

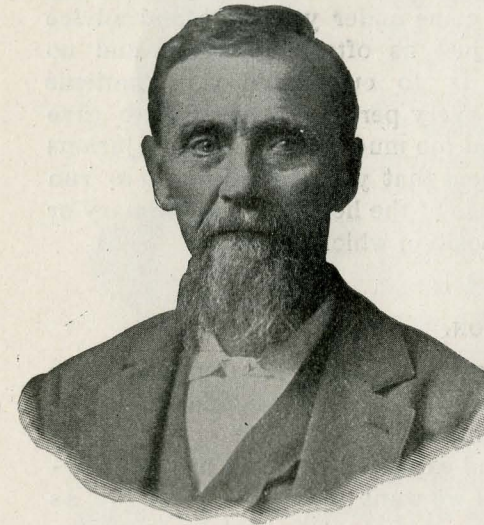
THE JOURNAL OF OSTEOPATHY.

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NO. 7.

I HAVE concluded to write an article on smallpox which will contain a history of the most deadly and loathesome disease that has ever visited the human family. It is my intention to give from the very best



authors on smallpox a carefully prepared description of how the disease is taken up by the human system and give its daily progressive steps from start to finish of smallpox. As I have come in contact and treated the disease and never taken it, have often been vaccinated without any effect, I believe that during the last twenty-five years, pondering upon the question of why I was exempt from the disease and vaccination, I have obtained truths and enough of them to come to the conclusion, that we have a more powerful germicide

than the germs of variola, which I will try and present in the JOURNAL in the January number, for the consideration of the readers, historians and philosophers of the world.

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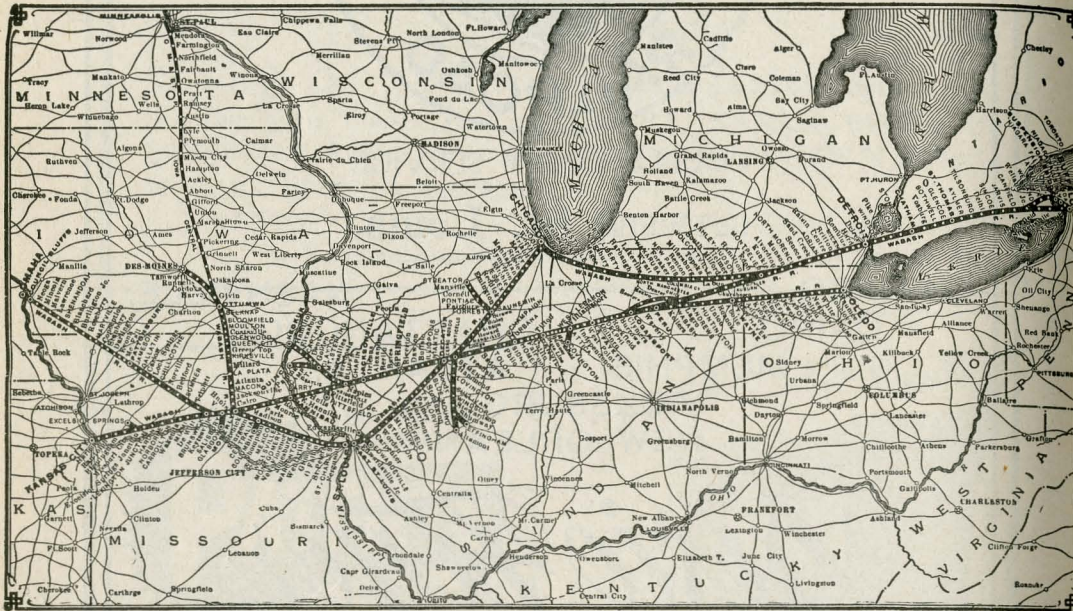
PATIENTS AND DOCTORS.

WHEN a patient enters my Infirmary for osteopathic treatment he should be told by the doctor who examines him about how soon to look for a change. If patient should be a case of general debility, a few physiological facts should be told in plain words that can be easily understood. Explain to the patient who has been medicated for months and years that he or she has a compound disease, composed of the disease itself and the effects of the drugs that have been taken and are still in the system.

Patiently listen to the patient's story, when first his health began to fail, and for what he had been treated and how long he was under drug treatment, what school the doctor was of; then after you have summed up

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the points that would be of value to you, tell the patient that you would like to examine the case, to learn if it was the result of a fall, strain or anything that had caused disturbance of the nerves by partial or complete dislocation of bones of the neck, spine, limbs or ribs. When finished the doctor can give a few similar cases and about how such cases terminated. Be patient with your patients, for in one way they are not all patient. They have been doctored out of patience long before they came here and your work is to get them well or on the mend, then you will have smiles from faces that you have given hope to by your work and skill.

Tell your patients to obey you and do as you direct and you will try and get them well. Tell them if they come under your care and advice that they must come and be treated just as often as you say and no oftener, or go home. Your business is to cure; tell your patients that you must be "boss" and not ask every person on the street to give them a treatment; tell your patients that too much treatment is injurious and tell them why; convince your patient that you are fully able to run the case, and you have the full confidence of the heads of the Infirmary or you would not occupy the responsible position which you hold.

* * *

EXPANSION.

NORTH AMERICA has just closed out a big political campaign. One of the questions was: shall we "expand" our commercial and other kinds of trade and pursuits or will we contract our business?

The vote was cast and counted and expansion carried by an overwhelming majority. Thus we have said we want to expand. Will we as osteopath students expand our knowledge of anatomy, physiology and the functions of all organs of life for four years to come or will we sleep like Rip Van Winkle for the next four years, and wake up and bore our eyes to see that while we slept, boys had grown to be men and villages to be large cities? I am proud to see that the students of our school have the very best of intellectual steel in their make-up; they are high up in all their classes, can kick foot balls sky-wards, 16 to 6, and I am sure they will make the best of score with all the games of head as well as foot. Our lady students are all expansionists, they are up in all their grades in all branches taught here and other places. I believe expansion is, has, and will be the everlasting watch-word for the A. S. O.

I cannot leave this most important subject of expansion without begging you with the greatest anguish of my soul to remember that all from the greatest to the least pupil, professor, sexton and all must expand all you possibly can on Thursday of this week, which will be the biggest expansion day of this year. I saw sixteen turkeys in one pen yesterday all for Thursday's expansion. Our gobbler is dead and the minister will be at our house Thursday. He is small, but can expand awfully. Amen.

A FEW THOUGHTS FOR THE PRACTITIONER.

CARL P. M'CONNELL, D. O., M. D., 57 WASHINGTON ST., CHICAGO.

ALL true physicians are prompted with but one desire, viz, to relieve suffering humanity, not only for the great personal satisfaction of helping others but for the general welfare of posterity. It is these inher-



ent qualities, the love of his work irrespective of remuneration, that sharply defines the dividing line between the man who has taken up medical work as a profession and the one who cares for nothing but what he sees in it in a business sense. Of course one must expect a livelihood out of a profession. His services should be paid for and not offered gratuitous where the afflicted are perfectly able to render value received; but there is a great difference between the work of a profession for its sake and a profession on purely a business basis. The one means a laudation of the professional respect, the other a prostitution.

The native ability one possesses for a certain work is generally conceded to be in direct proportion to the ultimate success he obtains. In other words, one's general average in a life work is a reliable guide to note in summing up those qualities pertaining to his success. Any one might be fairly successful in a certain line of work for a short time whether or not he had any liking for the work. But it requires the summing of the "ups and downs" of quite a period of time to be able to observe truly and balance carefully all points, for and against, the real success of the one at issue.

All, who have carefully observed the rise and growth of osteopathic practice, know full well that there are individuals in the field who will never make a success, simply because the inherent qualities so necessary for a reliable physician are lacking, or the love of material gain overshadows everything else. What prompted me to write this article was, not the hope of aiding or converting to other views those in the field for purely pecuniary reasons, but for the true osteopathic physician, who, we have repeatedly observed, is lacking a few details to round out his professional labors. To try to help the former is merely a waste of time. He probably thinks he knows it all, even if he does not think so, it is equal to the same for his ideal of any work is revenue only. The work of the latter will live after him, what he adds to the great whole of osteopathic knowledge will ever be an inspiration to whoever comes after.

As osteopathic physicians we should ever be careful what we say

about all other honest workers in the osteopathic field. There is a tendency among a few to underestimate the ability of those who have not graduated from the same college. They, apparently, desire to stand aloof from the graduates of any college except their own, and herald to the world that they alone can possibly be up to date and the only true apostles of the science. I say as a word of caution to such, you are the very apostles that had better watch out ultimately. If there is any advantage at present it will not always be thus. The time is rapidly approaching when each practitioner must stand upon his own merits unaided. Those who think they are alwise are very apt to soon find out that there are others just as bright if not brighter. Thus, as physicians representing the same school of healing we should be loyal to one another. We have plenty of work to do in carrying forward the development of our science to its legitimate plane, instead of promulgating petty and internal strife.

There are a certain few I have noticed, who have the ability to be successful practitioners, and, in fact, several are, who never read medical literature pertaining to their cases, but depend alone upon what they picked up at college and what experience has since taught them. It is needless to say such lack the development of the mind that characterizes the good judgment and carefulness of the physician. The rounding out of the physician has not been accomplished in their case, still they are fairly successful because in them the ability to diagnose and treat diseases is really inherent. They have the foundation for the making of most capable physicians, but they must realize that their college career was only to teach them how to study and where to seek to obtain knowledge.

DISEASE REACTIONS.

Undoubtedly, one of the first things observable by the practitioner is, that a patient suffering from a chronic disease rarely improves steadily from the first without having days that they feel blue and discouraged. In fact, I know of osteopathic physicians that would rather have their patients make improvement less slowly at first than to have them feel exceedingly well after the first few treatments; simply because, there is almost certain to be a reaction in a day or two, in which the patient thinks he is getting worse instead of better. The practitioner should anticipate these apparent set backs and inform the patient what to expect. I am well aware that these reactions have been a source of a great deal of worry on the part of the young practitioner, and if he be especially sympathetic it is liable to cause more than mere anxiety on his part.

Among the first things a physician should learn, no matter how enthusiastic he may be, is that no system of medicine is going to cure every case met with; and, especially, nearly all chronic cases will have their periods of "ups and downs" when being treated. However, the primary

point to observe is, whether or not the reaction is really a manifestation that the patient is steadily going down hill, or whether it means simply an irritated state of the present existing condition. And the only way one can tell is to be thoroughly conversant with the case.

It is well known to practitioners of various schools of medicine, that patients suffering from chronic ailments are apt many times to have periods of reaction during the course of treatment, and especially at the beginning of the course of treatment if the therapeutics applied is being beneficial. Now, it may seem almost paradoxical to some to note, that in many cases where the treatment applied is the correct one that the patient really feels worse at the beginning of the treatment. But this is especially true with osteopathic work in chronic diseases when there is an exaggeration of the symptoms after treatment; it is a very fair guide that the treatment applied is being given correctly to the source and cause of the trouble. And you can almost always be positive that the patient is going to be better.

The cause of this disease reaction or apparent set-back is not definitely known. In some few cases it is very likely due to an irritation of the existing cause of the trouble, as for instance, a certain derangement of the spinal column being irritated, as it necessarily is from treatment, is likely to further enhance those symptoms already dependent upon such abnormalities. Again, in other cases, from the fact that toxic materials are accumulative in the system, a treatment may have such an effect on the system as to stir up all effete material in the tissues, and, thus, on being eliminated would be the cause of more or less of an exaggerated condition of the already manifested symptoms. Whatever is the cause of the disease reaction, it is a well known fact that the patient is almost always sure to be better afterward. The progress of the disease is usually quite a general and steady one; and reactions should always be closely observed for it may mean a return of health to the patient, instead of a period of anxiety to both physician and patient.

STUDY YOUR CASES.

There is a tendency among a few osteopaths, as well as representatives of other schools of the healing art, to not sufficiently study their cases. They rely too much upon the too little knowledge they already possess. Such practitioners must be either lazy, or, else they have a very huge idea of their own resources. One of the most marvelous things representative of the latter class of individuals is the fact, that when he does not succeed in curing a case he will excuse that case with a wonderfully clear conscience, thinking because he could not cure the patient no one else can. I am, also, well aware there are practitioners who are extremely busy and really have very little time for study, but in all justice not only to themselves but to their patients, they should devote a little time to

reading medical literature bearing upon their cases. For, after all, books are but tools to work with and we should make good use of them. A library of well selected books, as to authority and covering the entire field of medicine, should be indispensable to every osteopathist. By this, I do not wish to be understood as proclaiming one cannot do good work without resorting to his books, for he can. But, I say, he cannot always do justice either to himself or his patients, if he is not able to use all tools and instruments that should be at his command in his chosen work.

The osteopathic practitioner prides himself upon the breadth and scope of his beloved science, and by virtue of his being a supposed broad and cultured man, it certainly is not consistent with his teachings when you enter his office and find only a single anatomy, and, possibly, one or two other books as a working library. Cases are continually arising where consultation is imperative; and at the present day, when the number of practitioners in a locality is many times limited, should we as administrators to suffering humanity rely only upon our own weak self? This is an age of progressive development and we cannot stand back and munch the same old bone of one year ago, let alone double and triple that time with some. Let us live up to what we are supposed to be, broad, cultured, progressive, scientific men and women.

