

Osteopathic Truth

January 1921

Vol. 5, No. 6

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Osteopathic Truth

A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

I fully realize how tough the old ways were when I remember how they used to spank me to get down a dose of castor oil; then they would ask God to bless the means for my recovery, and I suppose this petition included both the dose and the blister.

—*Dr. A. T. Still*

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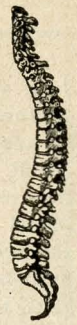
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Osteopathic Truth

A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

Pledged to the TRUTH which Father Andrew saw,
No favor sways us, and no fear shall awe.

Volume V

JANUARY, 1921

Number 6

Technic

By Dr. J. Swart, Kansas City, Kansas

One year ago last July, I went into the Chicago convention and stirred up some interest in Osteopathic Strap Technic. As a result technic is being studied with more than usual interest. Since that convention our magazines have contained many articles on this subject and I believe they have been read with much interest.

Dr. Goetz says in the O. P., Dec., 1920, "That last A. O. A. convention was an orgy of technic, the stuff served had lots of 'kick' in it and if any one in full attendance failed to get his jag, don't blame the committee on the program. It was difficult to keep sober on one's judgment as to the different methods given both in diagnosis and technic, they differ so; no two operators correct the same lesion in the same way."

I hope this orgy will continue. Don't be a Chinaman. What was good enough for our parents is not good enough for us. We should advance. We should use better technic than that handed out ten, fifteen or twenty years ago.

Technic is the rock on which our work is built. If this foundation is poor we are bound to make failures. If we are good in technic we can make a success, even if we know but little about physiology, anatomy, symptomatology, pathology, etc. We all know that the chiropractors are weak on these subjects, yet we often hear of them curing patients that real osteopaths have failed to cure. The one who cures his patients is the one who is going to get the business. The layman doesn't care what school his doctor graduated from, if he makes the cure.

I am proud of the compliment when I hear of osteopaths saying that technic is my hobby. Who have we in our profession, who has given us anything new, who didn't have his hobby? Would osteopathy ever have been known, if Dr. A. T. Still had not had his hobby? I would like to see every osteopath in the work get a hobby, then our science would grow with leaps and bounds.

Once an M. D. told me that he could take whiskey and four other drugs and do a good practice with them. An osteopath could start out with good technic and some common sense and do a good practice. What did Reese, the bone setter, have? Did he have anything excepting technic and common sense?

I believe that every osteopath should be well informed on every subject taught in an osteopathic college; yet, if he is short on technic, a knowledge of all the other subjects will be of very little value to him. He may give beautiful treatments and frame up good excuses for his failures; but, after a while, the patient becomes impatient, for he wants a cure. Nature will cure some cases for him; but in the majority of chronic cases, lesions must be corrected or there will be no cure.

I hope that every A. O. A. convention will have an orgy of technic. The profession needs stirring up on this subject.

R. K. Makes the First Page of the Sunday Chicago Tribune

GOOD PUBLICITY

(Chicago Tribune, Dec. 5th.)

High Heels and Lollypop May Be Barred in Bay State

Boston, Mass., Dec. 4th.—A ban on high heels such as never carried a Puritan or Pilgrim ancestor to church is sought from the legislature by the Massachusetts Osteopathic Society.

Announcement that the society would introduce a bill to stop the high heel at its source—the manufacturer—was made at its annual convention today.

The bill will limit height of heels to one and one-half inches.

The fad of sucking lollypops also was attacked by Dr. Robert H. Veitch of Medford, because of a danger of "functional derangement of the stomachs of our school pupils" by its excessive use.

DR. E. S. COMSTOCK ADDRESSES AMERICAN MEDICAL LIBERTY LEAGUE

Dr. Edgar S. Comstock, secretary of the Chicago College of Osteopathy, addressed the annual convention of the American Medical Liberty League on the subject of "Freedom of Choice."

The American Medical Liberty League should have the support of every member of the osteopathic profession and not only should we support the activities of the League, but we should take part in the work, in order that more osteopathic physicians may be on the programs, etc.

Dr. Atzer Defends "Model Bill"

In your November-December issue of the "Osteopathic Truth," on page 52 appears an open criticism by Walter E. Elfrink, Secretary of the Illinois Osteopathic Association, on the Model Bill submitted by this office to the profession, and as there are some statements contained in this article that tend to mislead the reader to come to erroneous conclusions, I trust you will give space to the following reply.

He states that, "Dr. Atzen was here on October 30th, and spoke to a small number of our people and presented his bill, which appears to have been endorsed by a number of eastern states. I have protested in vain against the inclusion in this bill of two features which, in my mind, are serious mistakes. Dr. Atzen has succeeded apparently in convincing the people to whom he has talked that he is right."

These statements give the impression that these two features of the Model Bill originated and were incorporated by the writer, without consulting the profession on the matter, when the fact in the case is, that these two questions were submitted to the members of the House of Delegates and through them to the entire profession, in a circular letter sent out from this office in August, 1920, and the votes were explained in the explanatory letter that accompanied the Model Bill sent to the profession from the Orange office. The votes secured through the House of Delegates are as follows: 243 votes were cast in favor of incorporating the definition and 63 opposed. 193 votes were cast in favor of incorporating the curriculum and 103 opposed. So, the reader must clearly understand that the reason for incorporating these two sections in the Bill, was the result of the vote cast by the profession, **before** the decision was made to incorporate these two sections in the Bill, and not due to any opinion of the man who was placed in charge of the legislative campaign. These votes are here on file and will be submitted to the House of Delegates at its next annual convention.

It hardly seems proper or fitting that a private individual would make it appear that this vote taken in the proper manner and in regular form, should not be considered reliable, and then this same individual go over the same ground, in the same manner, asking identically the same questions

that were asked by your legislative director, but submitting arguments on one side of the question only, whereas the director of the legislative Bureau submitted both sides of the question impartially, for the consideration of the voter, and then consider the result of this latter vote reliable and the former vote as unreliable.

I think that it is right and proper for any member of the profession who feels that the bill contains objectionable matter, to state his objections, so that the merits of the objectionable section may be thoroughly discussed or the section rejected if this is found to be desirable, but I do not think it right or proper on the part of any private practitioner to attempt to over-ride the official vote taken by the properly appointed official, when such vote was taken in proper form.

It is hardly necessary to give much discussion to section I, for this section may be omitted entirely by any State, desiring to do so, without in any way effecting the essential contents of the Bill. Further, the right to omit section I, was clearly stated in the letter of explanation accompanying the Bill.

