arthur E. Best of Mt. Sterling, Florence Rankin of Parrott, and Geo. W. Tebbetts of Toledo, graduates of the American School of Osteopathy, Kirksville, Mo., were successful candidates.

At the July meeting of the Wisconsin Board of Medical Examiners, Drs. Dalton, house physician, and Beaver, special nurse of the A. S. O. hospital, were licensed to practice in Wisconsin. Their location has not yet been definitely decided upon but will be one of the cities along the lake.

Col. E. F. Glenn of the Barracks at Columbus, O., who stirred up the Army surgeons to such a frenzy by inviting Dr. M. F. Hulett to deliver a lecture on "Care of the Health" is not at all awed by the majestic medics, but continues to investigate osteopathy and, through Dr. Hulett, has subscribed for the Journal.

Six years constant work without two days successive vacation, has induced Dr. Willard to desert his practice at Missoula, Mont., during August and he will camp out on the Pacific and receive adjustment in between times of Dr. Fassett. He says that ten days on the cars going clear to the east coast from the west coast is too much for him, so he chose the simple life instead of the complicated pleasures of Norfolk.

Dr. Dane L. Tasker, who was very active in the recent California legislative discussion, finds himself worn out by its demands and also by the work necessary to re-establish his practice after the neglect due to legislative work. He has accordingly decided to take a two months vacation beginning August 1st, and instead of going to the meeting at Norfolk, will "vegetate at the sea shore and in the mountains" until he feels rested. The profession at large does not appreciate sufficiently the sacrifice made by those of its members who are willing to forego the profits of their practice and overtax their strength that the other members may enjoy the privilege of legal standing.

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DIED.

Died—At St. Mary's Hospital, Quincy, Ill., July 4, 1907, Miss Anna Hawkinson.

Died—Mrs. Lizzie Heberer, '05, was accidentally drowned at Tacoma, Wash., July 18th. The particulars have not yet been received.

Died—Mrs. Anna M. Stablin, at Los Angeles, Calif., July 23. Interment at Los Angeles, where the late Dr. Stablin is interred. Deceased was a sister of Drs. G. J. Eckert of Cleveland, Ohio, and W. H. Eckert of St. Louis, Mo.

VISITORS.

The following osteopaths visited at the A. S. O. during the past month: Dr. H. E. Bailey of St. Louis, Mo., who brought a patient to the A. S. O. hospital for orthopedic surgical treatment; Dr. Louise M. Bagley, West Plains, Mo.; Dr. M. P. Browning, Macomb, Ill.; Dr. Minnie Dawson of Detroit, Mich.; Dr. E. J. Kampf of Ft. Wayne, Ind.; Dr. Herman Still, Trenton, N. J.; Dr. Lenia Eisiminger, Fillmore, Mo.; Dr. W. A. Wilcox, Waterbury, Conn.; Drs. Richard Pearl and Nettie F. Buckmaster, Lexington, Ky; J. M. Kibler, Staunton, Va.

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MARRIED.

Married—On Sunday, June 23rd, 1907, at the home of the bride's parents, Dr. C. A. Dodson of Edwardsville, Ill., and Miss Betty T. Pearce, daughter of Mr. and Mrs. Joseph B. Pearce of Alhambra, Ill.

Married—Dr. Mary E. Gordon of Wahoo, Nebr., to Mr. G. W. Graham of Lincoln, Nebr. Dr. Graham will continue the practice of her profession, at Lincoln.

Married—Dr. A. E. Wolfe of Falls City, Nebr., to Miss Ione Norton of Humboldt, Nebr., on June 29th, 1907.

Married—Dr. Eugene M. Casey of Binghampton, N. Y., and Dr. Edmire M. Cabana of Buff, N. Y., on June 26, 1907, in Enunciation Church, Buffalo.

Married—At Indianapolis, Ind., July 15th, Mr. N. G. Carpenter of Monte Vista, Colo., and Dr. Ida M. Fox of Springfield, Ill. They will reside at Monte Vista, Colo., where Mr. Carpenter has extensive mining interests.

Married—July 25th, at Missoula, Mont., Dr. Asa Willard and Miss Effie May Curfman. At home at Missoula, after Sept. 15th.

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LEGISLATIVE NEWS.

Nothing additional of especial interest occurred in legislative matters since the July issue, but two matters were omitted which deserve notice. The Texas law, as outlined, became effective July 12th and all osteopathic diplomas issued since July 9, 1901, operated as license. No board had been appointed at time of our going to press.