We should certainly bear in mind that we owe a debt of gratitude to other schools of medicine, for it was through them that our comparatively perfected system of healing could be developed. We profit by their mistakes exactly in the same way that they have profited by the mistakes of their predecessors. There is a large amount of medical knowledge that is common ground, and this we must not usurp without regard to its origin and growth. This middle, this common knowledge, is where we can receive vast help of a most practical kind if we only keep awake when perusing various medical literature. Remember, the signs of the times in medical work all point to but one goal, viz., a drugless system of medicine. We are one step in advance, still there are many niches to be filled, and we must study our cases through a perusal of medical literature, as well as clinically, if we expect to hope to keep in the front ranks. If not, our present strong, firm foot-hold will soon be lost and we will then be relegated to a past decade.

EXPLAIN DISEASES TO PATIENTS.

Anyone who visits various practitioners in the field repeatedly observes, that certain osteopathists make it a point to carefully teach the patient the fundamental principles of osteopathy; while there are others who say nothing as to the nature of disease and its treatment by osteopathic methods. Even there is a tendency among some to clothe osteopathy with more or less mystery by leading, directly or indirectly, the patient to believe that, he, the osteopath, has some occult power. Now, we all know, or should know, that it is doing an injustice to both osteopathy

and ourselves to lead a patient to suspect there is mysticism in osteopathic workings. Remember, there is a certain class of individuals who take delight in believing in things apparently supernatural, and it is a disgrace for one to work upon their credulity.

What behooves the true osteopathic physician is to stop this pseudo-clothing of ancient barbarism and prove to the laymen what you really represent. We see too much that savors of the realm of the magician in the old schools of medicine, and every reputable osteopathic physician should take advantage of this fact in order not to fall into the same footsteps when pioneering osteopathic work.

Of course, to enlighten the people osteopathically is extremely hard work. All pioneer work is hard, and especially, to a certain extent, medical education, for the people have been "faked" so many times that they have become disgusted, more or less, with all medical work. Our work before the public is a matter of education; naturally, our harvest will be in direct proportion to the manner of sowing. When the public sees that an osteopath is trying to do honest work and lives up to his convictions the real trial is over. But there are many who, through pride or indolency, do not take the pains to enlighten and educate the people as to the methods and belief of the osteopathist.

As all know, our campaign is an educational one, and what better or truer method can we employ to further our cause than to properly teach our patients? Is not this the very way to reach the heart and brain of the sufferer? When a man is not sick, or anyone closely connected to him, and who is not interested in medical work, what cares he about systems of medicine? We must gain our reputation through our work, work that we personally do, and not through what someone else has done or is doing.

I say, we should take infinite pains and trouble in teaching every one who comes to our office what osteopathy is and how we treat disease. There is a fascination in osteopathy to the average person when they investigate its methods, simply because, the work is so reasonable and plausible that it appeals to their common sense. One can appreciate it because it is not surrounded with an air of mystery and intricacy.

Hence, I believe it is our duty to self and posterity to carefully instruct whoever comes under our charge in the elemental features of osteopathy. This will do more to place the science on a solid foundation than all other methods combined. It is the rational and natural method. It will not only dispel and clear away the untruths that our enemies attempt to weave about us, but it will aid materially in educating the world on the least generally understood subject—the human body.

THE LENGTH OF A TREATMENT.

To write about the length of a treatment seems almost absurd. Still, there is continually considerable discussion in regard to this. One indi-

vidual will claim that fifteen minutes is long enough to treat anyone. Another will say, especially if he is a little massage inclined, that one hour is none too long a time to treat the average patient.

One would naturally think after a little calm reasoning and observation, a treatment must not only vary as to character as well as length of procedure, if osteopathy is anything more than mere "rubbing." For a dentist to extract a tooth, does it require just so many minutes? Is a surgeon guided by the clock when amputating a limb? Of course, the length of time required to give an osteopathic treatment varies.

The treatment must necessarily vary according to the disease treated, according to the peculiarities of the patient, according to the rapidity of the osteopathic physician.

A like disease in two individuals, may, in the one case, be twice as severe as in the other; in fact, all graduations may be represented in a series of afflicted individuals. Here, necessarily, the length of treatment must vary. It might require five minutes to administer the proper treatment to A, while B, would need to be treated thirty minutes. Thus it is, one should be treated according to the ailment and its causes; time is secondary, in fact, it is not a factor in the problem of treatment. Do the work that is required, and the counting of time cannot be regarded.

The peculiarities of the individual being treated are to be considered. Where one person could stand any amount of work performed upon them, another becomes rapidly exhausted if care is not taken. Occasionally a patient is found where all that can be done at first is light inhibitory work along the spine. Later on, after gradually increasing the strength and length of the treatment, a very thorough treatment can be given. Thus, there are all graduations as to length of treatment owing to individual peculiarities. Again, some patients respond to treatment more readily than others. To accomplish a certain thing in two given cases might, in the one only require one half of the time that it would in the other. These represent only a few of the peculiarities of the patient that influence the length of treatments. A great many others might be given but it is hardly deemed necessary. The question is practically self-evident.

There is great variance in the skill of osteopaths. I am inclined to the belief that it takes much more skillful osteopathist, comparatively speaking, to obtain a certain amount of success than a physician of the old school. (This is comparing individual work, not systems of medicine.) To obtain real success osteopathically one cannot depend upon any set rules or trust to the luck of foreign agencies. He must strike out in unexplored territory and use as his guidance the unerring laws of nature. To interpret these laws is where arises the requirement of a balanced mind. Trusting to a routine treatment of so many minutes duration is following blind chance and no original individual effort is demanded. Hence, there necessarily must be vast differences in the nature and time of treatment given by osteopaths, exclusive of the fact that a treatment must vary as to time owing to an osteopathic physician being slow or rapid in manual dexterity.

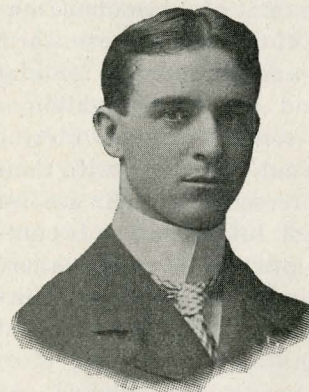
(TO BE CONTINUED.)

LEUCORRHEA.

Paper read before Atlas Club Nov. 23, 1900.

M. E. CLARK, D. O., PROF. OF GYNECOLOGY AND MEMBER OF CLINICAL STAFF, AMERICAN SCHOOL OF OSTEOPATHY.

LEUCORRHEA popularly called the whites is defined as a whitish muco-purulent discharge from the female genital tract. This discharge may come from either the vaginal walls or cervix uteri, hence the division into vaginal and uterine leucorrhoea. In character it varies from a slimy whitish mucus to yellowish desiccated lumps, their size depending upon the individual case.



Normally there is a secretion from uterus and vagina just enough in amount to moisten and lubricate the parts. This secretion is from glands. The cervix contains so many glands that it is practically one large gland. Its secretion is a clear, transparent glairy fluid like the white of an egg and alkaline in reaction. Glands have also been found in the vaginal walls which secrete a similar fluid but acid in

reaction. A disturbance of these secretions either in quality or increased quantity constitutes leucorrhoea. With these points in view we can better understand why leucorrhoea is so common. It is in most cases an apparently trivial disease and the patient hesitates to consult the physician in regard to it, and when a case is brought to his notice it is on account of some other trouble, leucorrhoea being only one of the symptoms.

In the beginning of this article I will state that leucorrhoea is due to one general cause, viz.: a congested condition of uterus or vaginal walls, and by the term congested I mean a venous stasis or rather an impaired venous return, or in some cases an impaired blood which is venous in character. Secretion depends on amount and quality of the blood supplying the gland. If there is an increase in quantity of arterial blood to the gland, normal secretion will be increased. This is exemplified in case of stimulation of the supposed vaso-dilator nerve to parotid gland, which is followed by increased flow of saliva. I do not think pathological changes will result from increased amount of pure blood, but if there is an increased amount of venous blood, secretion will be affected both as to amount and quality. In case of simple coryza there is congestion of mucous membrane of nasal fossa with the well known "running nose" resulting. In the condition of leucorrhoea there is an increased amount of venous blood which has collected from various causes and as a result of this disturbance secretion is affected. From this it follows that if we can discover the cause of congestion of the uterus or vagina, we have discovered the cause of the

leucorrhœa. I think my premises correct for I have collected considerable data along this line and I find in all one common cause, that is, congestion.

Among the causes producing this venous congestion I find the use of the warm water douche a common one. I heard a physician who was an authority on female diseases, state that 80 per cent of women had leucorrhœa and that 95 per cent were addicted to use of warm water injections, administered in most cases daily. Warm water dilates the vessels, hence a slowing of the blood current. From this there would result a lowered vitality of the blood with its increased amount of poisonous materials which go to make up a venous condition. If the use of these warm water douches is practiced, that is regularly and frequently for any length of time, loss of tonicity of vaginal walls and a flabby condition of pelvic floor, result. Following this weakened condition of the uterine supports there may be displacements and menstrual disorders with their attending evils. If douches are necessary, and I recommend their use for cleanliness sake, let the water be hot or cold, not lukewarm, as is commonly used. I remember a case in the Infirmary practice in which there was leucorrhœa with prolapsus that was brought on by the lukewarm injections, at least the case was cured by discontinuing the practice and giving a few osteopathic treatments.

If you meet with a case of leucorrhœa in a parous woman always examine for a laceration of cervix uteri. Laceration is more common than one would suppose unless there had been occasion to investigate the subject. The attending physician is either ignorant of the condition or will not acknowledge that it happened. In nearly every case, especially of primipara, that is delivered with aid of ergot, quinine or forceps, laceration will occur. This tear may assume the form of an erosion or ulceration.

The cervix is congested and inflamed from the constant irritation, and in cases of erosion there is localized putrefaction of blood. You can readily see the effect that this will have on the secretions of the cervix. Lymphatic circulation is deranged and leucorrhœa is only one of the many symptoms resulting from this condition. Not long since I was called to see a lady who was suffering from nervousness (hysterics,) neuralgia and amongst other things leucorrhœa. As it is my rule to make a local examination in such cases, especially in the multipara, I made one in this case and found an eroded cervix. By pulling the lip downward for the cervix was slightly everted, I found the real trouble to be a laceration. Sometimes these conditions demand surgical attention, but in a great many cases the condition can be cured by osteopathic treatment.

Vaginitis is given as a very common cause of leucorrhœa and the most common kind of vaginitis is puerperal vaginitis. Ask the women who comes to you complaining of whites how long they have had the disease and most of them will answer, since confinement. During pregnancy the vagina becomes more vascular and softer than in the unimpregnated

state. After delivery, involution of vagina as well as of uterus should take place. As long as there is interference with involution congestion exists, which usually terminates in leucorrhœa if not reduced within a short time often the walls are bruised or torn in delivery, or perineum lacerated, in either case there is tardy involution. I examined only a few days ago a typical case of puerperal vaginitis. Ergot was used in delivery, which I think was the cause of trouble. The walls were injected, red, easily bleeding and at one place secreting pus. This condition if not cured, precedes the chronic form of leucorrhœa.

There are other forms of vaginitis that might be named as causes of "whites," among which gonorrhœal vaginitis, especially the latent form may be mentioned.

A displaced uterus will produce congestion of itself and vaginal walls, and resulting from this condition I very frequently find leucorrhœa. The discharge is worse just after the menstrual period. Catching cold also increases the flow. The blood return from uterus and vagina are by way of uterine and ovarian veins which are located between the two layers of the broad ligaments. These ligaments are attached to sides of uterus and form a sort of floor to the pelvis. I once heard Dr. Still call these ligaments the pelvic diaphragm. If the uterus is displaced either in retro- or ante-deviation a certain amount of twisting of these ligaments occurs because the other end is fixed to pelvic bone. This leads to obstruction to free venous return and the blood is stagnated in the vascular uterus. In prolapsus there is weakening of vaginal walls and other structures comprised in the pelvic floor, also traction is brought to bear on the broad ligaments, which leads to congestion.

This congestion can also be produced by a lesion either in vertebral column or pelvic bones. A slipped ilium will cause disturbance of uterine circulation. One of the worst cases of menorrhagia that I ever treated, was caused by backward displacement of ilium. The slip was corrected and the hemorrhage ceased, which is good proof that it was the cause. This patient also had leucorrhœa between the menstrual periods on account of the chronic congested condition that existed. A slipped sacrum has a similar effect on uterus. Sometimes it is displaced backward or slipped forward or tilted, that is, lower part thrown one way and upper part in opposite direction. Again a slipped vertebra either in lower dorsal or lumbar region, will sometimes produce leucorrhœa. I recently treated a case of leucorrhœa in a little girl five years of age. The trouble started at the age of three. There was a constant discharge which would stain the linen. On examination I found a slip with soreness between fourth and fifth lumbar. This being an extraordinary case I watched it very closely. At the end of first week the discharge began to diminish in amount and at end of fourth week it had entirely disappeared. I localized the treatment, directing all the treatment at the point mentioned. Sometimes

leucorrhœa is due to a general debility, the result of stomach trouble or constitutional disease. I have seen cases follow an attack of typhoid fever. In cases dependent upon poor nutrition, I expect to find a lesion or weakening of middle dorsal region. The uterus and vagina share in the general weakness, circulation is poor and secretions are affected. Very frequently local treatments have been given which only exaggerate a condition like this.