Section IX deals with the College Curriculum, and is the second section objected to by Dr. Elfrink and although this section is one of those mentioned in the letter of explanation that should not be altered, if this could be avoided, still, certain alterations can readily be made in this section without seriously injuring the more vital contents of the Bill, for instance, part of the section—that part dealing with the hours of study for each subject—may be omitted: or the subjects may be enumerated in a general way as comprising a four-year course, with no specific reference to hours of study; or even the entire section can be left out of the Bill, by states so desiring, without destroying the uniformity of the contents of the Bill that apply to osteopathic practice, for section IX deals with the College problem and has no specific relationship with the problems of osteopathic practice, so, if the practitioners of the state of Illinois, do not approve of these two sections, they have a perfect right to take them out of the Bill and this right is conceded in the letter of explanation accompanying the Bill, but it seems that it is not best to do this in view of the following:

1st. Because osteopathic colleges have not as yet established a secure

place in the educational world; they are still on probation.

2nd. There is not much likelihood that the educational requirements for physicians will fall below the hours stated in this Bill.

3rd. To establish osteopathic colleges in the educational world on a uniform basis, can best be accomplished by means of a definite program enumerating the hours of study so as to eliminate hedging on the part of our institutions of learning.

4th. A definite curriculum written into our law will give effective argument for practitioners to voice, when our colleges are criticised by laymen, in public. This will be of great educational value to differentiate the osteopath from the imitator.

5th. It will silence opposition in passing our law through the legislature, for the greatest opposition to the passage of the law comes from our opponents who claim that our colleges do not teach all we claim for them. This is the most convincing argument voiced by the opposition and is the one that has the most weight with the legislators. The curriculum incorporated in the bill silences this vicious argument.

6th. The course as prescribed in the bill, does not necessitate a six to eight hour class-day as Dr. Elfrink states. It requires a five-hour class-day and when the hours devoted to clinical treatment are deducted from the required hours, class-work falls below the five hours per day. A little mathematics will prove this. There are thirty-six weeks in our school year. Illinois requires thirty hours per week class work. $30 \times 36 = 108 \times 4$ years = 4320. Now when clinic practice is deducted during the junior and senior years it will make class-work fall below five hours daily.

This will allow five hours for daily study on the basis of a ten hour work day: if the student desires to work, a ten hour work day is not excessive and those who do not feel inclined to work will not likely study even if the day is shortened.

There are no doubt other arguments that could be advanced in support of section IX of this Bill, but the above will suffice.

Now just a word on the definition or section I of the Bill. This definition is not intended to define osteopathic practice. It is for the purpose of defining the fundamental principle underlying the practice, for, practice

cannot be defined, because it varies with each individual, but the principle underlying the practice can be defined because it is a fixed quantity.

The literature "Three Factors" and "Health Hints" gotten out as legislative propaganda literature should make this point clear.

I think that we are all agreed that there are three Natural Laws that safeguard the health and well-being of our bodies.

The drug system places chief emphasis on the Law governing chemical changes in the body. Their practice is the outgrowth of this conception.

The mental system places chief emphasis on the Law governing psychological activities in the body. Their practice is the outgrowth of this conception.

The osteopathic or physical system, places chief emphasis on physics or the Law governing structural integrity in our body mechanisms. Our practice is the outgrowth of this conception.

The definition states the above thought clearly, namely, that our profession holds that, structural integrity of the body mechanism is the most important single factor to maintain the well-being of the organism. Be sure and get this point, for the success of our entire legislative effort and our professional growth depend upon the above stated fact.

What harm is there in stating this fact in our laws? I believe in letting the world, know what we stand for.

But let us still be a little more explicit on this point. I think that we are fully agreed that osteopathic practice relies chiefly on the adjustment of body structure, for structural integrity is the only guarantee of efficient function. This is the point that gives our school its distinct individuality and is such a self-evident truth that discussion on this point seems superfluous.

But let us not allow differences of opinion to spoil existing harmony. Let us be willing to give and take for the good of the cause, and be willing to be governed by the wish of the majority. The writer has nothing but the good of the profession at heart and feels that the same motive governs the acts of others.

The above explanation will also answer the open letter appearing in the same issue on page 60, of the "Osteopathic Truth," by Morris Lychenheim, D. O.

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Let us put this school on the proper basis — Osteopathically Owned and Controlled.

Send your pledges (not checks) to Dr. E. J. Drinkall, 1421 Morse Ave., Chicago (Osteopathic Truth).

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CLEVELAND PRESS QUESTIONNAIRE

Each day The Press submits a questionnaire to some well known person. We have with us today:

P. E. ROSCOE

Osteopath

What is your name in full?
Percy Evan Roscoe.

Have you ever had a nickname?
No.

What was your favorite sport when you were a boy?
Playing drugstore as a small boy, telegraphy as a larger boy.

What athletics did you engage or excel in when you were in school?
Basketball and football.

How did you happen to meet your wife, and where did you meet her?
In her home in Steubenville, O., where I called with a college friend.

What is your hobby today?
Osteopathy.

What was your ambition when you were a boy?
To become a physician.

If you had your life to live over what profession would you choose?
Osteopathy.

What would you do with a million dollars if you had it to give away?
Build and maintain a free hospital and sanatorium.

DR. GEO. McCOLE OF GREAT FALLS, MONT., CHANGES OPINION OF WORK GIVEN BY A. S. O.

Great Falls, Mont.,
Nov. 9, 1920.

Doctor Earl J. Drinkall,
1421 Morse Avenue,
Chicago, Ill.

Dear Doctor Earl:

Early in 1918 you asked me for my opinion on the school situation. I wrote an article which was very critical of our schools although I tried to make it not destructive, but constructive criticism.

I hardly hoped at that time that so many of the things which we deplored and others which we wished for would so soon come about. While I can speak from personal observation only about the A. S. O. I understand the situation has improved in some of the other schools as well.

I have just returned from a week's visit in Kirksville and what I saw there around the old school was a revelation to me.

It is generally known throughout the profession that the school is full of students almost to overflowing, but it is not generally known what strength there is there in the way of pure Osteopathic instruction.

While I heard no criticism at all, it is just possible that some of the students in attendance there now think they are not getting much Osteopathy. According to the old traditions it would not be much of a class if it did not rise up and kick about something, but compared with the Osteopathic instruction given about the time I attended school it is so much superior that it seems to me there is nothing left to be desired.

I attended several lectures and talked to a number of students and the idea of Osteopathic Adjustment surcharges the atmosphere of the entire Institution.

In the hospital a large corps of internes is constantly moving from room to room giving straight Osteopathic treatment. George Still in his lectures on surgery refers to non-surgical adjustment in connection with every condition. I would like to observe here that Doctor Still's chapter in the new McConnell and Teall Practice of Osteopathy on post-operative treatment especially pneumonia is a ten finger classic.

Halladay is giving the best course in anatomy that the school ever saw.

Those who have read even a page of his "Anatomy of the Spine," do not need to be told that.

