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TO THE



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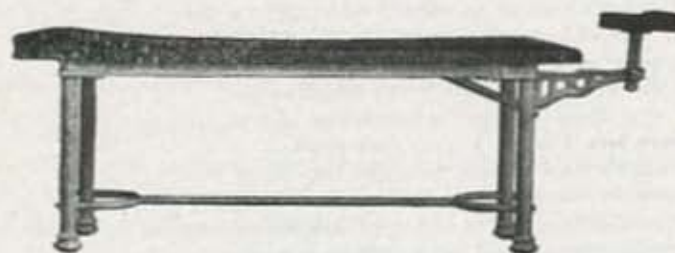
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THE BLACK MOSQUETAIRE—A TALE OF FRANCE.

CANTO II.

RICHARD HARRIS BARRHAM, 1788-1845.

I abominate physis—I care not who knows
That there's nothing on earth I detest like "a dose,"—
That yellowish-green-looking fluid, whose hue
I consider extremely unpleasant to view,
With its sickly appearance, that trenches so near
On what Homer defines the complexion of fear;
Χλωρον θεος, I mean, a nasty pale green,
Though for want of some word that may better avail,
I presume, our translators have rendered it "pale;"
For consider the cheeks of these "well booted Greeks,"
Their Egyptian descent was a question of weeks;
Their complexion, of course, like a half-decayed leek's;
And you'll see in an instant the thing that I mean in it,
A Greek face in a funk had good deal of green in it.

* * *

I repeat, I abominate physis; but then,
If folks will go campaigning about with such men
As the Great Prince de Conde and Marshall Turenne,
They may fairly expect to be now and then checked
By a bullet or sabre cut. Then their best solace is
Found, I admit, in green potions and botuses;
So, of course I don't blame him St. Foix, wounded and lame,
If he swallowed a decent *quant. suff.* of the same,
Though I'm told, in such cases it's not the French plan
To pour in their drastics as fast as they can,
The practice of many an English *sarrazin*
But to let off a man with a little *ptisanne*,
And gently to chafe the *patella* (*knee-pan*).

* * *

"Oh, woman!" Sir Walter observes, "when the brow
's wrung with pain, what a minist'ring Angel art thou!"
Thou'rt a "minist'ring Angel" in no less degree,
I can boldly assert, when the pain's in the knee:
And medical friction is, past contradiction,
Much better performed by a She than a He.
A fact which, indeed, comes within my own knowledge:
For I well recollect, when a youngster at College,
And, therefore, can quote a surgeon of note,
Mr. Grosvenor of Oxford, who not only wrote
On the subject a very fine treatise, but, still as his
Patients came in, certain soft-handed Phyllises
Were at once set to work on their legs, arms and backs,
And rubbed out their complaints in a couple of cracks.

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PHYSIOLOGICAL EFFECTS OF MECHANICAL THERAPEUTICS.

L. VON H. GERDINE, A. M., M. D., D. O., KIRKSVILLE, MO.

The various mechanical methods used to influence function or structure in the body are ordinarily referred to under the name of Massage by the Physiologist as well as the Physician. Since however the term Massage is also used in reference to certain characteristic manipulations, it is better to use the word—"mechano-therapy" in the broader sense of including all mechanical methods and then designate the special methods by the names commonly given them as: the Swedish "Cure-gymnastics," Massage in the limited sense of the word, Orthopedics, Exercise, and Osteopathy.

Of **exercise** there is little need to speak. It consists in active movements which the subject himself by his own strength performs.

Swedish "Heligymnastik" consists of movements of resistance, in which either the patient performs the movements, while the physician makes the resistance suitable to the strength of the patient, and the desired effect; or the physician performs the movement with part of the patient's body, while the patient makes resistance.

Massage consists of passive movements performed by the physician with or on some part of the patient's body, the patient being always passive.

TECHNIQUE.—The technique according to the Mezger school and most German masseurs may be arranged in four divisions, namely;

1. Effleurage, or stroking,
2. Frictions, or rubbings,
3. Petrissage, squeezing or kneading,
4. Tapotement, or striking.

STROKING consists of centripetal movements, made with varying degrees of pressure, usually over a considerable surface of the skin, and frequently over the larger veins with the flat of the hand, its ulnar or radial edge, base of the hand, or thumb and forefinger. Its chief effect is to accelerate circulation in the blood and lymph vessels.