The principal symptoms of leucorrhœa are backache, weakness and frequently menstrual troubles, especially too long and too copious menstruation. The discharge has, in most cases, a very disagreeable odor, and in some cases is almost unbearable. This discharge from its effect on the nervous system and from its color, has given rise to the belief amongst the laity that the white stuff is the spinal marrow which melts and escapes by way of genital tract. Nearly all abnormal discharges are classed under the one head, leucorrhœa, whether the color is white or slightly tinged with blood.

In the treatment of leucorrhœa let me emphasize one thing. Locate the cause and then treat that. It is one of the most common of disorders and one that will, in a great many cases, give the osteopath a great deal of trouble. Sometimes it is possible to cure the patient in a few treatments, while perhaps the next case will be very hard indeed to cure. In the first place look for the bony lesions. They are most important, since nearly all female troubles are caused by them. Again, examine the uterus if advisable, to locate its position. If there is a displacement, replace the uterus since it is likely to be the cause. Also treatment over vena cava will assist in relieving the congestion. If vaginitis exists, treat the vaginitis by correcting sacrum or coccyx and endeavor to restore normal circulation, for upon this depends a cure. In cases of leucorrhœa due to general debility, look for lesions in dorsal region. By correcting these assimilation is improved, glandular action regulated and secretions tend to become normal.



CHILLS,

C. L. RIDER, D. O., DEMONSTRATOR OF ANATOMY AND MEMBER OF CLINICAL STAFF OF AMERICAN SCHOOL OF OSTEOPATHY.

CHILLS, more properly called malarial fever, sometimes called fever and ague, and in some places the shakes, is the subject of this paper.

This condition is most prevalent in new countries where there are swampy lands, with stagnant water and sluggish streams, or any place in



which there is a large amount of decaying vegetation. In new countries where large tracts of lands are plowed up at one time, turning the accumulated growth of centuries under the soil, there is an extensive decomposition of organic products and malaria, generally prevails; in fact the name malaria means bad air due to vegetable decay, the air in such a locality is charged with noxious gases and a large number of the people get sick.

Now unfortunately, for us doctors, the people have been educated into the belief that the process of curing should be almost instantaneous, whereas nature, as a rule, does not proceed in that way, she brings about her changes more gradually by doing her work very thoroughly as she goes along.

Now let us suppose that two persons have been equally exposed for several weeks it may be to malarial poison; one of these persons does not take the disease while the other absorbs the poison and commences to shake. The question would then naturally arise in the minds of the thinking osteopaths why both persons being equally exposed did not yield to the disease. The answer is plain, the first person did not acquire the fever simply because the fluids of the body were in a healthy, normal state, and the functions of the liver, spleen, kidneys, pancreas and bowels were being properly performed. Although the poison entered the system of this person it was promptly and effectually eradicated by the excretory organs of the body.

Now let us see about the second case; this person yielded to poison, acquired the chills, and why? Because there was in his case impaired function of some of the organs of his body due to an *anatomical displacement* which in malarial fever we believe is found in most all cases in the region of the lower dorsal vertebrae.

This lesion in many cases may seem slight and may not be even recognized by any but experienced Osteopaths; may be a vertebra is slightly slipped anterior, posterior or laterally; it may be that a rib is slipped off its articulation and is pressing on the adjoining inter-costal nerve or more

commonly is simply a contraction of muscles on one or both sides of the spinal column in this region, which is interfering with the action of a nerve or nerves to the solar plexus; the abdominal viscera receiving its nerve force from this important plexus of nerves, cannot have perfect action with normal function and have its nerve force interfered with in the least.

So here in the lesion in the back we have the *true cause* of the condition, the introduction of the bad air being only the exciting cause, and it is on the true cause of the disease that the Osteopath must direct his work if he expects to effect a cure.

Let us illustrate: a patient has breathed a malarial poison into the lungs and through them it has entered into the circulation, and the liver and other organs have become congested by its presence.

What is the result? A disproportionate amount of blood will be called to these parts, especially the liver and the spleen; in other words the determination of the blood is strongly toward the internal organs and consequently the surface is chilled; the blood does not flow toward the skin but from it. That is to say the patient is having a chill.

This is nature's first step in the vital warfare, she is making an attack upon the enemy, she is storming his fortification.

Mark the next step. In a few moments or hours at the most the determination of blood is all the other way, it is now toward the skin, not from it; the patient is in a fever; this is the second stage of the attack and usually continues much longer than the chill.

Now follows the third or sweating stage; the patient is bathed in perspiration from head to foot; what is the object of all this? What is nature trying to do?

By going to the bedside of the patient the olfactories will assist us in solving the problem. There is a strong odor passing from the body of the patient; most of this comes through the skin although the lungs, kidneys and bowels are also on duty expelling poisonous matter. This stage of the attack may last several hours, and brings to the surface the first installment of morbid matter which is borne out of the vital domain by that great eradicator, the skin.

Nature is doing her work faithfully, through the skin and other excretory channels. Then she gives the patient a rest, which will be shorter or longer according to the strength of the patient.

The severity of the paroxysm will be in proportion to the amount of work to be done.

If there is much poison in the system the remedial effort will be more vigorous, but if the vitality of the patient is feeble, then the resting spells must of necessity be longer.

Some patients have a chill every day, (quotidian form), some every other day, (tertian form), but the extremely feeble may have it only every third day, (quartan form.)

We all know how hard the quartan form is to cure because the patient has so little strength to build upon and it takes time to build strength.

A patient suffering with this form of disease, if thoroughly inoculated with the poison, will take weeks to entirely cure.

A patient with the tertian form will recover more quickly and a patient with the quotidian form most rapidly of all.

We see therefore that according to nature's methods, there is first the congestive stage called the chill; then the fever, which is the second stage, and lastly there is the profuse perspiration, which is the third stage. These three stages constitute the paroxysm of malarial fever and during each recurrence of these paroxysms the system parts with a certain amount of malarial poison, and it is simply a matter of time when the system shall be purified and the patient get well.

I have known patients to get well anywhere from one day to two months, the recovery depending upon the amount of vitality of the patient and the quantity of poison within the system. Now suppose that during the chill stage, the friends of the patient should call in an osteopath, as is frequently done, what would be your treatment? Would you try and abort the chill and thereby hinder nature in her efforts to relieve the deeper structures of their load of poison? If you treated a patient in this way you would be doing the same thing that we often accuse the M. D.'s of doing, that is, treating the effect instead of the cause. Not only would you be treating the effect but you would be hindering nature in her faithful effort to break up the congestion of the malarial parasites.

Now suppose that you were called to treat a patient suffering with malaria in the second stage of the paroxysm, or fever stage. Would you treat to reduce the fever and thereby check the flow of poison-laden blood which is on its way to the surface of the body, to deliver to the skin its load of impurities that they may be excreted?

If you treated the patient in this manner you certainly would be retarding nature as well as retarding a cure.

I imagine I can hear the question asked by my brother and sister osteopath; how then would you recommend that a patient be treated suffering with malaria?

Well, to begin with, I would say that the patient should never be treated while in any stage of the paroxysm of the disease unless the symptoms were dangerously severe, and would then only strive to give temporary relief.

Nature is doing at this time just what we would seek to do; that is, eliminating the poison.

That patient should be attended between the paroxysms, not during them, and the object of the attending physician should be to remove the real cause; that is to say, correct the lesion, be it in the dorsal region or wherever it may be, and this once corrected good health will surely follow.

Nature however can be still further assisted:

First, by relaxing the tissues about the portal vein and abdominal aorta, thereby freeing up the circulation.

Second, by relaxing the tissues about the ureters and opening them freely; this will be of great service in the elimination of waste products through the kidneys.

Third, by giving particular attention to the liver and bowels, keeping the bowels freely open at all times.

Fourth, by keeping the patient well nourished on light but nutritious foods.

Fifth, by removing the patient, from the locality in which the chills were acquired to a higher point of ground, or if this be impracticable, to upstairs room in the same building; for it is a well known fact that the germs in malaria are always found near the earth's surface. If both these changes be impossible, make your patient as comfortable as possible in his own room, treat him as an intelligent Osteopath should, and success will surely be yours in spite of all obstacles.

DR. PATTERSON VISITS HIS ALMA MATER.

CHARLES L. RICHARDSON, JUNE, '01

ON Friday, Nov. 2d, it was the privilege of the students of the A. S. O. to listen to Dr. Henry E. Patterson, of Washington, D. C., the first secretary that the school ever had, and one of the most successful of its graduates.



Dr. Still introduced Dr. Patterson to the students in a complimentary little speech which both showed the high esteem entertained by the Old Doctor for his friend, and gave ample evidence of his appreciation of Dr. Patterson's services in the school and in the field.

Dr. Patterson, who had come to Kirksville on the sad errand of burying his mother, was quite overcome by the big demonstration given him by the students. He accused Dr. Charlie Still with having put up a job on him, he having been requested to "come over to the school" and there he found awaiting him a big audience which occupied both halls.

The crowd wanted to hear about the work in the field, so that was the

subject with which they were favored in an impromptu speech that riveted their attention for fifty minutes. The speaker in a short retrospect first told of his

INTRODUCTION TO OSTEOPATHY.

He had known Dr. Still for years and was a neighbor. It was gradually forced upon him that Dr. Still was doing what other doctors couldn't do, but Dr. Patterson had explained it to himself by the thought that Dr. Still was a gifted man. This was the beginning of the preparatory process through which it was necessary for him to go to recognize that the Old Doctor really had made and applied a discovery that would work a revolution in therapeutics. He was further impressed by the Old Doctor's ability to explain all he did. It was a challenge to the public, incontrovertible. And yet again was the speaker impressed by the fact, that when Dr. Still's sons were called in to help their father in his ever growing practice, they too could do what the Old Doctor did. But it was only when the first class was started, having in it Dr. A. G. Hildreth, a man in whose judgment Dr. Patterson knew he could rely implicitly, and this class, including Dr. Hildreth, could also do what the Stills were doing, that Dr. Patterson was convinced of the cold

PHILOSOPHY IN OSTEOPATHY,

and that it was not black art. Then it was, knowing that Dr. Still had something worth looking into, he entered the second class of A. S. O., contrary to the advice of friends and families, with some misgivings, but in the independent frame of mind born of opposition, and determined to prove the success of osteopathy to the very friends who opposed him.

Dr. Patterson told of the pride and pleasure with which he looks back on those early school days; he referred to the good times he had here, and gave all credit for the prosperity of the institution to Dr. Still and his sons. For himself he attributed much of his success to the good qualities in every way of the wife who helped him. He then referred to the sadness with which they went away from friends to start in private practice.

MEETING THE WORLD

said he, requires that each student shall face the individual circumstances wherever he may go, and think for himself. In his own case he had burned the bridges behind him, and had taken long term leases on offices in a business block contrary to the custom of Washington physicians, whose offices are at home. He referred to this to show the students that they must act on their own judgment even against local customs, sometimes, and he called attention to the need of greater backing on the part of a beginner in a large city, though the beginner need have no fear of the outcome if he can wait for results, for results are all that a man requires to get a practice.

As for the medical doctors, it is best, said Dr. Patterson, to say noth-

ing, on principle, and not to get above them, for it is unnecessary, there being no question as to where osteopathy is to light, no doubt as to the place to which

MEDICINE WILL BE RELEGATED

in the struggle. There is a revolution in progress in medicine and the tendency is toward the light, for the M. D.'s recognize the fact that medicine is not what it was supposed to be. The osteopath is in position to digest the medical lore with an osteopathic stomach but he should let medicine alone as a business not in keeping with his practice. A busy osteopath hasn't time to hunt for the spark of truth in the big medical superstructure, for he is nearer the truth than the M. D.'s.

Dr. Patterson advised some discretion in the taking of cases. The newly fledged osteopath cannot hope to know as much at the start as the Old Doctor, with his forty years of experience, laying aside all idea of Dr. Still's having any superior mental endowment. Dr. Patterson paid a tribute of praise to the Old Doctor who has done so much, who has created for us such a wonderful heritage. His sons, said he, and Dr. Hildreth, are good and can't be discounted, but

DR. STILL IS THE PEERLESS MAN.

No other schools need brag. They can never hope to equal him. Such blustering braggadocio is merest nonsense.

Don't curb your ideas, said Dr. Patterson, but get the underlying principles. Branch out, don't be a mere parrot in the matter of moves. No two cases are alike more than two faces or eyes. No two people or particular conditions are alike. Each case is to be taken separately as an individual, and dealt with by itself. Don't simply imitate, don't take moves as a finality. What are the conditions in a case and how best to rectify that particular case?—that is the only way to study moves. No two people work alike. Find out how to do a thing and then do it in your own way.

In reply to a question, Dr. Patterson advised the beginner to handle all acute cases he could get until he has enough chronics. The objection to acute business is that it takes a man away from the office. At acute business, though,

YOU CAN BEAT THE M. D.'S.

The speaker advised the practitioner to subordinate the financial end of the practice. If you cure, he said, money will come, and business, too, but don't cut prices to people who can afford to pay. Take your share of clinic patients, and a good big share, too. Some people never can be cured and you will fail in some cases, so only hold out as much hope as circumstances warrant. You can take any case on a right understanding. Don't promise a curc. Eliminate the word certainty; we all must die sometime; and don't take a case on the no cure no pay plan.

AS TO ADVERTISING.

Your best "ad" is a cured patient. Boom advertising brings business that doesn't stay. I never send out a circular unless on request of a friend or the man to whom it is sent; and I don't like the lecture idea that some advocate. It savors too much of mushroom methods. Some good results have been obtained by parlor talks to invited friends, but lecturing, as proposed, wouldn't do before an intelligent public. The osteopath, however, can afford to carry cards in the papers. Conditions differ in different localities. There can be no iron clad rules of ethics. Think it out for yourself.