The homeopaths in session at Norfolk last month protested against the osteopaths and Christian Scientists practicing without passing the regular medical examinations. We do not understand why they dragged us into the resolution as in most all states we already pass the regular medic examinations a harder one of our own, and would like to do so in all states and would if the medical opposition were withdrawn.

* * *

Dr. Atzen desires us to state that the Nebraska law was introduced by the N. O. A. and not by the state medical board. It is expected to secure a law at the next session of the legislature.

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New York osteopaths have registered and secured their licenses. An explanation of the pseudo-osteopath meetings is given elsewhere in this issue.

* * *

Dr. John E. Veon, Bakersfield, Calif., contributes the following:

"In the Journal of Osteopathy for July the statement regarding the law of California that osteopathic physicians cannot prescribe drugs or practice surgery is made.

Evidently you have not read the law or else you read something into the law that is not there. The law is entirely silent as to those matters and in Sec. 17 it states distinctly that no discrimination shall be made between the different systems."

REMOVALS.

- Dr. L. D. Gass from Boulder, Colo., to Trenton, Mo.
 Dr. Adele Allison from Anaconda, Mont., to 792 Bryon St., Dallas, Tex.
 Dr. M. A. Smoot from Freeport, Ill., to Petersburg, Ill.
 Dr. Robert D. Cary, formerly at Bristol, Pa., after August 1st, 405 Easton Trust Co. Bldg., Easton, Pa.
 Dr. W. A. Gaylord from 5½ W. Broad, Columbus, O., to Kenton, O.
 T. I. Thomsen from Century Bldg., to 409 Evanston Bldg., Minneapolis, Minn.
 Dr. Ionia K. Wynne from Denison, Tex., to McKinney, Tex.
 Drs. W. S. and Mary T. Maddux from Fairfield, Ia., to Ft. Collins, Colo.
 Dr. Clarissa B. Tufts from Apartment 17 "The Columbia," to Apartment 1, "The Wyoming," Washington, D. C.
 Dr. J. D. Miller from 99 Beverly Ave., to 365 Buchurst Ave., Morgantown, W. Va.
 In the May Journal we mentioned Dr. W. G. Chappell as having removed from Centerville, Ia., to California, Mo., but since have learned that Dr. Chappell changed his mind and has located at Centralia, Mo.
 Dr. L. W. Wilkins from Augusta, Maine, to 2 Park Square, Room 87, Boston, Mass.
 Dr. Mary E. Graham, (nee Gordon) from Wahoo, Nebr., to 329 N. 16th St., Lincoln, Nebr.
 Dr. E. J. Kampf from Eureka Springs, Ark., to 119 W. Wayne St., Ft. Wayne, Ind.
 Dr. Thos. L. Lorbeer from Pomona, Calif., to Hammett, Calif.
 Dr. Joseph Hegyessy from Merced, Calif., to Grass Valley, Calif.
 Dr. Ambrose B. Floyd from 317 Norwood Ave., to 748 Ellicott Square, Buffalo, N. Y.
 Drs. R. H. and W. P. Dunnington of Philadelphia, Pa., announce that owing to alterations in their offices on the sixth floor of the Real Estate Trust Bldg., they will occupy suite 315 to 17 third floor of same building during July, August and September, after which they will return to their former offices.
 Dr. Frank Heyer from Cleveland, O., to 42 N. Brady St., DuBoise, Pa.
 Dr. Lena C. Corkill from Beatrice, Nebr., to Ord, Nebr.
 Dr. William C. Montague from Owensboro, Ky., to 317 Up. Sixth St., Evansville Ind.
 Dr. F. C. Davis from Hillsboro, Iowa, to Moravia, Ia.
 Drs. F. L. and Myrtle L. Ecker from Carthage, Mo., to Sarcoxie, Mo.

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LOCATIONS.

- Dr. Frank Baker of the American College of Osteopathic Medicine and Surgery, Chicago, at Geneva, Ill. He will have rooms in the Martin Blk.
 Dr. Charles E. Getchell of the A. S. O., '07, P. G. class, will locate at Red Lodge, Mont.
 Drs. Thos. H. and Dallas M. Spence of Paterson, N. J., have opened offices at 35-8 Mt. Morris Park W., corner of 124th St., New York City. The Doctors Spence will be at 717-19 E. 25th St., Paterson, N. J., Wednesday and Saturdays of each week.
 Dr. H. Wesley Mackie of the A. S. O., '07 P. G. class, will locate at 4104 St. Charles Ave., New Orleans, La.
 Dr. Paul W. Geddes has located at Suite 312 First National Bank Bldg., Shreveport, La.