The old timers, Teall and Platt, are giving straight Osteopathy of the old time ten finger variety and Lane is giving his lectures on pathology, biology, etc., in support of the Osteopathic theory of adjustment from the standpoint of pure science. The rest of the school is also doing good work.

One of the traits of human nature which we must always keep in mind when dealing with the public is that we all thoroughly enjoy criticising things about which we know nothing, but I am going to ask those who read this, and who may be in a critical frame of mind, to forego the pleasure of criticising the A. S. O., until they have made a trip there and thoroughly investigated what is going on.

I would appreciate your giving space to this article because I was so liberal in the use of your valuable columns when I criticised the situation after an Eastern trip some two years ago.

Yours fraternally,

Geo. M. McCole.

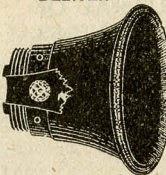
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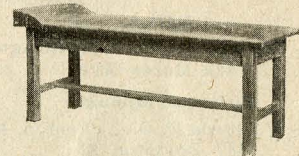
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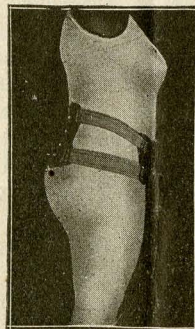
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President

H. M. Vastine, D. O. . . . Harrisburg, Pa.
102 Locust St.

Vice-President

Richard Wanless, D. O. . . . N. Y., N. Y.
347 Fifth Ave.

Secretary-Treasurer

Oliver C. Foreman, D. O. . . . Chicago, Ill.
27 E. Monroe St.

Address all correspondence to
THE OSTEOPATHIC TRUTH PUBLISHING CO.
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Editor

Earl J. Drinkall, D. O. . . . Chicago, Ill.
1421 Morse Ave.

Business Manager

George W. Goode, D. O. . . . Boston, Mass.
687 Boylston St.

Circulation Manager

H. W. Shain, D. O. . . . Chicago, Ill.
1421 Morse Ave.

CONTRIBUTING EDITORS

George W. Reid, D. O. . . . Worcester, Mass.
Francis A. Cave, D. O. . . . Boston, Mass.
Geo. F. Burton, D. O. . . . Los Angeles, Cal.
Louise A. Griffin, D. O. . . . Boulder, Colo.
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Asa Willard, D. O. . . . Missoula, Mont.
Josephine L. Pierce, D. O. . . . Lima, O.

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PRESENTATION COPIES. When making a subscription for a friend and you desire the magazine to stop at the end of the year, please make a statement to that effect when addressing us.

ADVERTISING RATES

Advertising rates will be submitted upon application to the Business Office in Chicago.

JANUARY, 1921

There is a duty to the living more important than any charity to the dead.—Works of Edgar Allen Poe.

Which—Hospitals or Sanitariums?

More Places are Needed Where a Good Osteopathic Treatment May Be Had, and Proper Care

While all the agitation is going the rounds about the need for hospitals we would like to make a plea for the patients who need—only osteopathy. There is not a doctor in the country who does not have many patients ask where they could go for a few weeks rest and at the same time have osteopathic treatment.

Where

Where will they go is the question. We have a mere dozen sanitariums in our whole profession whose territory is bounded on the north by the Arctic Ocean; on the south by the Antarctic Ocean; and as we go east we meet ourselves coming from the west.

The crying need of our profession is sanitariums.

An osteopathic sanatorium is vastly different than the usual medical institution. Our patients are getting well and they are smiling, while in the other institution they get nothing but a lot of bunk, hot air and the atmosphere is full of grumbling, grumbling, grumbling.

Results Count

Nowhere in the world do results count for so much as in our own profession. If we had such an institution in every large city turning out well individuals from the sick ones, what an advertisement for osteopathy!

DECEMBER MEETING BOSTON OSTEOPATHIC SOCIETY

The Boston Osteopathic Society held its December meeting, Saturday, December 18th at 8 P. M., in Faelton Hall, 30 Huntington Ave., Boston. President Perrin T. Wilson presided. The following program was given:

Evidences of Abnormal Physiology of the Liver—Dr. F. Fehr, Malden.

Orthopedic Clinic—Dr. Frost, Worcester.

Cervico-dorsal and Dorso-lumbar Technique—Dr. Downing, Boston.

A Layman meets the Uninformed and Antagonistic—H. W. Magoun, Ph. D. Cambridge.

Coming at a later date:

Dr. Brill of New York, and Dr. Comstock of Chicago to give us special instructions.

Such an institution can be advertised, and patients sought in the usual ethical manner, and after they have been cared for in the institution they will always be osteopathic. Printer's ink will do wonders and if properly distributed will bring returns.

Osteopathy

Osteopathy, the treatment, has revolutionized the methods of treating diseases, and it is the same osteopathy of yesterday that the people want tomorrow but they cannot get it in a hospital.

Osteopathy can set a pace so fast that no other school of practice can come within miles of it, and as our sanatoriums are established in all the cities and advertised in the newspapers of those cities then not only will a clientele be created who have heretofore known nothing of osteopathy but students will be attracted to our schools.

Each school should have a sanatorium in connection with it so that plain osteopathic cases could be given the same care and attention that surgical cases receive now. It would make the students enthusiastic, and "Enthusiasm will conquer the World."

Osteopathy is what the student needs, it is what the sick individual needs and wants—Shall we give it to them?

JANUARY MEETING BOSTON OSTEOPATHIC SOCIETY

The January meeting of the Boston Osteopathic Society was held Tuesday, January 18th at 6:45 P. M. at the Hotel Lenox. The following was the program for the evening:

Dinner was served a la carte, for all those who wished to have dinner with Dr. Conklin.

The business meeting then took place. A vote was taken to change the dues from \$2.00 to \$5.00. It was carried.

The meeting was then adjourned to Huntington Hall, 491 Boylston Street, where Dr. Conklin of Battle Creek, Mich., gave a public lecture on "Food from the Body to the Tissues."

It adjourned at 9:30 P. M.

INCOME GUARANTY CO.

Good Friends of Osteopathy

We would call your attention to the full page advertisement of the Income Guaranty Company on the inside of the front cover.

The Income Guaranty Company are very good friends of osteopathy and deserve your patronage. The Company is doing some very commendable work in the insurance field and you need have no fears in recommending them to your patients.

We wish them further success.

PHILO-BURT COMPANY

The Well Known Spinal Brace Hardly Needs an Introduction

It is always a pleasure to greet old friends, and it is indeed a pleasure to call your attention to the spinal braces manufactured by Philo-Burt Company.

Those of you who have used the brace need not be told of its advantages, and those of you who have not used the brace need only to make use of it to learn of its merits.

Co-operation helps all.