FRICTIONS are rubbings which are most frequently made with the volar side of the thumb and with the last phalanx of the middle three

fingers. The finger tips move in small circles over a small area often exerting considerable pressure. They are employed chiefly to promote the regressive metamorphosis of exudations and infiltrations and to press the refuse so arising into the most external lymph canals. Examples—sprains, strains, rheumatic affection of joints and muscles.

KNEADING is performed by grasping a part of the tissues to be acted upon between the thumb and fingers and making a series of pinchings. The tissues are frequently lifted somewhat out of their ordinary position. Its action is the same as that of rubbing, furthermore it acts as a mechanical stimulus to the muscles.

STRIKING consists of blows, raps or choppings given by the flat of the hand, or by its ulnar edge, or by the tips of one or more fingers. It is a powerful means of mechanical excitation. It is performed in different ways according to the different organs operated upon, thus the skin and peripheral nerve endings are best treated by blows with the flat of the hand; the nerve trunks by the finger tips; and the muscles by choppings made with the ulnar side of the hand.

This classification is based upon the physiological effects of the different manipulations.

Orthopedics is that branch of surgery which has to do with the mechanical correction of body deformities.

Osteopathy accounts for disease by bony displacements, especially in the spinal column and attempts to correct the same and thereby bring about a cure.

The history of modern mechano-therapy practically begins with the middle of the nineteenth century. "Its history," says Kleen "conveys the same impression as the history of medicine in general; namely, that the greater part of what has been gained has been gained within this period. Prior to this time, beyond receiving slight attention from a few scattered physicians it was in the hands of laymen who were unable either to comprehend its real significance or to introduce it to the scientific world. Mezer of Amsterdam, first gave it a strong impulse in the early sixties, and, through his pupils, has exercised a powerful influence upon the standing of massage in the medical world. The hitherto so little heeded mode of treatment was now taken under the protection of certain of the foremost German and Austrian physicians. The result was that it became fixed as an integral part of the healing art in all German lands, and that its practice is now almost entirely in the hands of educated physicians who either practice it in connection with other specialties or devote themselves to it as an exclusive specialty."

THE PHYSIOLOGICAL EFFECTS OF MECHANO-THERAPY.

I. ON THE CIRCULATION.

Colombo found that general massage raises blood pressure from 65 to 100 m. m. Massage of the abdomen alone, on the contrary lowers the pressure from 50 to 65 m. m.

Edgecombe & Bain found that general massage caused an initial rise of brief duration, but produces as an after result a fall in arterial pressure. Deep massage and compression of abdomen causes an immediate rise in pressure by dispersion of the blood accumulated in the splanchnic veins into the systemic circulation. The venous pressure was always relatively raised.

Brunton & Tunnicliffe found that during massage of muscles the flow through them is increased. That immediately after an accumulation of blood occurs in the massaged muscles which is rapidly followed by an increased flow through them. Massage of a large area causes at first a slight rise in pressure followed by a fall which in some cases amounts to one-fifth of the initial blood pressure. Their method was the determination of the amount of blood issuing in a given time from the efferent vein. A cannula was inserted into the femoral vein and all branches except that coming from the extension muscles were ligatured. The routine was to ascertain the amount of blood lost in a given time. 1st, during simple bleeding; 2nd, during massage of those muscles; and 3rd, after massage.

Cautru found that deep massage lowers peripheral arterial pressure and diminishes the pulse rate. Superficial exciting massage increases temporarily the blood pressure and number of heart beats. By different movements therefore, the circulation can be regulated and the equilibrium rendered normal. This principle he applied to diseases involving arterial hypertension with excellent results, i. e., migraine, abdominal plethoras and angina pectoris.

Ekgren in eleven cases reports that abdominal massage lowered the vessel tone and quieted, slowed and regulated the heart's action.

Kleen experimented with purely skin and purely muscle massage and with mixed massage. The first caused a rise, the second a fall of blood pressure, and the last varied according to the kind of massage used.

Dolega found that light massage increases pressure and heavy massage lowers it. Abdominal massage at first increases and later lowers pressure. His explanation is that the splanchnics are stimulated to constriction, thus driving the contained blood into the general circulation, while by a longer massage relaxation of the vessel walls takes place, due to disturbed tonus.

Golz opened the abdomen of a frog and applied percussion over the stomach and gut. The peritoneum at first became paler from constriction of the vessels. Later the paleness was replaced by dilatation and redness owing to the subsequent relaxation of blood vessels. At the same time the heart's action was retarded owing to the reflex influence on the vagus.