Dr. Patterson closed by advising free examinations. He was applauded loudly.

The Old Doctor thanked Dr. Patterson on behalf of the students. He knew that the speaker tried to tell the truth. Then the Old Doctor modestly credited his sons with much of the ability that has made osteopathy the coming world wide science.

AN OSTEOPATHIC BOOMERANG.

C. O. GOODPASTURE, JUNE, '02

A FEW months ago a friend of mine feeling particularly interested in my welfare and knowing of my intention to take up the study of osteopathy, sent me the following clipping from the *Western Druggist*, with a short note in which he expressed the hope that I would change my plans and thus escape the "ridicule and persecution of the whole medical fraternity." Here is the clipping:

A MISSOURI DECISION ON OSTEOPATHY.

Following is the text of the decision rendered by a Missouri judge with respect to osteopathy in that state:

From the testimony in the case, which I have gone over accurately, it is my opinion that the defendant in this action, the state board of health, has simply performed its duty in refusing to recognize the said school or its diplomas, and to license its disciples or graduates to practice their art in this state.

Out of forty-four states in the union, it appears in evidence that only four or five states have authorized or allowed the disciples of osteopathy to practice their calling within their borders. * * *

The professors of the American School of Osteopathy repudiate and refuse to teach materia medica and therapeutics and chemistry and anatomy and physiology, and confine themselves alone to manipulation. * * * They refuse to divulge what their methods or modes of manipulatory treatment are. Sorcerers and witches used love philters, incantations and magic talismans for healing the sick, but refused to divulge what the ingredients were, or how the talisman acted.

It is singular indeed, that in an enlightened age like this such humbug schools and ignorant pretenders could find recognition by the laws of any state.

Let the injunction be dissolved and the petition be dismissed.

My first impression was that the so-called decision was a fake, pure and simple, as I could not believe that a judge, whose sworn duty it is to administer justice to his constituents, would so far depart from the truth as to make such a deliverance.

In reply to my friend I expressed surprise that he should regard seriously anything which a drug journal might have to say about osteopathy, for the same reason that he would not expect to find his own political views truly represented in the opposition press. I took up a number of statements contained in the decision, showed him their falsity and concluded by assuring him that instead of being disturbed by the article, it had served to strengthen my intentions.

I then undertook to locate the decision, and the following correspondence will show the result of that undertaking:

WASHINGTON, D. C., May 27, 1900.

EDITOR WESTERN DRUGGIST, CHICAGO, ILL.

Dear Sir:—Referring to an article on page 282, of this month's issue of your Journal, entitled "Missouri decision on Osteopathy" I beg to state that I have particular use for the details of that case, and will be extremely obliged if you will let me know who the judge was and where the case was tried. I may need a transcript of the court records in the case and would therefore like to have all the reference you can furnish me. Thanking you in advance for your trouble in the matter, I remain, very truly yours,
C. O. GOODPASTURE, 31 Florida Ave. Washington, D. C.

CHICAGO, JUNE 2, 1900.

C. O. GOODPASTURE, 31 Florida Ave., N. W. Washington, D. C.

Dear Sir:—The article on the Osteopathy decision about which you request information, was an abstract of an article from another journal. You can get full information in regard to the matter by addressing the Secretary of the Missouri State Board of Health, Jefferson City, Mo. Possibly you had better also communicate with Dr. B. C. Hyde, Secretary Missouri Medical Association, Kansas City, Mo. Very Truly Yours,
G. P. ENGELHARD & Co.

On June 5th, I made request on both officials mentioned, for any information they could furnish. The Secretary of the State Board of Health did not reply, so I wrote him again on June 19th. Following are their replies:

ST. LOUIS, MO., JUNE, 27, 1900.

MR. C. O. GOODPASTURE, Department Agriculture, Washington, D. C.

Dear Sir:—Replying to your favor of the 19th, will say that the Secretary of the State Board of Health of Missouri has none of the information that you seek. In fact, this is the first information that we have relative to this case at all, and have no knowledge of the Osteopaths officially, since they do not have to come before the State Board for examination, registration or anything else. They are in a class all by themselves, foot-loose and fancy free, and unless some of them get to giving medicine, which is illegal, I cannot see in what way they could be "jerked up."

I am very sorry not to be able to furnish you with the information you wish, for then I should have it, too, but this time you've caught me "out of soap." Very Respectfully,
L. C. MCELWEE, M. D., Secretary.

KANSAS CITY, MO. June 8, 1900.

DR. C. O. GOODPASTURE, Department Agriculture, Washington, D. C.

Dear Sir:—Yours of June 5th received, and contents duly noted. I am unable to give you the information you ask of me, but take pleasure in referring you to Dr. E. L. Priest, of Nevada, Mo, who I think, in all probability can give you the information you desire.

Yours, Very Truly,
B. C. HYDE, Rec. Sec., Mo. Med. Ass'n.

As suggested by Dr. Hyde I wrote on June 11th to Dr. E. L. Priest. Here is his reply:

NEVADA, MO, JUNE 13, 1900.

C. O. GOODPASTURE, Dear Sir:—Yours just received. For nearly two years I have been paying particular attention to the question of which you write. While it is possible that some circuit judge in this state may have rendered a decision adverse to Osteopathy, yet I have no knowledge of it, and I am certain if such a decision had been rendered by the higher courts my attention would have been called to it. The higher courts of Kentucky have knocked Osteopathy out in every instance where tested. While I have seen only extracts from the decision of Judge Toney of Kentucky, yet it is said to be the finest thing yet delivered, and was published in full in a recent issue of the Journal of the American Medical Association.

Fraternally,
E. L. PRIEST.

On June 11th I again wrote to the publisher of the Western Druggist asking for the name of the journal containing the original article. His reply follows:

CHICAGO, June 19, 1900.

MR. C. O. GOODPASTURE, Department of Agriculture, Washington, D. C.

Dear Sir:—Our article regarding Missouri Decision on Osteopathy was taken from either the National Druggist or Meyer Bros. Druggist, both of St. Louis. We are unable to tell which one as our files are not complete. We have no doubt you can get the desired information from the clerk of the Missouri Supreme Court. Very Truly Yours,
G. P. ENGELHARD & Co.

Upon receipt of Dr. Priest's letter I sent ten cents to the publisher of the Journal of the American Medical Association for a copy of the decision and in due time received a forty-two page pamphlet containing the "Opinion of Hon. Sterling B. Toney in the case of Harry Nelson vs. State Board of Health of Kentucky" and much to my surprise I found that the article in the Western Druggist was an exact reproduction of the last page of this pamphlet.

Just at this time the Louisville papers announced that the Court of Appeals of the state of Kentucky had reversed the decision of Judge Toney ("the finest thing yet delivered") and had granted to Dr. Nelson a perpetual injunction restraining the state board of health from interfering with him, or prosecuting him for the practice of Osteopathy in Kentucky.

I obtained several copies of the Louisville Courier Journal of June 21, which contained this decision, sent one to my friend together with a complete file of my correspondence in the matter, and another to the publisher of the Western Druggist with the following letter.

WASHINGTON, JULY 21, 1900.

GENTLEMEN:—You may recall that I had some correspondence with you a few weeks ago regarding an article that appeared in "The Western Druggist" for May, entitled "A Missouri Decision on Osteopathy." I finally located that decision and found that it was not rendered in Missouri, but in Kentucky, being the decision of Judge Toney of Jefferson Circuit Court at Louisville, in the case of Harry Nelson vs. the State Board of Health.

As you are doubtless aware, Dr. Nelson carried the case to the Court of Appeals and the latter on June 20, 1900, reversed the decision of Judge Toney and granted a perpetual injunction restraining the State Board of Health from interfering with the Osteopaths or prosecuting them for the practice of Osteopathy in Kentucky.

I enclose you a copy of this final decision as clipped from the Courier-Journal of June 21st, and respectfully suggest that you publish it in the Western Druggist and thus partially atone for the publication of the previous article, the rank injustice of, of which, called aloud for just the sort of retribution that has finally been visited upon the M. D.'s of Kentucky by their highest state court.

Very Resp'y,

C. O. GOODPASTURE, Dep't Agriculture, Washington, D. C.
To Pub. West'n Druggist, Chicago, Ill.

This brought from my friend a full and complete withdrawal of his opposition to my plans and an earnest request that I "go ahead with Osteopathy." A little later he sent me the following clipping from the Western Druggist for August.

"A few months ago there was reproduced in these pages a court decision declaring that the graduates of the American School of Osteopathy of Kirksville, Mo., had no right to practice Osteopathy in the state of Missouri. It develops that this was not a Missouri decision, but one rendered by the Jefferson Circuit Court of Kentucky. This decision was reversed June 20th, by the Court of Appeals of Kentucky, thus leaving Osteopaths free to practice in that state, a perpetual injunction having been issued against the State Board of Health. The ground taken by the court was that the practice of Osteopathy is not the practice of medicine under the terms of the medical practice act, since Osteopaths neither give medicine nor do they practice surgery.

Of course I was satisfied and felt amply repaid for my trouble, as my friend, the Western Druggist, and Judge Toney, all had to "take it back" and the "finest thing yet delivered" was buried good and deep by the best decision ever yet rendered in favor of Osteopathy by any court.

A. S. O.'S QUINCY TRIP.

The last foot ball excursion of the 1900 season was run to Quincy, Saturday Nov. 24th, via the picturesque O. K. C. & E., railroad. It was a happy choice on the part of the managers to wind up their junkets in this way. Beautiful Quincy, the Gem City of Illinois, is in itself an attraction well worthy of a trip, and the kind treatment accorded everyone on O. K. insures a crowd whether the weather is propitious for the game or not. Saturday opened with the first touch of genuine winter and some slush, yet the people turned out.

Big roomy, high ceilinged cars stood in the O. K. yards, ready for the crowd to climb in, and before train time the big crowd was already merry. Drawn by the finest passenger engine in the state of Missouri, the big Baldwin that took first prize in Berlin's exposition, that can pull fourteen cars a mile a minute and has a record of one hundred miles an hour, the

nine cars of osteopaths and friends were whirled onward through the country of artistic rolling landscapes lying between here and the Mississippi. Now and then a bright patch of green winter wheat relieved the soft half-tone grays of the November vistas. Inside, the big cars were trimmed in quarter sawed oak and sycamore and filled ash. The gleesome chat of beautiful women and gallant men drowned the smooth and delicate sounds of the flanges. Many a game of whist was played and many a game of hearts.

Many people stayed over night in Quincy to see the Belle of New York, and those who didn't came back in the early evening hours, under the same safe conduct of Conductor Weed, formerly of the Alton.

Mr. J. W. Quail, the O. K.'s Kirksville agent, deserves a compliment for the success of the biggest excursion ever run for the American School of Osteopathy.

CHARLES L. RICHARDSON, JUNE '01.

The Journal of Osteopathy.

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Treatments.

HOW AND WHAT I MEAN BY TREATMENT.

One writer will say you must stimulate or inhibit the nerves here for constipation, there for lost voice, and here for weak eyes, there for sore throat, and this set of nerves for coughs, that set for caked breasts and so on. I wish to emphasize to the student that when I say you must treat the neck for fits, sore throat, headache, dripping eyes and so on to the whole list of troubles whose causes can be found in slips of the bones of the neck between the skull and the first dorsal vertebra, I mean, if you know what a neck is, to treat that neck by putting each bone of the neck in place from the atlas to the first dorsal and go away. You have done the work and all the good you can do. Reaction and ease will follow just as sure as you have done your work right. Begin at the head and start at the top bone of the neck and don't guess, but know that it fits to the skull properly above, then see and know that it sets square on the second bone, then go to the third, fourth, fifth, sixth and seventh or last bone of the neck; now go up that neck with your fingers and push all the muscles of the neck to their places, then blood and nerves will do the rest of the work of repair. Follow this work once or twice a week, and don't fool away any time fumbling to stimulate and inhibit.

Let the nerves and blood loose that have been cramped and kept away by twists of the bones of the neck. Professors must get off of words and lead the students by showing him how to find a small or large slip in all the bones and how to put them back to where they belong, and why the patient is

THE American School of Osteopathy will open its next class Feb. 4th, 1900. Present indications point to a large class. Send for illustrated catalogue.

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DR. STILL'S article on smallpox which is to appear in the next number of the JOURNAL will be of much interest to every osteopath. The Doctor believes from the evidence he has collected that he has found a valuable and reliable substitute for vaccination.

★

WE take this occasion to commend the work of Paul M. Peck as manager of the college foot ball team. Mr. Peck is a good student and in addition to his regular duties as such has found time to satisfactorily manage the team. For the past year he has furnished the JOURNAL with athletic notes and we regret to lose him at the completion of his senior year in Feb.

★

The following advertisement was seen in a Chicago paper, and we have seen the like several times before in other papers:

LEARN OSTEOPATHY BY MAIL

Can be learned at home in a month. Pays from \$10 to \$25 a day. Respectable, honorable, Practical, Handsome DIPLOMA 18x24.

Fake, pure and simple. Any one with half an eye can see that. We presume the fellow that engages in the sale of the above kind of goods goes on the theory that a sucker is born every minute. Many people have heard of the wonderful cures performed by osteopathy but know nothing of the science. Do not be deceived by such quackery. If you wish to learn osteopathy

sick, and why and how they will get well when treated right.