W. D. ALLISON CO.

The Allison Table is Their Specialty

We would have great difficulty in caring for our patients if we did not have a treatment table. W. D. Allison Co., of Indianapolis, have made our tables for years, and we cannot recommend too highly the quality of their work.

A. H. KRAUS

A Printer of Quality

Someone asked what we were going to do with prescription blanks, but prescription blanks are used for other purposes than for drugs and "hooch."

We all need envelopes, letterheads, statements, and lots of other things in the printing line which Mr. Kraus will be glad to furnish.

DR. J. DEASON BACK IN HARNESS

Dr. J. Deason, of 27 E. Monroe St., Chicago, has returned to Chicago after several weeks spent in post-graduate work and vacation.

PRESIDENT OF THE A. O. A. TO BE FIRST SPEAKER THIS YEAR ON WESTERN OSTEOPATHIC ASS'N CIRCUIT

Will Give Public Address on Osteopathy and Examine General Cases

Dr. W. E. Waldo of Seattle, President of the American Osteopathic Association, will visit the various local societies of the Western Osteopathic Association beginning January 17. His itinerary by days is given below. Insofar as train schedules will allow him, he will be with each local society almost an entire day. Dr. Waldo will examine general cases, both clinically and privately. The evening will be devoted to a public lecture on the subject "Osteopathy: What It Is, What It Does." Dr. Waldo's standing in the profession will give us an unusual opportunity for high grade publicity. With proper co-operation and team work on the part of every member of the Association this trip can be made to repay many times its cost. Future trips over the circuit clinic may yield greater returns in some other direction, but as an opportunity for publicity this one will be hard to beat.

Dr. Waldo's schedule:

Walla Walla, Boise, Pocatello, Salt Lake City, Grand Junction, Denver, Fort Collins, Colorado Springs, Pueblo, Albuquerque, Tucson, Phoenix, Riverside, Long Beach, Orange County, San Diego, Los Angeles, Santa Barbara, Pasadena, Fresno, San Francisco, Sacramento, Ashland, Roseburg, Salem, McMinnville, Portland.

DR. E. H. BEAN PUBLISHES HANDSOME PAMPHLET

"You Can Be Well"

Dr. E. H. Bean, the author of "Food Fundamentals," has just published a very handsome booklet on the subject of, "You Can Be Well." This booklet with its concise statements regarding diet is to take the place of the original book which is now out of print, and printers advise waiting a time before reprinting.

At present we cannot quote you Dr. Bean's price for the booklet. The booklet will be a most excellent one to give your patients as it gives concise definitions of the various types of foods and their combinations.

NEW YORK CITY MEETING

December 18.

PROGRAM

Conservation of the Tonsils—Dr. Morris M. Brill.

Application of Osteopathic Treatment to Cervical Tissues—Dr. Charles S. Green.

Hygienic Taxation—Mr. John J. Murphy.

The Collection of Clinic Fund—Mr. Marcus Goodbody.

Business Session

NOTE.—Mr. John J. Murphy, former Tenement House Commissioner under Mayor Gaynor and Mayor Mitchell, is in a position to know the tenement house conditions thoroughly, and the value of the scientific taxation in relation to hygiene. We all know the value of sanitary measures instituted by General Gorgas in the Panama Peninsula which removed epidemics there, and he once said that "by scientific taxation he could maintain a healthful condition."

Jan. 15, 1921

PROGRAM

Clinic, Past, Present and Future—Mr. W. Strother Jones.

Diabetes—Dr. H. W. Conklin.

Open Discussion of Dr. Conklin's Paper—Members.

Dorsal Technique—Dr. W. A. Merkle.

Business Session

"CAMP ABENAKI"

The Osteopathic Camp for Girls

Dr. Emma Greene Wood of Maplewood, N. J., is the originator of "Camp Abenaki" for girls from the age of twelve to fifteen.

"Camp Abenaki" is in Readfield, Me., on Lovejoy Lake, an ideal place for a summer camp of this nature. Dr. Wood's policy is to give the girls of this age a healthy, happy summer which will involve a sane use of their youthful energy, but which will not allow a nervous strain of the sort apt to be caused by competitive athletics. The regime is flexible and is to be adapted to the needs of each individual girl.

The girls will have osteopathic attention during their sojourn at the camp. Dr. Wood would be pleased to send literature to those interested, so as the months go by, do not fail to mention Camp Abenaki to those interested.

DR. FRANK POWERS MOVES TO ELGIN

Dr. Frank Powers has removed his office from Suite 901, 27 E. Monroe St., to the Hubbard Block, Elgin, Ill.

A Case of Gangrene

By F. J. Feidler, D. O., Seattle, Washington

Have you ever treated a case of gangrene? I have. Prior to this case I declined three other cases that came to me, because I had accepted the Medical decree that a high amputation was the only means of saving life—and that the amputation too often failed.

This case was a man 76 years old, who said he had not had a day of sickness since his schooldays.

Two years ago he, occasionally, felt some pain in his big toe. These painful spells gradually become more frequent and finally were continuous.

At first he applied various liniments, to whose efficacy he credited the painless intermissions.

When the liniments failed he consulted Medical doctors, who, at first, diagnosed the condition as gout or arthritis, and experimented with various dope, internally and externally, with worse than negative results.

Finally, one doctor pronounced the condition to be gangrene, and subsequent medics concurred in the diagnosis.

After trying every method from poultices to violet rays with no benefit, the doctors informed him that the only chance he had to live more than a month or two was an amputation above the knee. This he refused. Finally a friend induced him to come to me. This is a description of the condition presented to me.

The big toe was black. The other toes were dark but not as dark as the big toe. Each toe was a little lighter than its neighbor, the smallest toe being a dead, ashy gray color. Toe nails had not grown for six months. The line of demarcation was very abrupt, following the line between the tarsal and metatarsal bones. Below the line of demarcation the foot was of normal size, grayish color, cold, and the toes could not be moved in response to the will. Above the line of demarcation the foot only was swollen greatly, and bluish in color, but did not pit on pressure. Above the ankle the leg showed nothing unusual up to Scarpa's Triangle, where decided muscular rigidity prevailed. Third, fourth and fifth lumbar vertebrae were rigidly drawn together.

At first I declined the case, but being urged by the patient as a last resort I agreed to "do my best."

My treatments were directed to increase the flow of blood to and from the leg by relaxing the constricting muscles at Scarpa's Triangle that were compressing the femoral vessels and obstructing circulation to and from the affected parts; relaxing the tensed lumbar muscles; keeping the foot immersed in hot boric acid water alternate hours during the day; and keeping the foot warm at night with antiseptic clay poultices.