Hasebroek showed that the influence of rhythmic shakings, both on the heart and between the shoulders caused a slowing of pulse in cases of pathological increase; increased tension and greater height of pulse wave and more energetic dilatation of the arteries. The cause, he thought, lay in the increased heart tonus and in the contraction of the peripheral arteries, through excitation of the vaso-motor centers. He measured the respiratory exchange and found a decrease in the CO₂ output, hence the slowing of the pulse, he attributed to a more or less direct excitation of the vagus and vaso-motor centers and also to their excitation by reason of the increased CO₂ in the blood.

Eccles found that light friction on cutaneous nerves produces acceleration of the heart beat, if followed by harder rubbing, rolling and squeezing of the skin, the effect is reversed, and a slowing of the pulse occurs.

In general then, the effects of general massage is at first to constrict the peripheral vessels through the excitation of the vaso-motor nerves and thereby increase the peripheral resistance. The venous flow is also increased. This throws more work upon the heart and increases its beat and the pulse rate temporarily. Later, the rise in venous pressure causes a fall in the arterial pressure, hence a slackening of the heart beat and of the arterial pulse. Meanwhile, too, the tonus of the peripheral vessels has become weakened owing to the constant irritation, therefore dilatation occurs, thus again throwing less work upon the heart. Abdominal massage causes a determination of the blood to the abdominal vessels, thus lessening the peripheral supply and, as Eccles has found, even causing the feet and hands to become cold. Also in some cases the patient has fainted owing to anemia of the brain.

II. ON THE BLOOD FORMING ORGANS.

J. K. Mitchell made observations on thirty-five subjects, a few of whom were well, but most were suffering from anemia. After massage he found a great increase in the number of red cells, and in about one-half of the cases the hemoglobin was also increased.

III. ON BODY HEAT.

Under direction of Prof. Winternitz of Vienna, Dr. Pospisihil made some calorimetrical studies, in which he showed that friction or rubbing of the skin increased the heat loss about 95 per cent, hence the value of

massage in fevers with the excessive retention of heat, that is cooling of the skin through radiation is favored.

Eccles states that as the axillary and surface temperature rises under massage, the rectal (internal) temperature falls. Exactly the opposite effects are produced by kneading the abdomen.

IV. ON MUSCLES.

By means of experiments with the ergograph, Maggiora came to the following conclusions:

1. Massage applied to resting muscles increases their power for work and retards fatigue.
2. The beneficial effects is within limits proportional to the duration of its application. Beyond this no augmentation occurs in work done.
3. Massage prevents the accumulation of fatigue products in a muscle and permits the muscle to do more work than with equal periods of repose.
4. The various movements of massage influence the muscle differently as regards its power to work.
5. In a muscle enfeebled by fasting, massage increases notably its power for work.
6. In a muscle fatigued by any cause that act on the general muscular system, such as forced marches, insomnia, excessive mental work, and the like, massage exerts a restorative action.

V. ON THE FLOW OF LYMPH.

Genersich measured the flow of lymph through the thoracic duct and found that massage increased markedly the flow.

Reibmayr inserted a small glass cannula into the lymphatic vessel which accompanied the saphenous vein of a dog and found that no flow of lymph took place so long as the leg was quiet. As soon as the leg was massaged however, the lymph flowed freely.

Hough states that the amount of lymph leaving an organ varies greatly under different conditions, and is especially influenced by the activity of the organ. The flow from a working muscle has been observed to be five or six times that of a resting muscle. The lymph movement in a resting muscle is almost nil.

VI. ON ABSORPTION.

Von Mosengeil injected India ink into the knee joints of an animal then massaged one of the joints thoroughly and opened them for examination. He found that the ink had almost all disappeared from the massaged joint, leaving only a little discoloration, which was also evident in the neighboring lymph vessels as far up as the hip. The injection in the other joint had undergone no change.

Reibmayr & Hoffinger found that the absorptive power of the peritoneum was increased by massage. Measured quantities of water were injected into the peritoneal cavity of rabbits. The animals were then killed at the end of one and two hours respectively, and the quantity of fluid remaining was ascertained. The process was repeated, the animal being massaged after the injection. The result was that twice as much fluid was absorbed during the first hour under massage.