If the student is not well trained so as to make him know the extent of the curing powers of osteopathy by the professors who should train him how to detect causes of diseases in slips great and small, that can and do cause diseases, that student is liable to want to go to some medical school, magnetic healer, physical culture, or any other school to learn something. Keep your money until you need it.

A. T. STILL.

★

Instructors.

Instruction should never be given to a student on any branch of osteopathy with any other object than to give or teach him how to get a knowledge of the normal frames first, then bring in the abnormal position on the frames or bodies of patients; compare the truly normal frames with the abnormal, teach him both conditions and the difference between the two, and how to move the bones of the abnormal to where they were in time of good health. Take the student's hand and put it on the normal frame and show him why it is normal or abnormal. Talk more to his hand and less to his head.

It is not theory that teaches him; it is work done by his own hands that convinces him and starts him to see and feel and know what is meant by the word treatment. The object of teaching anatomy in osteopathic schools is to get knowledge that can be useful to the osteopathic doctor when he has need for it. Men must be handled like babes, when they start to search for variations from bone centers that would cause variations from normal health. Many of those slips and twists are so small on the spine and ribs, that an old operator has to use all his caution or he will fail to observe one, and many times is at a loss to know why his patient gets no better.

If he is a feeble-minded osteopath he will send for a medical doctor and let him kill or cure. Then the cub is off to some medical school and gets into the swim as he calls it and he feels safe then to go on with his ignorance and give another dose

of anti-toxin, feeling that a patient dies better under the medical ass than by an osteopathic fool. Let the osteopath try and if he fails let him try again, and keep on till he finds the cause of the disease and the remedy also.

A. T. STILL.

★

Osteopathy is Practicing Medicine Under the Nebraska Statutes and Requires a License.

Dr. Charles Little, of Lincoln, is an osteopath. Last winter he was cited to appear before the district court and answer to the charge of practicing medicine without a license, as he had no permit from the state board of health. He contended that his rubbing, and kneading processes, the art of osteopathy, was not practicing medicine under Nebraska's statutes. The district court thought differently, and he was fined \$100 and costs.

The doctor at once appealed to the supreme court, and it rendered a decision last evening sustaining the district court. The osteopathist will now have to pay his fine, and cease the practice of his art until he obtains a permit from the board of health or until a law is passed pertaining to his particular branch of medical science. A number of states in the union have special statutes regulating osteopathy and it is rumored that an attempt will be made to have the next legislature of Nebraska pass similar legislation.

PHYSICIANS REJOICE.

The doctors of the old school are in their elements and are rejoicing over a victory which they have won in the supreme court in the decision of the state against Charles W. Little of Lincoln. By reason of this decision, they sit back in their offices and gleefully rub their hands as they contemplate the quantities of pills and quinine that they can force down the throats of their patients, while the graduates of other schools who turn out practitioners must stand aside and watch the work go on without being permitted to minister to the ills of thousands who may clamor at their hands.

Little was a believer in the theory of osteopathy. He practiced his profession at

Lincoln. There he was arrested and taken before one of the local courts and fined one hundred dollars and costs. He appealed to the supreme court and yesterday that body handed down an opinion, sustaining the findings of the lower court, holding that those who practice osteopathy come within the provisions of the statute and cannot be regarded as doctors.

Speaking of the decision of the supreme court, Dr. B. F. Crummer, secretary of the state board of health said:

"Our boards will do nothing further. The matter is now up to the state league of the doctors of Nebraska. Whether they will prosecute those who practice osteopathy or not I cannot say, but I presume that with the decision of the supreme court as a guide, they will."

Discussing osteopathy, Dr. Crummer said that he has not so much objection to the practice as he has to those engaged in ministering to those who are ill.

"In this quackery," continued the doctor, "are people who do not know the first principles of medicine or surgery. In a case of consumption, rupture, smallpox, diphtheria, rheumatism or measles they will use the same remedy—that of kneading the patient as they would a batch of bread. This massage treatment is applied to each and every case and there is never an attempt to diagnose the disease. If man, woman or child is sick, it is the same, and the part that is ailing is thumped, rubbed and kneaded."

As to the result of the treatment, Dr. Crummer cited an instance. He said that not long ago a woman who had cancer of the stomach was not recovering as rapidly as she thought that she should and was prevailed upon to seek an osteopathist. This person applied his massage treatment and in less than a month she was dead, the rough handling having ruptured the lining of the stomach."

Relative to the schools where osteopathy is taught, Dr. Crummer declares that the students are not taught the use of medicine.—Lincoln Evening News, Nov. 23, 1900.

DR. DONOHUE REPLIES.

OMAHA, NOV. 23.—To the Editor of the

World-Herald: I notice in this morning's World-Herald a statement by B. F. Crummer in regard to osteopathy, to which I desire to make brief reply. I will be charitable enough to assign his misstatement of facts to his gross ignorance of the subject under consideration. He says: "In this quackery they give the same treatment for every disease," and yet I will venture to say that this man never saw an osteopathic treatment given nor set aside his prejudice long enough to investigate an osteopathic college. He further says the medical men consider osteopathy dangerous and mentions the case of a certain woman (now dead) whom he claims was injured by the treatment. I challenge the truth of this statement; but granting it to be true, it is the first case on record in which osteopathy has been responsible for a death. Can medicine and surgery say as much? He says there are men graduated from those schools "who know nothing of the curative properties of medicine and less of surgery." Osteopaths do not claim to know medicine nor do they wish to, and if those so-called surgeons could be held responsible for all the maimed women and crippled children for which their cold-blooded operations are responsible there would be more of them who know less of surgery.

This fight against osteopathy does not come from the better element of the medical profession, as that element is too busy minding its own business; but from that class which has not much business to mind. But what hurts those guardians of the people's health most is the fact that osteopathy is popular with the best class of people and thereby cutting off their revenue from that source.

M. E. DONOHUE, D. O.

—Omaha World's Herald, Nov. 24th 1900.

WON'T QUIT.

Dr. Little Says He Will Set Himself Right With the Law if Court Sticks to it.

The osteopathists are cast down over the decision of the supreme court declaring that the practice of their profession is the

practice of medicine and the practitioner must have a license. They are hopeful, however, that the supreme court will change its mind if a rehearing is permitted, but if it does not they propose to again ask the legislature to pass a bill recognizing osteopathy.

Dr. C. W. Little, in whose case the decision was rendered, takes exceptions to some conclusions of a News reporter. He said today:

"In yesterday's issue a reporter made some statements that were considerably incorrect. He stated that I contended that 'my rubbing and kneading processes, the art of osteopathy, were not practicing medicine under the Nebraska statutes.' Inasmuch as 'rubbing and kneading' are not used in the practice of osteopathy, I deny the allegation. Further, he says that I will have to cease the practice of osteopathy until I get a certificate from the state board of health (the reporter must know that the board never grants a certificate to any one unless he has been through a medical school, no matter how much the applicant knows about anatomy, diagnosis, pathology and kindred studies) or until an osteopathic law is passed by the legislature. In this he is again mistaken. Should the supreme court refuse my application for a reconsideration of my case, or, reconsidering it, decide that its previous decision will stand, I certainly will obey its mandate and set myself right with the law. But under the supervision of a registered medical practitioner I can legally practice osteopathy in Nebraska, according to a comparatively recent decision of the supreme court, and this I will do if the necessity arises. I shall remain in Lincoln and practice osteopathy."

Look to Legislature.

OMAHA, NEB., Nov. 23.

Dr. M. E. Donohue, Paxton block, one of the leading osteopaths in the city, when asked what the osteopaths would do next in view of the supreme court decision, said:

"We intend to apply for a rehearing and if we gain it we confidently expect a reversal of the opinion. In any event we shall go before the next legislature with a

bill authorizing osteopathy. We have every assurance that we shall win out in the legislature. In case we fail we shall, as law abiding citizens, cease to practice in this state. But we feel confident the legislature will authorize us to practice."—Lincoln Evening News, Nov. 24th.

LINCOLN, NOVEMBER 27th.

EDITOR JOURNAL, KIRKSVILLE:

Dear Sir:—The supreme court decided flat against us as you no doubt know, but we have only begun to fight. The legislature meets next month or rather the first of January, and we will be loaded for a new law. The osteopaths of the state meet in Omaha on the 5th of next month. In the meantime the Lincoln Infirmary is running as usual, and will continue to run.

Fraternally,
CHAS. W. LITTLE.

★

A Special and Post-Graduate Course at the A. S. O. to Begin February 1, 1901.

I. A SPECIAL COURSE.

To be eligible to this course the candidate must be a graduate of some school of osteopathy recognized by the trustees of the American School of Osteopathy.

To complete this course the student must have been in regular attendance for at least five months on the following classes in the A. S. O., and pass satisfactory examination in the same, viz: (1) Practice of Osteopathy, (2) Anatomy, (3) Gynecology and Obstetrics, (4) Clinics, and (5) Clinical Practice. On completion of this course the student is to receive the regular degree of the school. Fee \$100.

A POST GRADUATE COURSE.

Open to graduates of this school and others in the discretion of the trustees.

The instruction in this course to be given in the following subjects: (a) Bacteriology, (b) Diseases of the eye, ear, nose and throat, (c) Nervous and Mental Diseases, (d) Experimental Physiology, (e) Gynecology and Obstetrics.

The student is to attend osteopathic clinics for the entire course, and at the

end to pass examinations in the regular subjects and present a meritorious thesis on some osteopathic subject—assigned by the head of the Department of Practice.

The time required for this course is five months. The fee for this course is \$100. Upon the completion of this course a post-graduate certificate is granted. Both of these courses begin Feb. 1, 1901.

★

The Missouri Association for the Advancement of Osteopathy met in Kansas City at the office of Drs. Walker & Harwood on Nov. 10th, 1900. The President, Dr. W. H. Eckert, of St. Louis; Vice President, A. L. McKenzie, of Kansas City; Secretary, Miss Minnie Potter, of Memphis, Mo., were all present. Drs. Hildreth and Chesney, of Kirksville; Dr. Herbert Greenwood, of Leavenworth, Kansas,—and a goodly number of osteopaths from over the state and all the Kansas City osteopaths were present. The meeting was a called one for the purpose of transacting some important business. One item of special importance to the profession was discussed at length, and that was how best to handle the fake osteopath in order to rid the public of incompetent pretenders and the profession of impostors and frauds. This matter was discussed thoroughly and plans were laid that will bring about great good for the science. Take the meeting as a whole it was a very enjoyable affair as well as a valuable one to the profession.

The day's business was concluded with a banquet at the Baltimore, tendered by the Kansas City osteopaths to their visiting brothers and sisters. The spread was an elegant affair, consisting of fourteen courses, such as only the Baltimore knows how to prepare. When the hour came that forced a conclusion of the day's program, all went their different ways feeling that it was good to be there and good to be osteopaths, and further that the Kansas City D. O.'s were good entertainers.

MR. DANIEL M. CARR, publisher of "Who is Who in Osteopathy," informs us that copy for his book is now in the hands

of the printers, and requests us to inform all regular Osteopaths who have recently changed their locations, to send immediately to him at St. Louis, 616 Holland Building, notice of the change made, so the work will be thoroughly up-to-date.

* * *

Dr. C. C. Hathorn Killed.

Dr. C. C. Hathorn, a late graduate of the A. S. O., who recently located at Livingston, Mont., for the practice of osteopathy, was killed, in a railroad wreck Oct. 29th, the result of an open switch. Dr. Hathorn had opened a branch office at Big Timber, about thirty-five miles distant from his home, and it was while enroute to the latter place that the accident occurred.

This wreck was one of the worst that has occurred on the Northern Pacific road in years, the dead were mangled beyond recognition. The Dr. had established a very nice practice, and the results obtained from his work, were highly gratifying to himself and patients. His loss in the community will be greatly missed, and by the osteopaths all over the state. Dr. Hathorn was doing all in his power to secure the election of a Senator and Representative, in his district who would be in favor of a "Bill," to legalize the practice of osteopathy in the state.

* * *

Resolutions of Respect.

Whereas, Our dear friend and loyal schoolmate, Dr. C. C. Hathorn, a graduate of the American School of Osteopathy, June class, 1900, having met an untimely death,

Therefore, be it resolved, that the profession loses by his death, one of its brightest scholars and most thorough gentleman.

Resolved, that we, the schoolmates, friends and members of the faculty, of the American School of Osteopathy, extend to his relatives and friends our heartfelt sympathy in this their sad hour of bereavement.

Resolved, that a copy of these resolutions be sent to the brother and sister of our departed friend, and that a copy be sent to the Livingstone and Billing

(Mont.) papers and JOURNAL OF OSTEOPATHY for publication, and a copy be added to the record of the class.

CHAS C. CRAMPTON,
B. W. SWEET,
J. A. LINNELL,
Committee.

* *

At the regular meeting of the Faculty of the American School of Osteopathy, held Nov. 9th, several of the teachers heard for the first time of the death of Dr. Hathorn. It was unanimously voted that the Faculty desire to express sincere regard and admiration for his quiet but strong and upright manner of life among us and deep regret at his early death. In view of the pleasing memories we have of his life, we hope that his friends and relatives may not be comfortless in this great sorrow.

For the Faculty,
FRED JULIUS FASSETT.

* *

Osteopaths May Sign Death Certificates in Michigan.

JOURNAL OF OSTEOPATHY,
Kirksville, Mo.