The immediate favorable results astonished both the patient and myself. In two days the "line of demarcation" disappeared. Improvement was noted daily. Gradually the toes resumed normal color and sensitiveness. At the blackest part at the base of the big toe a deep pocket of pus had to be opened, leaving quite a cavity. After the pus was evacuated considerable honey colored lymph persisted in oozing through the opening during the six weeks it was kept open by drains to permit the dead tissue to be replaced by new growth from the inside.

Ultimate recovery was complete and perfect, a slight scar only showing at the base of the big toe.

All the nails are growing again normally.

I will never refuse a case of gangrene again though it be advanced ever so far.

DR. R. K. SMITH ELECTED PRESIDENT MASSACHUSETTS OSTEOPATHIC SOCIETY

At the annual meeting of the Massachusetts Osteopathic Society in Boston on January 4 the following officers were elected: President, Dr. R. Kendrick Smith, Boston; Vice-President, Dr. Myron P. Barstow, Boston; Secretary, Dr. E. Laura Meeder, Lynn; Treasurer, Dr. Peter J. Wright, Hyde Park.

The Program

Hon. Malcolm E. Nichols, Chairman of the Massachusetts Housing Commission will speak at the 12:30 luncheon on "Relation of the Profession to the Public."

"Original Cervical and Dorsal Technique."—Dr. Edwin M. Downing, York, Pa.

"That You May Know More of Osteopathy."—Dr. John B. Buehler, New York City.

"Physical Education of the Child." (Illustrated.)—Dr. Philip S. Spence, Hartford, Conn.

"Diseases of the Throat."—Dr. Herbert H. Pentz, Boston.

"Catarrhal Deafness."—Dr. Clyde R. Cowan, Boston.

"Leucocytosis."—Dr. Perrin T. Wilson, Cambridge.

"Gastric Hyperacidity."—Dr. Robert H. Veitch, Medford.

"Important Points in Diagnosis of Acute Surgical Conditions of the Abdomen."—Dr. Orel F. Martin, Medford.

"Fractures of the Axis."—Dr. Harold P. Frost, Worcester.

"Applied Psychology."—Dr. George W. Reid, Worcester.

"Senile Changes and their Importance to the Osteopath."—Dr. Marjorie Johnson, Boston.

"Empyema."—Dr. Charles W. Brunninghaus, Worcester.

"Orificial Surgery and the Osteopath."—Dr. Franks C. Nelson, Malden.

"Legislative Matters."—Dr. Matthew T. Mayes, Springfield.

"High Heels a Crime."—Dr. R. Kendrick Smith, Boston.

"The Osteopathic Management of Obstetrical Cases."—Dr. Irving Hall, Somerville.

"Paralysis in Children."—Dr. Wm. B. Shepard, Providence, R. I.

"Technique."—Cervical.—Dr. C. H. Downing, Boston.

Dorsal.—Dr. W. Arthur Smith, Boston.

Lumbar.—Dr. Lester R. Whitaker, Boston.

Sacral and Innominates.—Dr. Mary Emery, Boston.

Ribs.—Dr. Ward C. Bryant, Greenfield.

"Cataracts."—Dr. Emily G. Wilson, Boston.

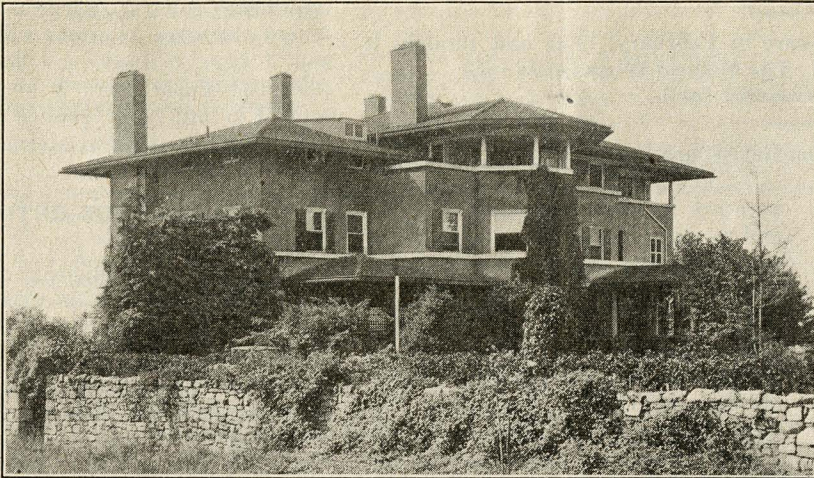
"Why Osteopathy."—Dr. Wm. H. Jones, Marlboro.

"Publicity or Perish."—Dr. Francis A. Cave, Boston.

WORCESTER OSTEOPATHIC PHYSICIANS TO ORGANIZE

The osteopathic physicians of Worcester, Mass., will be organized into a local society within the next two weeks.

Dr. Olive B. Williams will be the first secretary.



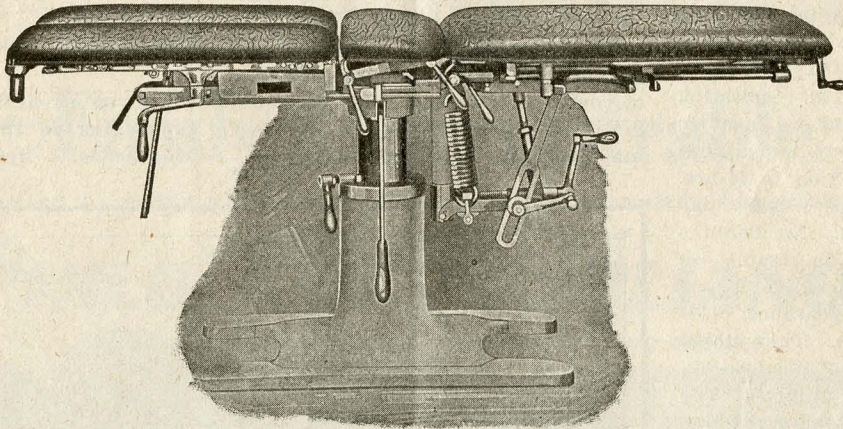
MAY
WE
SERVE
YOU?

WE are expert in Milk Diet treatment associated with Osteopathy. We exclusively use this combination of amazing power. We report promptly and delight in being loyal to your welfare. May we serve you in the Sanitarium care of some disheartened patient? Personal direction of Drs. E. E. and H. C. P. Moore.

The Moore Sanitarium

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DON'T produce a lesion in your own back trying to remove one from a patient's back.

PROTECT YOURSELF!

Let a McMANIS TABLE do the heavy work!
With a McMANIS Table you can:

Eliminate FIFTY PERCENT of the hard work you are subjected to.

Obtain quicker and better results.

Treat the heavy weight patient as easily as you can the light weight.

AND patients like the treatments better!