Ewald showed that salol is insoluble in the acid gastric juice, but that it is decomposed into its two constituents in the small intestine when subjected to the action of the alkaline duodenal contents, which render it soluble and readily absorbed. Shortly after its absorption into the circulation, it passes to the kidneys and is eliminated in the urine as salicylic acid and sulpho-carbolic acid. Its presence is demonstrated by the production of a red-violet precipitate, when the urine after acidulation with hydrochloric acid and shaking with ether is tested with a solution of per-chloride of iron. As a control experiment, he ligatured the pylorus in a number of dogs and gave them large quantities of salol without obtaining its characteristic reaction in urine.

In thirty-nine cases he found that the average time of its appearance in the urine, under normal conditions, was forty-five minutes.

After 30 min. in one case; after 45 min. in 32 cases; after 60 min. in 6 cases.

Eccles found in fifty cases after massage of the abdomen for fifteen minutes, the following: After 25 min. in 12 cases; after 30 min. in 36 cases; after 60 min. in 2 cases.

The cause lies in the dilatation of the abdominal blood vessels producing a determination of blood to the abdominal vascular area, and hence an increased activity, and also by mechanically increasing peristalsis.

Hirschberg, Brunner & Huber found that one gram of salol given to chronic dyspeptics required from two, to and a half hours before the reaction could be detected in the urine. After ten minutes of massage the reaction was obtained in an hour and five minutes.

Finkler treated fourteen cases of glycosuria by massage and obtained a marked decrease in the volume of urine and quantity of sugar excreted.

VII. ON GLANDULAR SECRETION.

Graham massaged the salivary glands and obtained a secretion in five minutes. After ten minutes the maximum secretion was obtained. The secretion was similar to that obtained through the normal excitation of the chorda tympani nerve.

Beaumont by means of a stomach fistula, and Thury by a fistula of the gut, found that the stomach secretion was increased after massage.

Graham reports a case in which massage caused the quantity flowing through the fistula for two hours to be double the normal amount. In fifteen minutes the maximum effect was produced; thereafter the hydrochloric acid and pepsin did not increase proportionately.

Weynrich has shown that friction of the skin causes the excretion of water through the skin to be increased about sixty per cent.

VIII. ON METABOLISM.

Dunlop gave a fixed and measured diet to a thin subject for seven days; on the fourth day, the patient was twice subjected to strong massage for an hour. There resulted an increase of urinary flow for two days thereafter.

Keller found that general massage augments the metabolism and the excretion of nitrogen containing products, sulphuric acid compounds, the chlorides and lime salts.

Eccles obtained an appreciable increase in the volume of urine and quantity of uric acid excreted by general massage.

Polubinski noted an increase in volume and in solids of urine after abdominal massage.

Gopadse experimented with four patients over a period of three months, taking into account the nitrogenous income and output. He found that under massage all four patients had increased appetite, heightened power of assimilation and an increased conversion of nitrogen containing material. He also found a lessening of the dyspeptic phenomena, an increase of HCl, and a decrease of the general organic acids and mucous of the gastric juice.

Bendix gave a measured diet to three persons for six to eight days. Massage of these caused a constant increase in urine and nitrogen output. The cause of the latter he attributes to the quickened circulation whereby the cells are excited to more energetic action, and hence an increase in the break down of the albumen and of the circulation products. The fat output in the feces was lessened about one-third.

Von Poehl tested one hundred urines of neurasthenics, for leucomaines in the form of phospho-tungstates and found them increased after massage.

IX. ON THE MOVEMENTS OF THE ALIMENTARY CANAL.

Boas by kneading and rubbing the abdomen from the right hypochondrium towards the median line, induced a relaxation of the pyloric sphincter, and the entrance of intestinal juices into the stomach, whence they were withdrawn by a stomach tube.

Zabludowski proved that abdominal massage caused strong peristalsis of the gut and regular stools in a series of patients which he treated.

X. ON THE NERVOUS SYSTEM.

Goldscheider states that a large part of the influence of massage upon the nerves rest on its excitatory and inhibitory effects on the condition of nervous irritability.

Dolega found that weak pressure increases the excitability of nerves and strong pressure weakens it or does away with it altogether.

Examples:—Pressure upon the phrenic in the neck relieves cramp of diaphragm; pressure on peripheral motor nerves stops cramps and tremor in the corresponding muscle region. Irritation of motor nerves produces contraction of muscle supplied by it. Sensory irritations as in neuralgia can be stopped by strong pressure upon the nerves involved.