Have just received a letter from the Secretary of State in answer to an inquiry if an Osteopath was legally entitled to sign a "death certificate." An extract from same may be of interest to all interested in Osteopathy.

"We are advised that there is no legal objection to a properly licensed Osteopath signing certificate of death, in accordance with the provisions of the registration law.

J. S. STEVENS,
Sec'y. of State, Lansing, Mich."
L. E. WYCKOFF, D. O.

* *

Indiana Association.

The Indiana Association of Osteopaths will meet in Indianapolis, Dec. 6th. Every Osteopath in the state is earnestly urged to lend his or her help toward making this the largest and most effective meeting ever held in the state.

D. ELLA McNICOLL, Sec'y.

Ohio Osteopaths.

The third annual meeting of the Ohio Association for the Advancement of Osteopathy will be held at Columbus, Ohio, Monday, December 31, 1900, program to open at 10 o'clock. The following named persons will present papers: Dr. E. R. Booth, Cincinnati and Dr. Lena Creswell, Circleville; Dr. C. V. Kerr, Cleveland; Dr. L. A. Liffing, Toledo.

Business of importance to all Ohio Osteopaths will be considered. It is desired that every Osteopath in the state be present.

M. F. HULETT, Sec'y.
Columbus, Ohio, Nov. 3, 1900.

* *

Misses Hayes and Tappan announce that the Osteopathic Calendar is now ready. Prosperous practitioners who contemplate making Xmas. gifts to patients will find this booklet very appropriate.

Single copies 50 cents each.
In lots, 10-50 35 cents each.
In lots 50-100 30 cents each.

Address, Doctor Lola Hayes,
7 Colwel Block, Ottawa, Ill.
Doctor Emeline Tappan,
Mt. Ayr, Iowa.

* *

Missouri Girl Weds Kentuckian.

Ashland, Ky., Nov. 17.—Doctor T. C. Morris, an osteopath of this city, and Miss E. C. Haney of St. Catherine, Mo., were married last night at Catlettsburg, Ky. Miss Haney met her affianced here and they proceeded to Catlettsburg.—St. Louis Republic.

Dr. F. M. King of Springfield, Mo., and Miss Fannie Clark were married Nov. 27th. Dr. King is a graduate of the A. S. O.

* *

Dr. W. J. Conner, for the past two years located at Kansas City, Mo., by his successful work has built up a substantial practice at that place. Dr. Conner graduated from the A. S. O. in 1896, in the same class with McConnell, Helmer and others. He was for two years a member of the operating staff of the A. T. Still Infirmary. He enjoys the distinction of being one of the best operators ever graduated from the American School of Osteopathy.

Personal Mention.

Dr. H. F. Goetz of Quincy, Ill., was a recent visitor at the Infirmary.

Dr. Wm. Meeks of the June class of 1900, is now at his home in Kirksville.

Miss Mabel Hoover D. O. of the June class 1900, is home from Colorado.

Dr. J. Weller Long of Oskaloosa, Iowa, made the A. S. O. a visit during the month.

Dr. John H. Hardy of Kahoka, Mo., called at the Journal office a few days ago.

Dr. Chas. McCoy of Ogden, Utah, came to Kirksville Nov. 6th to vote.

Dr. Chas. Hazard of Mobile Ala., is now in Kirksville visiting the A. S. O.

Dr. P. M. Agee has located at San Antonio, Tex.

Miss Myrtle Harlan D. O. has located at Muscatine, Iowa.

Dr. F. L. Tracy of Anderson, Ind., has built up a large practice at that place. He is a successful practitioner.

Dr. J. A. Quintal recently of Unionville, Mo., is at present engaged at clerical work at the Infirmary.

Miss Minnie Dawson, D. O., of Frostburg, Md., was recently called to Kirksville on account of serious illness of a relative.

Mrs. W. D. Williard D. O., of Wilmington N. C., has been in Kirksville for the past few days.

Dr. Wm. West of Centerville, Iowa, visited the A. S. O. one day during the past month.

Miss Emeline Tappan, D. O. of Mt. Ayr, Iowa, was a recent caller at the A. S. O. She has a good practice at Mt. Ayr.

Mrs. Mary Walker D. O. of Blue Rapids, Kas., recently brought her mother to the Infirmary for treatment.

Dr. Everett Cookson of Stanberry, Mo. spent Sunday Nov. 18th in Kirksville visiting his parents.

Dr. Harry Ilgenfritz of Clay Center, Kas., and Miss Gertie Ilgenfritz D. O. of Port Huron Mich., are at home for a visit.

Miss Mayme Foncannon D. O. is associated with Dr. DeTienne, in practice at Pueblo, Col.

Mrs. Addie B. Williams, wife of Dr. R. A. Williams of Concordia, Kas., died Oct. 14, 1900,

Dr. H. E. Patterson of Washington, D. C. made the American school a very pleasant call. An account of his visit is given elsewhere in this number.

Those students who are having lessons with Miss Stephens are very enthusiastic over their work, now that they perceive by actual experiment the benefit it promises in their future professional career.

Dr. Emerson, President of Emerson College Boston, says: Miss Stephens is a profound thinker, and an able teacher and is wonderful in obtaining results in her pupils. She ranks high among the educators of this country.

Senator Zevly of Osage, Co., Mr. Huck of St. Genevieve, Co., and Mr. Gray of Boone, Co., recently visited the A. S. O. These gentlemen are members of the legislature, and are on a tour for the purpose of inspecting the state educational institutions.

Word reaches us that Dr. Roy Bernard who attracted attention in osteopathic circles by his cure of a case of insanity, has opened an office on the fifth floor of the Schiller building and started in to build up a practice in Chicago. Dr. Bernard is one of our early graduates and we wish him success.

Drs. E. H. Shackelford and G. E. Fout have located at Richmond, Va., for the practice of osteopathy. Dr. Shackelford successfully practiced for three years at Nashville, Tenn., and Dr. Fout for two years at Ft. Madison, Iowa. They are Virginia's pioneer osteopaths.

Dr. C. P. McConnell has recently located at 57 Washington St. Chicago, for practice. Dr. McConnell graduated from the American school in 1896, from which time to May of the present year was employed by the A. S. O. as one of its instructors, the latter part of this time he was at the head of the department of practice. He left the American School of his own accord to engage in the practice of his profession. He is the author of "The Practice of Osteopathy" which has had a very extensive sale. His extensive experience and success as an osteopath will no doubt bring him a large practice in his new location.

ATHLETIC NOTES

PAUL M. PECK,

While regretting that Thanksgiving festivities have brought the college football season to a close, it is indeed with much pleasure and pride that the writer presents to JOURNAL readers the results of the November contests and briefly reviews the work of the season.

Let us glance at the season's scores:

A. S. O.	0	M. S. U. Tigers	13
A. S. O.	75	Centerville Ath's	0
A. S. O.	0	S. S. Still College	12
A. S. O.	18	Keokuk Medics	0
A. S. O.	11	Chris. Bros. Col.	6
A. S. O.	29	Kirksville Normal	0
A. S. O.	5	Keokuk Medics	5
A. S. O.	61	Central College	0
A. S. O.	16	Gem C. Col. Quincy	6
A. S. O.	6	Mo. School of Mines	0

Total A. S. O. 221 Opponents 42

While yet the lightest team in the state, opponents outweighing them by several pounds in every contest but one, handicapped by absence of gymnasium facilities, held closely to a trying course of studies by zealous professors the football squad of 1900 has met and defeated the best teams of the state and is justly entitled to second place in the contest for state championship. 'Tis true, the Missouri Tigers defeated us at Columbia in the first game of the season but the writer is backed by the opinion of many capable judges in the belief that if the two teams could have met on neutral ground at the close of the season, the red and black would have added one more to her long list of victories.

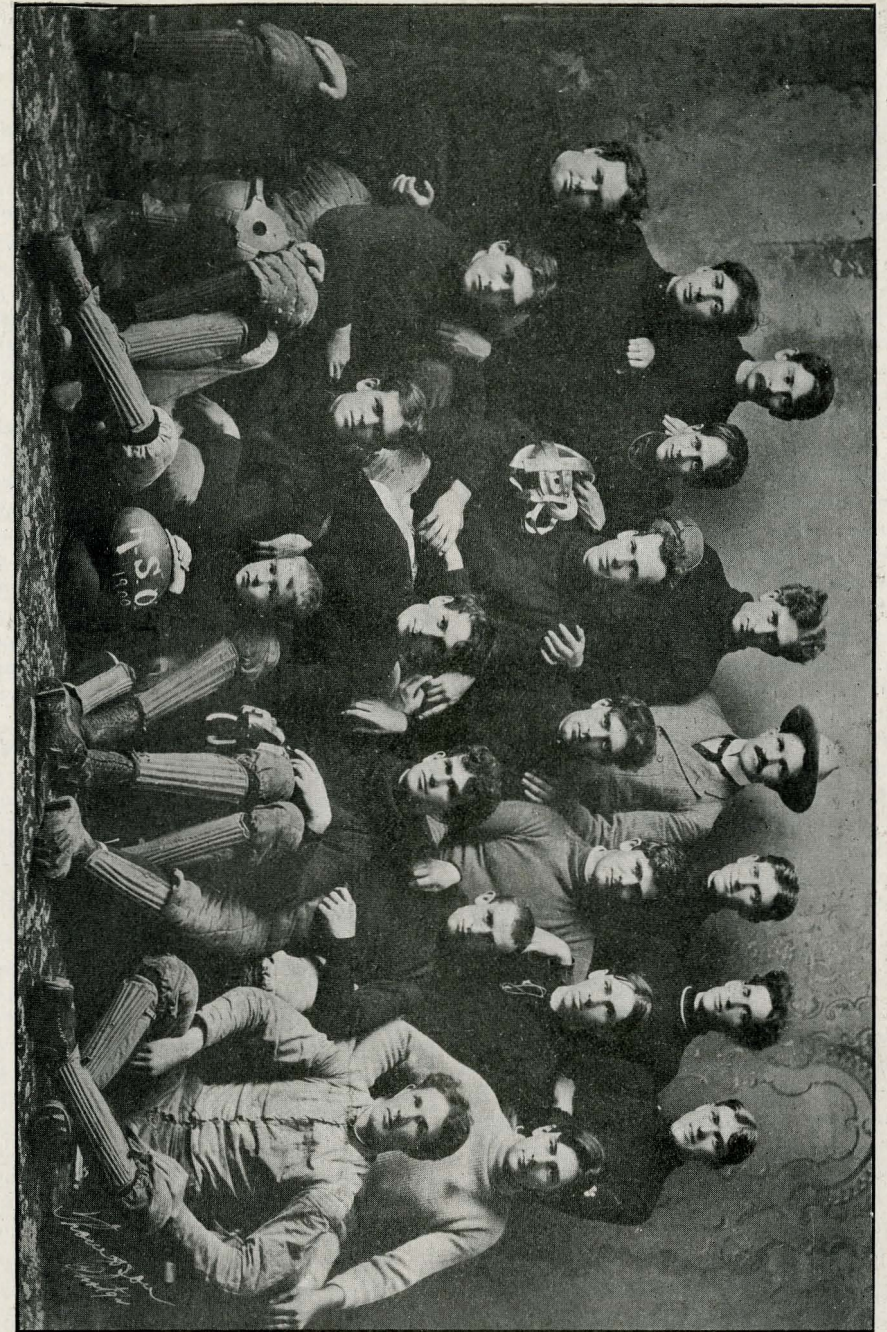
Ten games have been played—eight of them have yielded glorious victories for A. S. O. We have scored a total of 221 points against our opponents in contrast with the 42 charged to us. The squad has covered nearly 1,000 miles on its various trips and has gained a reputation for fast, hard football and gentlemanly conduct that is most satisfactory. The hospitality of the A. S. O. and the citizens of Kirksville has been extended to numerous teams and our visitors have gone away

universally complimenting in highest possible terms the cordial reception accorded them and asking for a continuance of the pleasant relations thus established. The management feels that congratulations are in order upon this the closing of the most successful year in A. S. O. athletics.

Following the defeat of Christian Bros. College of St. Louis, reported in our last issue, the A. S. O. tackled the Kirksville State Normal School and in two short halves scored 29 points. All the substitutes were given a trial in this game. The Normals outweighed us and had good material but were too raw.

The defeat of Central College of Fayette on neutral ground at Moberly, Nov. 5th, by a score of 61 to 0 was sweet revenge for those who remembered how last year's game was stolen from A. S. O., and particularly enjoyable because of the newspaper comment that week that Central had one of the strongest teams in the state. A special excursion took 150 friends of the red and black to witness the game. We were very hospitably treated at Moberly.

The return game with the Medics at Keokuk, Nov. 10th was played in rain on a sticky clay gridiron. The pill venders outweighed us on an average of 22 pounds and had improved in form since their defeat at Kirksville 18 to 0. It was evident from the start that they intended to have the game by fair means or foul. A wrangle followed each decision of an official. The A. S. O. referee was thrice assaulted by members of the Keokuk team, the hungry crowd yelled "kill him! kill him!" and threatened violence with voice and club until it worked itself up to a blood thirsty frenzy. The game was delayed until long after dark and was a disgrace to football. Had A. S. O. received fair treatment and been allowed to play her fast game she would have equalled the score of the previous contest instead of tying, 5 to 5. As it was the Medics barely prevented a second touchdown. The conduct of the spectators



AMERICAN SCHOOL OF OSTEOPATHY, FOOT BALL TEAM, 1900.

during the game was on a par with the mob at Columbia after the contest there.