WRITE TODAY FOR OUR NEW CATALOGUE

McMANIS TABLE COMPANY

**KIRKSVILLE,
MO., U. S. A.**

Broncho-Pneumonia-Tuberculosis Cured by Osteopathy Alone

An interesting case came under my care in February, 1920, and thought it might interest the profession. The Medical Works class such cases as necessarily fatal.

Dr. H. M. Vastine, Harrisburg, Pa.

The patient was about 45 years old, married, and was suffering from a supposed severe pleurisy located at left side on a level of the 6th rib extending in an oblique direction down over left epigastrium.

The onset was preceded by a chill and subsequent fever with temperature gradually developing. The pain was very severe for a week or ten days. The temperature gradually mounting each day until it reached 104, evening temperature, with drop to 101 and a fraction in the morning, but running irregularly. Cough developed within a few days. Sputum was first muco-purulent and later purulent, greenish color at times. Some Haemoptysis, as much as a spoonful at a time. The sputum continued in heavy greenish muco-purulent form and very profuse. In ten days the pain subsided. Thus the initiatory stage was passed. There was a rapid loss of flesh. Fever irregular, repeated chilliness—fever mounting to 104 and a fraction in evenings, dropping to 97 and 98 in morning. Pulse 135 to 140, respiration very rapid and shallow. Leucocyte count 14500. Urine fairly normal, but very scanty, as low as 8 oz. in 24 hrs. Sputum analysis disclosed many pus cells and Pneumococci. No Bacillus Tuberculosis disclosed in sample but laboratory would not negative Tuberculosis, as it gave appearance of it from clinical symptoms. They stated several samples may not disclose bacilli, while another might. The physical signs became more definite, and area of consolidation from fifth rib to inferior border appeared. There were harsh vesicular-bronchial rales; also many moist and crackling rales due to plural thickening were marked. Disease remained unilateral however.

At end of first week right shoulder became very sore, and a few days later right hip at which points large metastatic abscesses gradually developed. Patient could only lie on back and gradually became more emaciated. Left lung softened and great quantities of purulent sputum was expelled with great difficulty. Tem-

perature continued irregular. Pulse and respiration as before stated at end of fourth, fifth, sixth week and continued with slight variation on thru to eighth and tenth week.

Had surgeon in consultation as to advisability of opening abscesses, but patient would not consent. The eleventh week lung began clearing. Twelfth week was much clearer and was fairly well cleared by the thirteenth week. Abscesses on right hip and shoulder were very large and pointing slightly, but patient finally agreed in order to hasten recovery, to having them opened surgically, which was done, and two quarts of greenish pus was taken. Sutures healed nicely. Temperature, pulse and respiration gradually assumed normal or thereabouts.

Patient weighed about 80 pounds on arising from bed. Used paper napkins to collect sputum, nurse burning them every half day. Consumed ten thousand to collect sputum. Patient is now seemingly well. Weighs 115 pounds, and has all the appearances of complete recovery. Hair came out largely, but has returned and is very luxuriant and healthy. Diagnosis—

Broncho-Pneumonic Tuberculosis concurred in by surgeon who lanced abscesses. Patient received Osteopathic treatment solely. Surgeon simply lanced abscesses. Lesions were: Axis and 3 Cerv. 7 Cerv. and first Dor. Flattened upper Dor., 3 and 6-Dor. rotated to left, 7-Dor. rotated to right. Left 5 rib depressed at sternal end.

DRS. MOLYNEUX RETURN

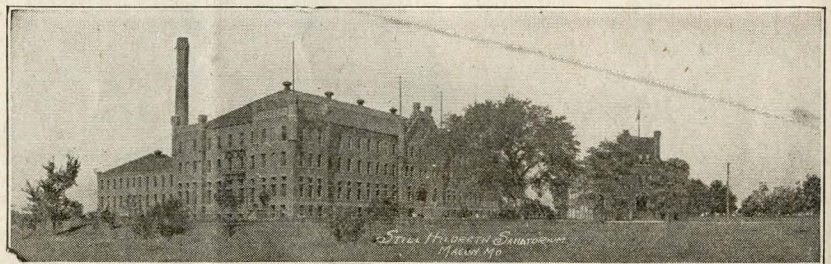
Dr. Albert J. Molyneux and Dr. Cora Belle Molyneux of 2859 Boulevard, Jersey City, N. J., have returned on the White Star Liner Olympic, from an extended tour of the British Isles, Holland, Belgium, France, Switzerland and Italy.

Enroute the doctors gave special attention to Osteopathic progress in Europe, interviewing many prospective students for the study of Osteopathy. They state that there is a wonderful field in Europe for the practice of Osteopathy and that there will soon be an osteopathic hospital and college established in London by prominent laymen and osteopathic physicians abroad.

The doctors will immediately resume their practice and will shortly open their free osteopathic clinic for deserving cases.

SOMETHING TO THINK ABOUT?

Are you a real Osteopath or are you rummaging in the junk pile of the drug school?—McCole.



Still-Hildreth Osteopathic Sanatorium

MACON, MISSOURI

DEDICATED TO THE CURE OF NERVOUS AND MENTAL DISEASES

Address All Communications
to the Above Institution.

A. G. HILDRETH, D. O.
Superintendent

Dr. Spence Gets Some Good Publicity

DR. SPENCE SPEAKS AGAINST PASSAGE OF FESS-CAPPER ACT

Claims It Means State System of Medicine Controlled by Allopaths

Hartford Doctor Offers Amendments

Wants Equal Representation in School Inspection Work

Dr. Philip S. Spence of this city, representing the legislative committee of the State Osteopathic Society, the Hartford Dental Association and as state chairman of the National Federation of Public School Neighborhood Associations, spoke at Washington Wednesday night in protest against passage in its present form of the Fess-Capper bill, establishing a federal department of physical education.

The hearing on the bill was given before the House committee on education and was largely attended. Dr. Spence voiced opposition to the measure on the ground that in its present form it would establish a state system of medicine dominated by the allopathic school and to prevent this he suggested several amendments.

Dr. Spence's Argument.

In speaking against the bill, Dr. Spence said: The mothers and the fathers of the children of our country together with the osteopathic, homeopathic, and eclectic physicians, dentists, optometrists, Christian Scientists and other professions rightfully insist and they demand that there shall be

no system of state medicine established in this country. They demand that everyone shall have an opportunity to decide what form of treatment is wanted and from whom it shall be received for their children and for themselves. Each one of them protests against a system of state medicine being instituted at Washington under the guise of physical education.

Where Objection Lies.

If the system of state medicine under allopathic control were withdrawn from this bill and equal recognition and equal representation granted to other practitioners, as well as to the allopaths, then the fathers and mothers, osteopathic, homeopathic and eclectic physicians, dentists, optometrists, and other practitioners would help to pass this bill.