Eccles. Stimulation over a healthy nerve produces pain, whereas it relieves the pain if already present in the nerve. For example: In non-inflammatory abdominal pain, relief is obtained through nerve vibration.

Head's observations make it possible that pain in deep organs may be modified by manipulation over the superficial region, corresponding to the distribution of the cutaneous sensory nerves, derived from the same segment of the cord that also supplies the disturbed viscera.

Eccles found that in palpitation and other disturbances in cardiac function, asthma, and dysperistalsis the pain was relieved by vibration over the skin areas corresponding to the organs affected.

GENERAL CONCLUSIONS.

In general the venous and lymphatic circulation are stimulated and the flow increased, causing a corresponding decrease in arterial pressure and hence in heart beat together with a slowed pulse. The circulatory products have in consequence a freer circulation causing a heightened nutrition to the parts, and increased removal of waste products from the parts.

The absorptive and assimilative processes are increased, as is evidenced by the quicker appearance of salol in the urine. The bettered metabolism, too, is seen in the increase of the waste products in the excretions and in the conservations of the food products, that is in the diminution of nitrogen in the urine and of the fat in feces.

Finally the nervous system is regulated, a normal tonus being brought about in pathological conditions, and this either as cause or effect, is intimately related with the welfare of the internal organs.

The therapeutic value may easily be deduced from the foregoing. Example, the lessening of the work of the heart and equalizing blood pressure in disease of the heart and circulatory organs; in the causation of resorption, in cases of exudations, dropsy, and the like; in assisting the stomach and intestines when diseased, by aiding the digestive and

absorptive processes; in lightening the work of the kidney; and in nervous diseases establishing a better tone through the increased nutrition brought to the nerves, and increased excretion of waste products that affect them injuriously, as well as by the direct stimulatory effect upon them.

In this brief sketch my aim has been to present the results obtained by mechanical methods other than the osteopathic in order to give our practitioners a clear idea of their position in the field of therapeutics and in what their unique position consists. I have striven to show that in no way is osteopathy similar to massage either in theory or practice, if osteopathy is conceived of, according to its founder, Dr. Still, as a system of healing in which a definite lesion in the form of a bony displacement is the causative factor and a removal of the same, the curative factor in disease.

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* * *

OSTEOPATHIC HINTS.

EDITOR OF THE BULLETIN:—

Here are a couple of passages from the prefaces of recent books that have struck me rather forcibly and I thought might be of interest to your readers.

The following is from Sajous "Internal Secretions and Principles of Medicine," Vol. II.

"Osler's public declaration that of the action of drugs 'we knew little' though we 'put them into bodies the action of which we know less,' sustained by Lewellys F. Barker's estimate published about the same time, 'that drugs of UNKNOWN physiological action cannot CONSCIENTIOUSLY be set to act upon bodily tissue in disease in which we are ignorant of DEVIATIONS FROM THE NORMAL,' sinks deeply into the very foundation of our professional ethics. Indeed, it involves the sweeping conclusion that our ignorance, in this connection at least, applies to disease as well as to therapeutics—in a word, to all that which endows us with the right to accept, with any degree of self-respect, the confidence which suffering humanity places in us.

"It is not my purpose to take issue with these frank expressions of opinion. In fact, were I to do so, I would conceal similar conclusions reached nearly twenty years ago, when as editor of the "Annual of the Universal Medical Sciences," it became my lot to collate, with the valued collaboration of many associates, the multitude of data clinical and experimental which were accumulating from year to year. Nor do they conflict with the prevailing estimate of the therapeutic worth of medicine among the best-informed medical men abroad. Skoda's dictum of several years' standing 'that we can diagnose disease, describe it, and get a grasp of it, but we dare not expect by any means to cure it,' has drifted along, on the ripples of time, until, in the year of our Lord,

1907, the president of a prominent British society, Dr. A. H. Brampton, found it opportune to declare that 'if any daring member has introduced a subject bearing on medical treatment, it has been with an apologetic air and humble mien, well knowing that if his remarks had any reference to the utility of drugs in the treatment of disease they would be subjected to good-humored banter, and received by those sitting in the seat of the scornful with amused incredulity.' (It is but justice to Dr. Sajous to say that through an exhaustive study of metabolism and its forces and especially the bearing of the adrenal system upon physiological processes he claims to have evolved a scientific drug treatment. But this does not concern us here. We are dealing with the present drug methods).