After suffering defeat for four years at the hands of the Gem City College at Quincy it remained for the light team of 1900 to gain the first victory Nov. 24th, by a score of 16 to 6. Notwithstanding a storm of rain and snow a crowd of 275 enthusiastic friends of the A. S. O. accompanied the team to Quincy. The football field was a sea of slimy red mud which soon made the 22 players a sight that would have made a healthy hog envious. The local team was much heavier and the mud gave advantage to their weight. As an instance, our center, Chas. Cleary matched his 153 pounds against a giant of 237 avoirdupois. Coach White viewed this game from the side lines until he replaced Pettit at quarterback McMains and Peck had re-entered the fray to prepare for the Thanksgiving contest which was won without the aid of Coach White who was objected to on the ground of professionalism. Fortune seemed to favor Peck who was allowed to make the three touchdowns, one on a run of 70 yds. Gem City scored in the second half having secured the ball through a fumbled punt, and with the aid of the umpire who gave in penalties 25 of the 50 yds gained to make the goal line. Quincy credited A. S. O. with having the fastest team seen in that city.

Ideal weather prevailed for the Thanksgiving game which proved the best contest ever seen on the home gridiron. For opponents the red and black had "Dick" Bland's charges from the Missouri School of Mines at Rolla, a team which had demonstrated its superiority over every college in St. Louis. For the first time A. S. O. matched with a team of its own weight. The superiority of the home players was evidenced by the fact that their goal was never in danger. The fighting was always in Rolla's territory. Thrice in the first half A. S. O. was within striking distance and felt sure of a touchdown but a plucky stand by Rolla prevented the score, once when on the Miners' 2 yd line.

The two teams had defended their goal for 55 minutes of play when Halfbacks Peck and Mayer were injured and Redfield

and Bumpus replaced them. Giltner took Illinski's place at left end and the fresh men added the strength and dash which gained the 20 yds necessary for Redfield to cross Rolla's goal and made the final score 6 to 0 when the game concluded two minutes later.

The home team was superior in speed and in forming interference and about equally matched in the line.

The squad which has been regarded as composing the first team this year consists of Chas. Cleary at center, Jones at right guard, Turfler at left, Cain at right tackle, and White or McMains at left tackle. Davis, Illinski and Giltner ends, Pettit or Illinski at quarter-back, Dobson at full and Mayer, Peck, Redfield and Bumpus at half backs. Mayer and Redfield have filled the latter positions most of the season. Bashaw and Fowler are sub guards and Gates has been a faithful and conscientious sub end or half for two seasons. The training quarters have been in charge of J. W. Norris whose faithful work has done much toward keeping the men in condition and making victories possible.

Fowler, Cain, Turfler, Bumpus, Redfield and Brownfield will be available for next year's team. With the new material to come in with two classes and with that now developed Coach White should have a good squad to commence with next fall.

Irresponsible individuals, men who disregard their promises without compunctions of conscience, men with little idea of what constitutes honor among men, may be found in all walks of life. Unfortunately they are sometimes encountered in football. Three times this season the A. S. O. has had to contend with such a condition.

The managers of the St. Louis and Washington University teams and of the Still College of Osteopathy at Des Moines after binding themselves to bring their teams to Kirksville and agreeing to terms for a football game, "at the eleventh hour" notified us that they would cancel the date. Such proceedings might be expected among school boys but men of honor should not tolerate it. It is indeed unfortunate that football as a sport should in this way be misrepresented in reputable colleges.

CLINICAL REPORTS

REPORTED BY GEO. F. BURTON, LOS ANGELES, CAL.

Ulceration:—

Mrs. R.— between forty and forty-five years of age. Has been a sufferer most of the time for the past eight years. Received an injury or strain to the lumbar region of her spine as she was forcing her way up a steep hill-side about eight years ago, from which time her symptoms grew gradually more complicated and distressful.

Among the decided manifestations may be prominently mentioned, ulceration,— said ulceration involving nearly all the cellular tissues of the pelvic cavity especially involving the septum between rectum and vagina; very aggravated irritation of the urethra and urinary bladder; constant and great pain in the pelvic cavity; suppressed, scanty and difficult menstruation; pain in the region of the ilia extending down the thigh; and for the last two or three years she has been under the continual influence of morphine.

During these eight trying years every known remedy of the pharmacopoeia of materia medica had been administered and none gave even temporary relief save morphine.

Two or three surgical operations were performed without avail. Beginning last January, she was given an opportunity to test the merits of Osteopathy. For nearly three years she had been not only confined to her home, save once or twice for very short periods, but most of the time confined to her bed. She has told me that the pain was so intense at times that she was compelled to take eight or nine grains of morphine per day and that she has even taken 3½ grs. per dose. Also the urethral and urinary bladder irritation were so galling at times that the use of the vessel to exceed sixty times per day was not an exaggeration.

She began taking osteopathic treatments last January. Gradually the pain was lessened, the excretions of the body became

natural, the urethral irritation lessened, the morphine to be administered became less and less so that by the first of July she had stopped taking morphine and all desire of it was gone.

After the morphine was removed from her tissues she gained strength very rapidly; and for three months she has been a regular attendant at church and comes to the office for her treatments. At the present time she is the housekeeper for the little family, and every week has more pronounced praise for Osteopathy.

Tuberculosis:—

Less than four months ago a beautiful little girl of eight summers was brought to my office for treatment. Her knee was stiffened from the result of so-called tuberculosis. The pain and stiffening had formally been in the opposite hip and had afterwards crossed over and lodged in this knee joint, stiffening it, leaving the leg bent upon the thigh, forming granulation tissue of the soft part about the patella and condyles of the femur. She could barely allow the weight of her limb to rest on the tip of her toes. Now she can walk very nicely. The muscular system is getting very strong, the pallor has left the cheeks, the knee-joint is lessening, the granulation tissue is disappearing; and it now appears as if it would require only about two more month's treatment to effect a perfect cure.

* * *

REPORTED BY GEORGE W. REID, ALLIANCE, O. SENIOR STUDENT, A. S. O. WITH CHAS. C. REID, D. O.

Dysmenorrhoea:—

The patient, 22 years of age, had been afflicted with painful menses from puberty. Very severe pain preceded and persisted throughout the entire flow. Two months of osteopathic treatment gave relief.

Cause—Lateral lesion in the region of the ovarian center with marked tenderness over sacrum due to tilted innominate.

Constipation and Jaundice:—

A lady 26 years of age had been troubled

with constipation for nine years and jaundice for several months. She did not relish her food and ate very little.

Constipation dated from a bad case of inflammation of the bowels. She had been taking different kinds of cathartics, but in spite of all the pills, teas, and various other drugs her bowels grew less active till at the time she came to me for osteopathic treatment it took eight or nine of Carter's Little Liver Pills to cause a movement.

She has taken a little over a month's treatment and now she relishes her food and eats heartily. Nearly all the symptoms of jaundice have disappeared and her bowels are moving regular without the use of any drugs.

Cause—Lateral lesion of 10th dorsal vertebra with marked rigidity of muscles and ligaments in lower dorsal and lumbar regions.

* * *

REPORTED BY CHARLES C. REID, WARREN, OHIO.

Astigmatism:—

A little girl ten years old, could not read ordinary writing on blackboard at school without spectacles. Wore glasses for ten months. When she would leave off the glasses everything would seem blurred to her and she would have attacks of very severe headaches. A small lesion was found at the 2d dorsal vertebra. By correcting this and stimulating blood and nerve supply to the eye, she was soon enabled to leave off her glasses all the time and see better without them than with them.

Chronic Stomach Trouble:—

A young man bothered for about six years with a very annoying stomach trouble, pain, indigestion and flatulency, had become quite thin in flesh, and had to be very careful with diet. Tried several different doctors, had been to a branch of the Battle Creek Sanitarium at Grand Rapids, Mich. Some of these remedies with drugs, baths, diet, massage, rubbing, etc., seemed to help him some, but he had a mechanical lesion in the spine interfering with normal activity of the nerves of the stomach producing a weakened condition of that organ. None of the above

remedies could reach a case of this particular cause. The treatment must remove the cause to get permanent results. The cause being a slight slip in a vertebra it must have direct definite treatment to correct it. The results in this case being favorable, and many others of similar nature that could be mentioned as cured is proof enough that the above statements are correct.

Gall Stones; Biliary Colic:—

This patient had had attacks of hepatic colic a number of times. She was taken with the pain late in the night and suffered very severely. I was called early in the morning and found her in great pain in the region of the liver. The severity of the symptoms was reduced the first treatment. Treatment was continued about a month to the spleen and liver. Her general health was much benefited as well as having the gall stones removed.

Nervousness, Loss of Appetite, Insomnia:—

I report this trouble because so many inquire in regard to it. My cases along this line are numerous. The results have been beneficial in proportion to the opportunity. Most every one who has been at all persistent has gotten great benefit. Extreme nervousness may cause loss of appetite and sleeplessness or most any kind of symptoms. May cause gastro-intestinal disturbance, kidney or liver trouble, functional heart trouble, etc., and there may be great tenderness over a part or all of the body. Many of these symptoms will be irritated or new ones manifest themselves upon the change from drug medication to osteopathic treatment. On this account often, patients who need from three to six months treatment to cure them will get discouraged and stop after taking from three to six treatments. Under such circumstances those conditions indicate that there is a change going on, and as the tendency is toward the normal, it is favorable and as soon as nature can adjust itself the seemingly worse condition will give way to better.

* * *

REPORTED BY DR. R. V. KENNEDY, DUBUQUE.

Dislocated Rib:—

Miss Fanny A. Wood, dressmaker at 797

Main street, had a bad fall more than a year ago, which caused severe and continual pain in her arm, rendering it almost useless. The pain was so intense at night that she had to resort to opiates to obtain any rest. Upon examination I found the first rib dislocated, impinging on the nerves to the arm, which I set in the third treatment and the pain ceased. The M. D.'s had been blistering and using all other heroic and useless measures to cure the arm. Miss Wood never misses an opportunity to commend osteopathy.

Headache and Vomiting:—

Miss Julia Lynch, a school teacher, for some years was afflicted with a severe headache which started between the shoulders, extending up neck and head, causing dizziness and vomiting. She says in part: "His third treatment so completely cured me that I shall forever sound the praises of osteopathy and earnestly recommend those afflicted to give it a trial."

Female Trouble:

Mrs. Katie Weiker of Scales Mound, Ill., an invalid nine years, was operated on in 1893, and was told another would be necessary, which she would not consent to. She came to me with little hope but returned home well and happy in four weeks. I found a slipped innominate and spine, very sensitive from 9th dorsal down. Particulars can be had by addressing her personally.

* * *

REPORTED BY J. W. BANNING, D. O., 1110 MASONIC TEMPLE, CHICAGO, ILL.

Chronic Pharyngitis:—

This disease often occurs in public speakers and singers and may be brought on by improper use of the voice, exposure to cold, lesion in the cervical region, and continuous irritants, such as tobacco, gases, dust, and alcohol.

Not long since a lady suffering with this trouble presented herself for treatment. An examination revealed a lesion in the middle cervical region which interfered with the innervation of the mucous membrane of the pharynx, thereby lowering the nutrition and producing congestion.

The lady is a chorister and the impaired

condition of the throat and the strain put upon it, resulted in hoarseness of the voice and soreness of the throat. The voice was so impaired that she could scarcely speak above a whisper.

Treatment was applied to the cervical lesion, restoring the nutrition to and reducing the congestion of the mucous membrane of the throat. After a few treatments the voice began to improve. The treatment was continued and resulted in a complete restoration of the voice to the normal.

Some of my Experience With Osteopathy.

I had a dear friend who was going to Crawfordsville, Ind., to take treatment of an osteopath. I being unconscious of what that meant was very anxious to know. I accompanied my friend to that place, as I was in delicate health and greatly needed rest. After being there a short time I began to be more anxious to know what all their treatments meant and watched with care what was being said and done for a few days,—then discovered, as far as I could see into the science of osteopathy, it was good common sense in practical use. I became more and more interested and one of the main reasons I was impressed, was that osteopathy taught there never an effect without a cause, and to remove the cause of disease was the first thing, after which the patient must and would get well. I kept getting nearer to the meaning of osteopathy. Of course it was a small light that dawned upon me in comparison with the great light itself. I was delighted and began taking treatment of Dr. George Sommers. I found him to be truly a gentleman, capable and understanding his profession, and one in whom all his patients trusted.

When I began taking treatment I was so sensitive and tender over my stomach and bowels that he was compelled to treat me with the delicacy of a child. After further treatment, he discovered that only two of the organs in my body (brain and lungs) remained well and in a healthy condition; all the rest ailing, some more and some less, but mostly more than less. His treatment did me much good. Although

I was simply a nervous wreck the treatment quieted me from the first. He also gave me treatment when he was in Hamilton and Cincinnati, Ohio. Then there came nearer to my home, in Xenia, Ohio, Drs. Morris and McCartney. Mr. Morris was also a capable doctor of much merit; he discovered an ailment that was giving me great suffering. I only received a few treatments from him but they were effective. Dr. McCartney has continued treating me for quite a time and great good has been the result. I estimate him as a manly man in every sense of that term and a very capable doctor; an unassuming gentleman,—one in whom the best people have perfect confidence, and no one has had occasion to doubt his manliness and ability.