But they contend that if the Fess-Capper bill (and the six other bills similar to it, namely, the Smith-Towner federal education bill, the Sheppard-Towner maternity bill, the France census, the France national health department bills and the social welfare bills) become law then allopaths will be placed in control of the personal and public health work in government offices to the exclusion of all other physicians.

Files Amendments.

His amendments call for the appointment of at least one man or woman representing each of the schools of practice recognized by the state laws. Doctor Spence also emphasized that the health certificate given to a parent or guardian of a child as the result of

physical examination made by an osteopathic, homeopathic or allopathic physician, optometrist, dentist or other specialist shall be accepted by the school physical examiner in lieu of an examination made by him. He proposed one limitation, that an examination made by a dentist, optometrist, oculist, or other specialist shall be accepted only insofar as it applies to his own professional field.

—Sunday Courant, Jan. 16, 1921.

Would Modify Bills on Physical Education

(Special to The Courant.)

New York, Jan. 17.

Dr. Philip S. Spence of Hartford, an osteopathic physician, appeared before a notable group of osteopaths at the Hotel Plaza in this city last night. He told of the results of a trip which he made to Washington recently when he urged the modification of present bills before the Senate and Congressional committees on physical education. The following resolution was adopted by the New York osteopaths:

"Resolved, That the Osteopathic Society of the City of New York opposes the passage of the Smith-Towner, Fess-Capper and all other federal bills which would establish a system of state medicine under the control of any one school of medicine unless these bills are modified so as to have representation from each school of practice in the national, state, county and city health and physical education departments instituted by these bills."

Easily Demonstrable

We offer to every physician the opportunity to prove to himself and his patient, the superiority of the

PHILO BURT APPLIANCE

over all other mechanical spine supporting devices.

Its support to the shoulders is as firm as that of any plaster of paris, leather, or iron ribbed jacket, while yet it is flexible and yielding, and light in weight.

It is hygienic, being instantly removable for bathing, examination or manipulation treatment of the vertebrae.

It is durable and efficient, and is made to order only to individual measurement for each case.

Made to Measure-Sold on Trial

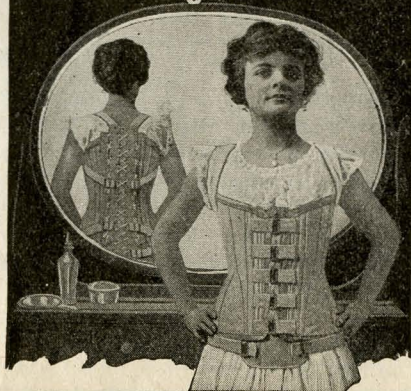
We will gladly send you full information about this perfected Spinal Appliance and our plan of co-operation with physicians. Please send a postal today.

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Jamestown, N. Y.

**Crooked Spines
Straightened!**



**McConnell and Teall's
"THE PRACTICE OF OSTEOPATHY"**

**The Peer of Osteopathic Literature
and Incomparable with Previous
Editions**

The fourth edition of "The Practice of Osteopathy" revised and edited by Dr. Carl P. McConnell of Chicago, a former president of the A. O. A. and member of the faculty of the American School of Osteopathy, and now a member of the faculty of the Chicago College of Osteopathy; and Dr. Charles C. Teall of Kirksville, Mo., a former president of the A. O. A. and now Dean of the faculty of the A. S. O., professor of Practice and Clinical Osteopathy, and Editor of the Journal of Osteopathy. This volume is rewritten with the collaboration of eleven of our foremost workers. 808 pages, flexible covers of imitation leather. Price \$8.00 from J. F. Janisch, Kirksville, Mo., the publisher.

The Peer

This volume presents so many changes that it is really a new book rather than a revised edition. The book easily surpasses any of the previous editions and in fact is so far superior to them that there is no comparison. With the exception of the book written by Dr. A. T. Still, himself, this book may be considered the peer of osteopathic literature.

The definiteness and positiveness of the statements made in the introduction of the book are most refreshing and give one the confidence to fight hard for Osteopathy, the premier of all methods of treating disease. To have men of the calibre of Drs. McConnell and Teall reiterate the same principles as written by themselves years before is a beacon of no small measure for the new graduate who is torn between two emotions; the pathway of the crowd or the pathway of the pioneer. It would be well for all those who waver to read this introduction every time they think they should browse in the other man's cornfield.

The Collaborators

We take pleasure in calling attention to the collaborators in this book. We would like to make a special mention of each and every man but space will not permit us to do so. The value of the book is increased immensely by the contributions of these workers.

Dr. Raymond W. Bailey of Philadelphia has contributed under the title of "Defective Children."

"Ye Booke Review"

Dr. Edgar S. Comstock of Chicago writes from his store of knowledge with reference to "Infectious Diseases."

Dr. J. Deason of Chicago has made the diagnosis of "Ear, Nose, and Throat" diseases within the scope of the general practitioner and materially aids his ability for the treatment of the same.

Drs. A. G. Hildreth and L. Van Horn Gerdine of Macon have added from their vast experiences the vital points in the diagnosis and treatment of "Mental Diseases."

Dr. H. S. Hain of Kirksville has contributed a most excellent section upon "Deformities" and their treatment.

Dr. Earl R. Hoskins of Chicago, who for years was with the Research Institute, has written clearly upon "Diseases of the Blood."

Dr. Charles J. Muttart of Philadelphia, well known throughout the profession for his work in Gastro-Enterology, has written the section of "Diseases of the Stomach."

Dr. George M. McCole of Great Falls, brings to the fore the wonder working power of Osteopathy in "Influenza."

Dr. Charles C. Reid of Denver, has under the title of "Ophthalmology" given a very comprehensive treatise upon diagnosis and treatment of eye conditions.

Dr. George A. Still of Kirksville, has written an article or section entitled "Post-operative Treatment." Experience truly counts and every D. O. should memorize this section if he would become enthusiastic about Osteopathy and if he would seek an impetus for further study into our marvellous science. Dr. Still has in no mistakable terms told of his experience with Osteopathy in post-operative treatment.

The Complete Book

As we look at the book, as a whole, we are impressed with its completeness. Every conceivable division of our profession is covered in a way that if this one book were known thoroughly, would make the general practitioner a power in his community. Knowledge is Power, it is said.

Again we would mention that the standard of Dr. Still is followed quite closely in this "Practice of Osteopathy," and if we live up to its teach-

ings we will soon be setting a pace that no set of doctors can follow.

Every D. O. who has an old edition should have the new one, and those who have none should buy as soon as possible and begin an intensive study of its contents.

We congratulate Drs. McConnell and Teall upon the excellence of the book and look forward to their writing other books to strengthen our profession.