It is amusing to the experienced osteopath to hear the embryo or novice state that he wants to study drugs. Just step across the street and have a heart to heart talk with the experienced medical man. Better still, watch him in his practice. I am not referring to the mediocre practitioner who prescribes something quite similar to the patent medicine vender, something to temporarily stimulate vital forces, or momentarily stop pain. If one wants to continue his studies along physiological, clinical, surgical or other lines that is a different question.

A week or two ago I was talking with an osteopath who thought he would take down his osteopathic sign and just call himself Dr. Blank. As far as I could gather he considered himself a little bigger than osteopathy. Apparently a trifle ashamed of being called an osteopath. This is the first time I have seen a person anything but proud to be called an osteopath. Poor deluded egotist! Ninety-nine out of one hundred of his patients have come to him because he is an osteopath, not necessarily because he is Dr. Onto-his-job.

Here are quotations from Pyle's Personal Hygiene that are interesting: " * * * * excessive ambition, misdirected energy, longing for the unattainable, regret for the unalterable, anticipation of future happenings, lack of a sense of perspective, fretting over non-essentials, indecision, reopening of troublesome questions already settled, avarice, selfishness, excessive emotions, uncontrolled passions, and the actual cultivation of the melancholic state, are some of the important causes of mental anguish and subsequent physical suffering that are not commonly associated with the baneful breaches of hygienic laws to be demonstrated by teachers of practical physiology."

"Most cases of illness are preventable, and Mr. Huxley says we should look upon them as criminal. Illness following disobedience of physiologic laws should be regarded as the primitive result of repre-

hensible conduct and not simply as a grievance. There is such a thing as physical morality and the preservation of health should be considered a sacred duty. Persons who treat their bodies as they please and transgress rules of personal hygiene, of which they should have a definite understanding, are physical sinners, and they are not only committing a crime against themselves, but often against their dependents and future generations."

Now, these quotations are made for the definite purpose of using them as pegs upon which some hints, to the student from a practitioner, may be hung.

1. First, last and all the time the sheet anchor of osteopathic practice is re-adjustment. This is three-fourths of the work. Perfection in technique requires much time and experience. This part, however, I will pass over in this letter.

2. Never lose sight of the important and practical bearing of prophylaxis and of physical, mental, hygienic, dietetic and sanitary methods. These are not mere words to glide over, but each requires a separate volume for a full treatise.

3. Physical methods. Your osteopathic anatomy gives the clue. Re-adjustment, re-adjustment, re-adjustment is the basis. Then attention to active and passive exercise and development. It is with grateful thanks that we observe the receding of the physical culture wave. The pendulum is swinging back as is always the case with fads, and the people will be the healthier for it. Not but what physical culture fills a most essential niche and always will, but the inane chase after pugilistic development methods has done far more harm than good; this is especially noted in the over-straining of heart and other tissues in the middle-aged adult. Light exercise without apparatus is good for every one. Open air work such as walking is still better. Exercises for specific development should always be under the advice of a physician. Organic conditions, environment, and special requirements is the basis for instructions. An occasional prescription of wholesome rest is an excellent thing.

4. Mental methods. The field is a wide one and requires definite intelligence based upon physical conditions and requirements. This is probably, to a certain extent, the most difficult to fulfill. One should not ignore it; still to not become an over-enthusiast, not only a knowledge of mental and nervous make-ups is necessary but the therapeutic application requires considerable tact. A thorough study of such a work as Dubois' will be very valuable. I often think of a point that Herbert Spencer emphasizes in his Autobiography that physicians do

not pay enough attention to the mental stimulus secured, and thus toning the whole body, by change of scenery, associations, environment, etc.

5. Dietetics. Suggestions and, better still, diet-lists in certain cases will prove almost invaluable. Many, very many of your patients will present digestive, assimilative and nutritive disorders. More of them do not masticate sufficiently and know practically nothing of dietetics. Use dietetics as an adjunct but do not be a dietetic crank. Simplicity and moderation will meet many requirements.

6. Hygiene. A tremendous field is always open. Care of the digestive and respiratory tracts, the skin, eye, ear, etc., all come in for separate attention. Care of different mental and nervous make-ups, the effect of environment, attention to ventilation, heating, and a hundred other points will or should be intelligently met. It is these little essentials that round-out a practice, adds value to the work and benefits the sufferer.