Then in Richmond, Ind., there are two doctors of much merit, ability and refinement—Mr. and Mrs. Peterson, who occupy their place in that refined and conservative city to the honor of the science they represent, for they are held in high esteem by the cultured class of people. Their patients come from the very best people in the city. I have received quite a number of effective treatments from them and have been helped greatly. I also found another lady doctor in Cleveland, Ohio, Theresa Cluett, from whom I received a few treatments. She has much ability and is held in high esteem by the best people. I have never taken treatments from any osteopath but that I found them to be ladies and gentlemen, and bringing honor upon their profession—and their prudent lives were much admired by good

and reliable people.

I am now fully persuaded that osteopathy is the greatest discovery of this age, and that the father of this child (Osteopathy) is the greatest benefactor to humanity of the age, for he who helps humanity, is most akin to God. My husband and I are Evangelists of the Friends Church (or Quakers) and have been traveling and holding meetings for more than twenty years; not only among our own church but among all the Evangelical churches in our country. We have devoted our lives for humanity that they might be made better and happier. Began when quite young and have been in almost constant work without rest. Not at all living for self, but for others, for he who lives and the hearts and homes are not made happier by us having lived—that life is a failure. The only life that is a success is the one which makes the most homes, and hearts happy and helps lift humanity up to God's ideal of man and womanhood. For a recompense of our toil and weariness, we have many thousands brought to Christ and homes like the desert waste made to bud and blossom like the rose; and hearts of sin and sorrow made clean and to sing for joy.

Osteopathy was born to live and not to be crushed by some dark and selfish mind, but to shine on until the darkness vanishes and the light of the science of osteopathy truly appears with undimmed luster.

ESTHER G. FRAME,
Evangelist.

Jamestown, Ohio, Oct. 18th, 1900.

Question and Answer Department.

Question. Can partial blindness of one year's standing, caused by syphilis be benefited or cured by osteopathic treatment. Syphilis apparently is cured. If so what length of time would be necessary?

A. D. R.

Answer. Benefit is very probable; a cure, while possible, is rather doubtful.

The case can be reasonably encouraged. The time required would likely be long, owing to the nature of the cause; anywhere from six months to a year or more.

Question. In cases of partial deafness what would indicate the probability or non-probability of benefit or cure by osteopathic treatment?

Answer. The fact that the deafness is but partial would be one hopeful feature. The probability would hinge upon the total facts as revealed in the history of the case by examination. These cases usually show removable cervical lesion, and the prognosis is good.

Question. What would be the treatment besides correction of cervical lesions, in the case of a small pterygium that has not increased or decreased in the past twelve years?

Answer. Increase the blood circulation through the carotids by the usual treatment upon the throat; local treatment about the eye to increase freedom of circulation and of venous drainage from the eye; crushing or cutting off the minute blood-vessels upon the eye ball acting as feeders to the pterygium. This is done by carefully pressing the edge of the finger nail directly upon the vessels and drawing it across them, severing them.

Question. A boy two and a half years of age had an attack of scarlet fever and as a result of the fever is paralyzed on the left side. No lesion—arm develops but cannot restore action. What prognosis can be made in cases of this kind?

Answer. A good one. The new development of the arm is ample warrant for expecting this process to affect the nerve-centers and supply for the parts paralyzed. These cases usually require time, but show, as a class, as good a sum total of cures as any line of cases.

Question. A boy fifteen years old has had Jacksonian epilepsy since an infant of nine months. Condition is growing worse up to time of beginning treatment. After three weeks' treatment the fits are less frequent. What is the prognosis and what treatment would you prescribe for the case?

Answer. The prognosis is fair. The treatment must be for the removal of the lesions usually found in these cases in the upper dorsal or cervical region of the spine. Attention must be given to the general health, keeping up activity of the bowels, kidneys, heart and circulation. Thorough general treatment to the whole

nervous system keeps it quiet and in good condition, lessening the danger of recurrence of the attacks. The latter treatment is spinal and cervical, in the usual manner.

Question. (1) Please give your method of treating ulceration of the womb in December JOURNAL?

Question. (2) Can opacity of the lens be cured by osteopathic treatment? (3) Will misplacement of the atlas cause it, and (4) will correction of the atlas cure it?

M. A. B.

Answer. (1) Ulceration of the womb is a condition in which ulcers are found on uterus, usually on cervix. They are the result of a diseased condition of part resulting from (1) laceration; (2) displacements; (3) endometritis, either simple or specific. The treatment depends upon the individual case. If laceration is found treat blood and nerve centers to uterus and if laceration is not too extensive a cure can be expected. Treatment to correct lesions in lumbar sacral and pelvic regions especially at sacro-iliac synchondrosis will cure forms due to endometritis. Curretting as well as local applications are contraindicated. Again a displacement especially a flexion will cause a diseased condition of uterine wall hence the treatment would be correcting the displacement.

(2) Opacity of the lens or cataract is a condition in which structural changes have taken place in lens. If patient is not too old, if not due to syphilis or constitutional diseases such as nephritis, and if structural changes have only begun, the prognosis is favorable.

(3) A displacement of atlas would affect vaso-motor nerves to eyes. It is a common lesion that is associated with cataract and (4) certainly if no other cause is visible and we found the two conditions viz. cataract and slipped atlas correction of the lesion will help if not entirely cure the condition above mentioned. Massage of eye ball is also beneficial. We would advise trial treatment before promising very much.

Question. Please give me diagnosis and

reatment for following case: A young lady twenty-two years of age who is troubled with amenorrhea, never menstruating until she was sixteen years of age but up to the time she had the measles, which was last February, she never missed her regular period, but the flow was very scant excepting twice when she was riding horse back a great deal.

During her attack of measles she missed but came on afterward regularly until three months ago, when I began treating her.

She has been troubled with constipation more or less all her life; also some trouble during micturition, this I have been able to relieve.

She suffers extreme pain every month for from a few hours to a day, about two inches above the ant. sup. spine of ilium. She is very apt to have severe muscular contractures all over the body.

During her last attack and for two days after there was a gurgling in both fallopian tubes on being touched and you could tell there was a fluid there but there wasn't any inflammation in any of the organs and after I relieved her of her pains, which I

was able to do in a few minutes she felt perfectly well and strong.

When I received the case three months ago there was trouble at the ninth and tenth dorsal also at the fourth lumbar vertebra. A slight dislocation of uterus and ovaries very high. I have corrected these but as yet have not helped her of amenorrhea and have failed with osteopathic treatment to bring on the menstrual flow.

B. W. A.

Answer. Amenorrhea frequently follows debilitating diseases. The flow depends upon quality as well as quantity of blood in body. From the history of the case it would seem that the case was one due to the anemic condition which sometimes is a sequel to measles. The treatment should be applied to the nutrition centers in dorsal region to improve the quality and quantity of blood. Localized treatment over uterine centers will do little good if there is this anemic condition. Advise the patient not to study or do any kind of work that would impair the blood or direct it away from pelvic organs. Outdoor exercise coupled with good food will help.

PREJUDICE.

U. M. BROWDER, D. O., SALT LAKE CITY, UTAH.

Prejudice means to judge before judgment before and without investigation. This mean vice in most cases is intimately associated with intolerable ignorance. Prejudice fully personified makes the only man in the world who can beat the devil without half trying. Oh, the extent to which the world is governed by prejudice!

Professorship in colleges and universities, pulpits, the editorial staff on religious papers and magazines, are all badly infected with this vile poison.

Prejudice as nearly reigns supreme among medical men as any other class of men on the earth. Truth and progress find their greatest enemy in this vile poison of humanity. Prejudice obstructs the way to the truth and blinds the eyes of the people to their own best interests as nothing else in the world can do. It's the

greatest enemy to righteousness in the known world, it's first to corrupt judges of the law and poison the halls of legislation; it fills the mouths of pulpit orators with deceit and the lawyers' eyes with the tears of pretended sympathy. It wages war between the different schools of medicine to such an extent in some cases that, it would much prefer to see a patient die from its own neglect than to recover through another man's skill. Sad condition, this.

Prejudice is an evil force which does its work through political party machinery, through pulpit and pew, church boards, health boards, in fact through all sources at its commands.

It stands with club in hand at every open door of human privilege, ostensibly guarding the sacred interests of poor suf-

fering humanity.

Prejudice is both a *liar* and a *thief!* It's the gate-way to eternal remorse!! To illustrate the extent to which some people are hid by their ignorance and prejudice, we desire to cite a single case which occurred in this city last summer.

When the writer came to this city and established an office for the practice of osteopathy, he quietly marched down Fourth South Street to the Christian church, the church he has labored more than a quarter of a century for, and whose numbers he has increased more than six thousands within the last thirty years taking with him a letter, on purpose to "unite by letter," which he did. In the official board of that church is a modern pill peddler, who entered his solemn protest against our membership in the church of the most high, lest the saints should be defiled by the bringing in of the "damnable heresy" of osteopathy.

This beardless and brainless quack who boasts of an unobstructed flow of the milk of human kindness, churns his milk of human kindness into limberger cheese for the sake(?) of "Christ and suffering humanity." His regard and respect for Carter's liver pills so far out-stretches his respect for Paul's Gospel that he becomes a Damascus dog in a Christly manger. What a pity that such people should be allowed to run at large. This little pill peddler, however, ran up against his pastor, who is a broad-minded scholar and an honest man, who at once showed the little pill-peddling agent of Mother Winslow's Soothing Syrup business that his silly complaints had no place before that Board.

God pity that chemical (?) compound of ignorance and prejudice, which seem to be the characteristic element in some people. Will the world ever be redeemed from ignorance and superstition? The banner of osteopathy is still afloat.

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M. E. DONOHUE, D. O., 604 PAXTON, BLOCK, OMAHA, NEB.

How big is Dr. Still, now Pa,
That people call him great:
Is he some giant great and tall
His pills a pound in weight?
Is he so large that he could stand
His feet upon the ground
And cut a leg from off the man
Within the moon so round?

Oh, no my boy he's 'bout the size
Of I or uncle James
'Tis not his pills that make him great
Nor yet his length of frame.
But since you wish to know the truth
About this Dr. Still
I'll tell you he's a man that never
Never gives a pill.

He's the man who not long since
With courage and alone
Declared 'twas his belief disease
Was caused by misplaced bones.
So then and there he made a vow
The human race he'd free
From drugs and ills, disease and pills
Through Osteopathy.

Of course the wise and learned men
Belonging to his school
Of allopathy at that time
Declared he was a fool.
But when he dared to rise and say
That microbes were not found
To be the cause of all disease
Their rage it knew no bounds.

He claimed that God when making man
Could offer no excuse
For putting an appendix in
If it was of no use.
Likewise the little tonsils and
And the ovaries and such
Would all have been left out if they
Did not amount to much

There was a time not long ago,
I've heard some people say,
When going to an Osteopath
They went up the back way.
But now my boy the tide has turned
And will not stop until
The world shall know this glorious
truth
As taught by Doctor Still.

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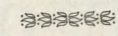
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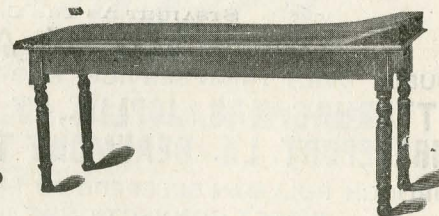
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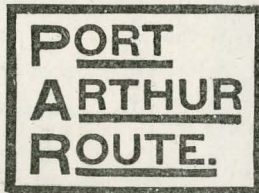
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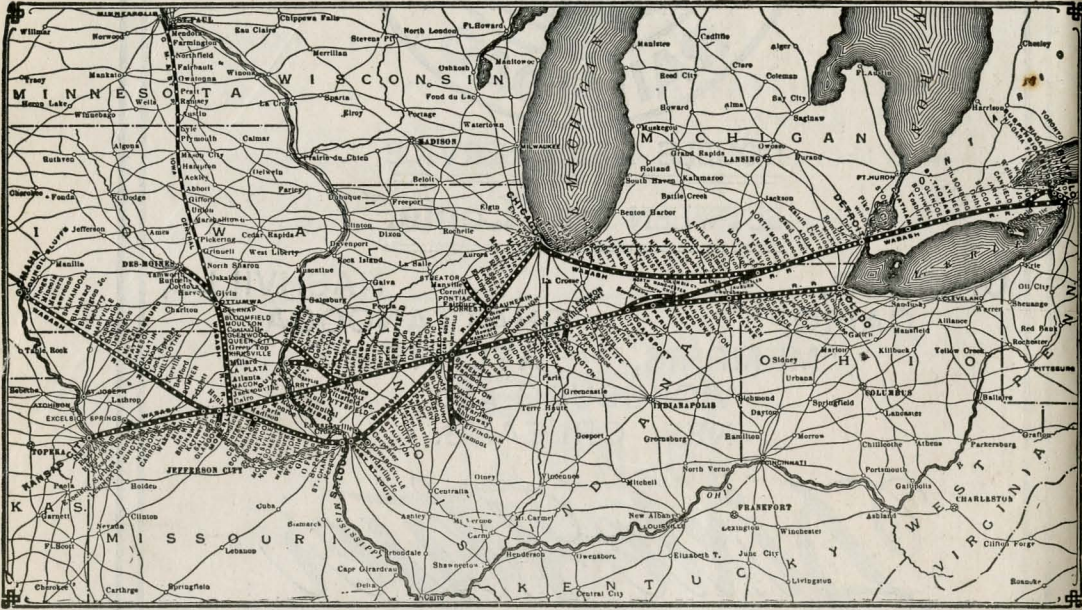
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