THE FUNDAMENTALS OF HUMAN ANATOMY

"The Fundamentals of Human Anatomy," written by Marsh Pitzman, A.B., M.D., Professor of Anatomy in the Dental Department of Washington University, St. Louis, is a book of 356 pages with one hundred one illustrations. Cloth binding, \$4.00. C. V. Mosby Co., 801-9 Metropolitan Bldg., St. Louis, Mo., publishers.

Dr. Pitzman has written the book from the standpoint of the practitioner rather than from the standpoint of the anatomist. Dr. Pitzman states his aim as follows: "After making due allowance for the exaggerated importance any group of men necessarily attach to their particular work, the fact remains that any serious attempt to improve the anatomic knowledge of practitioners is worthy of the consideration of all those interested in the advancement of medical education."

The book begins with the "Subdivisions of Anatomy" and after a brief outline of the histological makeup of the body begins the study of the body upon the "Systemic Plan" in Part I and the "Regional System" in Part II. The systemic plan is the study of a single tissue, a collection of cells of similar structure and function, such as the skin, or muscles, or bones for example, may be considered as a unit and traced through the body. The other method is the regional.

Dr. Pitzman has made the subject very interesting and all through the book's numerous chapters will be noted his logical thought. The illustrations are exceptionally good.

The book is well worth consideration and extensive study.

EXOPHTHALMIC GOITER AND ITS NONSURGICAL TREATMENT

"Exophthalmic Goiter and its Non-surgical Treatment" by Israel Bram, M.D., Instructor in Clinical Medicine, Jefferson Medical College, Philadelphia; Physician on Visiting Staff of Philadel-

phia General Hospital; and Member of the Society for Study of Internal Secretions, etc., is a book of 438 pages, cloth binding, C. V. Mosby Co., 801 Metropolitan Bldg., St. Louis, publishers, price \$5.50.

The object of the book is best stated in the preface, "In offering the forthcoming views and facts to the reader, the author hopes, (1) to stimulate a keener interest in the disease in question than has heretofore been evinced by the busy practitioner; (2) to convince him that exophthalmic goiter does not belong in the realm of surgery; (3) to persuade him eagerly to attempt an early diagnosis and institute the proper nonsurgical treatment with a will to win."

The subject is treated as follows: Anatomy, Physiology of the Thyroid, Pathology, Pathogenesis, Symptomatology, Diagnosis and Differential Diagnosis, Shell Shock (?) in Soldiers, Diagnostic Tests, Course and Prognosis, The Nonsurgical Treatment, A Few Case Histories, Conclusions on the Treatment of Exophthalmic Goiter, and Articles by the Author.

The non-surgical treatment occupies one hundred pages and is quite comprehensive from the medical standpoint. We object most emphatically to the third paragraph of Chapter X,

which is as follows: "A patient suffering with such a progressive disease as Exophthalmic Goiter requires early diagnosis and prompt interference—treatment directed toward elimination of thyroid products from the blood and curbing of excessive thyroid secretion before serious permanent damage is effected in the nervous and vascular systems. In this connection it is well to remember that many patients having gone the rounds of clinics and doctor's offices, discouraged through tardiness or absence of symptomatic relief, resort to the alluring snares of osteopaths, chiropractors, Christian Science "healers" and the various other cults which have no right to handle such morbid conditions, and finally die of heart failure, tuberculosis, exhaustion, or during an attack of insanity."

The doctor is evidently very ignorant of the many people who have been cured through osteopathy. We can forgive him on the ground of his being uninformed, since he is not a graduate in Osteopathy.

Dr. Bram brings out in this same chapter the close relationship of intestinal putrefaction and the goiter. He also tells of the influence of diet, particularly the reduction through the

use of an animal protein free diet. Hygiene, hydrotherapy, dietetics, general medical treatment, local treatment, electrotherapy, and psychotherapy complete the chapter. The psychotherapy section is spoken of as very important and Dr. Bram has handled the subject in a detailed manner.

The Complete Book

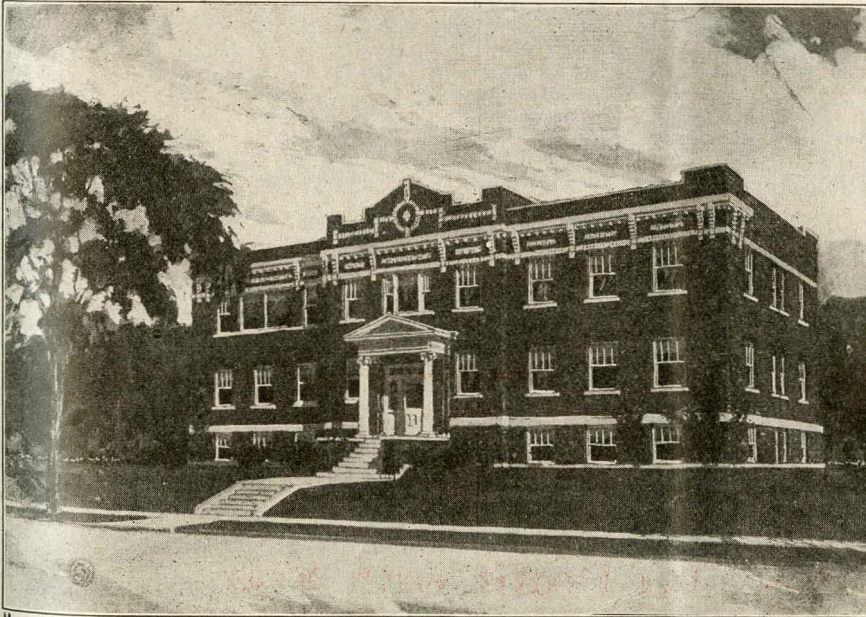
The book is very good, as a whole, and since the subject matter is covered in detail the addition of the book to one's library as collateral reading would be worth considering.

DR. BLANCHE ELFRINK TO LIMIT PRACTICE

Dr. Blanche Mayes Elfrink, of 27 E. Monroe St., Chicago, recently announced that hereafter she would limit her practice to Obstetrics and Gynecology, including Pelvic Surgery.

DR. LILLIAN WHITING WITH HER MOTHER

Dr. Lillian M. Whiting, of 1315 Fair Oaks Ave., South Pasadena, Calif., announced recently that her daughter, Dr. Lillian Whiting, would be associated with her in practice.



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

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- | | | | |
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| 2. Orthopedic | 4. Obstetrics | 6. Nose and Throat | 8. X-Ray and Laboratory Diagnosis |

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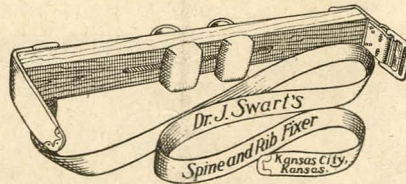
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