7. Sanitation. This is another branch of medical science that has developed wonderfully in the last few years. It fills an important section in preventive medicine. The osteopath should keep abreast of the times. The checking of typhoid fever epidemics may depend upon his sanitary knowledge; indeed, if not his knowledge, some one else will have to meet the issue. It is probably superfluous to refer to the score of other essentials that he should know of at least, even if he has not a working knowledge of them. Every community will at one time or another have to face the water supply and sewerage problems.

There are just two or three other features I wish to touch upon in this very brief survey. All of these are points that go to make up the day in an osteopathic office. The study of every case is not necessarily a study of all these problems, but where there is not a practical application required there is frequently a discussion or inquiry about these thousand and one points, and the doctor should answer them rationally, not slightly, nor as a faddist. However, do not stretch out a drag net and gather in a mess of cast off so-called "natural methods."

One of these two or three features is clinical diagnosis or laboratory diagnosis. By all means utilize the knowledge, whether it is positive or negative, that a urinalysis, a blood count, a stomach analysis, a fecal examination, etc., will give. It will be a source of great satisfaction, at times indispensable, and occasionally will save considerable chagrin.

And finally, there is one point of considerable importance as it is revealed to me as a practitioner, and, that is, don't fritter away very much of your time studying surgical technique—unless you expect to

be a surgeon. The present day medical knowledge and practice has necessarily evolved into specialties, there are scores of first class surgeons, and above all it is going to keep you mighty busy to evolve into a good osteopath, several irons in the fire will probably defeat all purposes or aspirations. Our schools, of course, need good surgeons, and if they are the right men they will be found to be a wonderful inspiration to the osteopath. What they will want you to know above everything else which bears upon their particular work will be surgical diagnosis; and of this you can not get too much if you keep it rightly balanced with osteopathic, symptomatic and clinical diagnosis.

CARL P. McCONNELL.

Since the above was jotted down Dr. Goetz's article in the A. O. A. Journal for January, pages 193-200 has appeared. I wish every osteopath would read it. It is a mile-stone in osteopathic progress; one of the very best articles in our literature to date, according to my judgment. Just such graphical and mathematical, clear-sighted and logical efforts as this prove of invaluable service to osteopathic development. The great practical lesson to be drawn is not in the application to two or three diseases but to the broad field of osteopathic pathology and technique. That the pathological lesion or change does not necessarily follow, sectionally or directly, the osteopathic lesion, although related physiologically and mathematically, but frequently through distortion of physiological curves with a characteristic localized osteopathic lesion at the upper and lower ends of the mal-alignment, is most probably true.

Then, there is Dr. Burns' book on "Basis Principles"—a very valuable contribution to osteopathy, especially emphasizing again and again that perverted nervous stimuli must result from structural distortion, particularly vertebral and rib maladjustments; this being the final analysis that is of great moment to the practitioner, although the consideration of fundamentals on broad biological grounds that lead to this deduction is of the greatest value. With such investigators as these can it be said that osteopathic development is at a standstill? Although collectively the profession may lack esprit de corps. C. P. M.

* * *

THE A. T. STILL POST GRADUATE COLLEGE OF OSTEOPATHY RESEARCH WORK.

The council of the Board of Trustees of the A. T. Still Post-Graduate College of Osteopathy desires to bring together as far as possible all the educational forces that can be used to advance osteopathy and put it upon such a basis as will command the respect of every thinking man and woman interested in human health. To this end it respectfully

asks every osteopath to consider carefully the following questions, and if he has any reply to make to communicate at once with the chairman of the council.

1. What have you to suggest to the end that osteopathy may be put upon the highest possible educational plane?

2. Have you done any special work which proves or disproves any practices in the healing art? If so, what was the nature of that work? (Please do not let your modesty stand in the way of answering this question).

3. Do you know any one who has done such work as mentioned in question 2? If so, please give name and address of such person or persons and state in a general way the character of the work done.

Let us remember that osteopathy is building for all time. Concerted action is necessary to accomplish the best results. The opponants to osteopathy will try to destroy it by a process of absorption. Some of them are already claiming to have incorporated it into the medical practice so as to give the public all the benefits of the system. We all know the fallacy of such claims; and we must put osteopathy on such a basis as will demonstrate to the most critical the truth of our claims.

Only a few can actually do research work, and it is no reflection upon the work of any one to say that most of the members of every profession are unable to do such work. But we are all equally interested, and each has a chance to help according to the full measure of his ability. If you cannot do the work yourself, you can aid by sending your contribution to Dr. G. E. Loudon, Chairman Committee on Subscriptions, Burlington, Vt. Do not delay action. Now is the time.

E. R. BOOTH, Chairman.

Council of the Board of Trustees.

* * *

OSTEOPATHIC DIAGNOSIS AND TECHNIQUE.

BY MYRON H. BIGSBY, D. O.

"A friend in need," is a book on diagnosis and technique when a practitioner meets with a stubborn lesion which has been given him considerable trouble. Perhaps he sits down and says, "I know that can be reduced if I can just get the right twist on it." Every possible lesion of bone, ligament, muscle or viscus is discussed as to diagnosis and numerous methods of reducing same. About twenty illustrations and fifteen reductions of photographs in halftone are interspersed in the work which greatly facilitate the conception of the text. One thing that appeals to the profession is the fact that it is strictly osteopathic, and the reader is admonished to be osteopathic and to keep far from the danger line of drugs.

THREE NOBLE SKULLS.



K. W. SHIPMAN,
Jan. 07-May, 07.



R. P. CARLTON,
May, 07-Jan. 08.



L. H. WALKER,
Jan. 08-May, 08.

THE BULLETIN

OF THE ATLAS AND AXIS CLUBS.

E. PAUL ERWIN, Editor.

FRANCES HAMBLET THOMS, Reporter for Axis Club.

Entered as second class matter, Oct. 12, 1903, at the post office at Kirksville, Mo., under act of Congress of March 3, 1879.

Readers of the Bulletin are urged to send the editor prompt notice of their addresses on making their first location, and on making any change in their mailing addresses thereafter. Only by doing so can the reader provide against loss of some of the copies.

When the Bulletin has been sent to the earlier address, through neglect to inform the editor of the change, the number may generally be secured by sending a stamp (within 30 days) to the postmaster of the place, with a request to forward it.

Copies lost through change of address without notification can generally be furnished by the editor at ten cents per copy.

KIRKSVILLE, MISSOURI, JANUARY 1908.

EDITORIALS.

IN CONCLUSION. This issue terminates the official duties of the outgoing editor, who feels obliged to give up the work for the remainder of the year and though the work connected with the office has been interesting and instructive in many ways, the work in the A. S. O. demands practically all the time of the senior student, so that we feel unwilling to attempt the work during the coming semester.

It has been deemed advisable, in consequence of the rigid course of study in vogue at the A. S. O., to arrange the work of the Bulletin so that the editor will be able to devote the time at his disposal, to the preparation of the copy and to this end, we have elected an assistant to be designated as business manager.

We feel indebted to the many field and local members of the clubs who have given their hearty support and especially to Miss Thoms who will serve the Axis club as recording secretary for the coming semester. If those who have promised their aid, will send their contribution of articles, items or case reports, to the new editor, his work will be expedited, and it will be appreciated. Don't wait until you size him up or to see if you like his work, the Bulletin stands for A. T. STILL OSTEOPATHY, OUR CLUBS and our school, and as such, merits your confidence.

OUR SUCCESSORS. In presenting the new editor Mr. Granville B. Waller we have no apologies to make, he possessing all the qualifications naturally expected of the occupant of that office. Mr. Waller has had considerable experience in literary lines previous to taking up the study of osteopathy and for the past term has been assisting in the histology laboratories.

Houston A. Price is well qualified for his position as business manager, he having had considerable newspaper experience. Messrs. Waller and Price are both members of the Junior class and as club members, have ever been active in the promotion of its welfare.

* * *

OF INTEREST TO ATLAS MEMBERS. We publish in this issue a letter from Bro. Wm. Horace Ivie, in regard to the formation of a national organization and to the chartering of Alumni Chapters of the Atlas Club. The Axis Club has a flourishing national organization. Does the Atlas Club wish to do likewise? We have had several appeals like this of Dr. Ivie's and some expressions from other worthy and influential members, who believe that the club is part of, and should remain with the A. S. O., the fountain head of our science. And like osteopathy itself, should be a unique Kirksville institution, and that those who are fortunate enough to be among its members may better preserve their fraternal relations while it continues in its present condition; believing that the chartering of extra chapters, binds those members of it together in such an exclusive manner that it derogates from the original purpose of the Atlas Club as a world-wide organization. The expression of the field members upon this subject is earnestly solicited, in order that the local chapter may act intelligently in the matter. Now is the time to act. But four months remain while the local chapter is in session, and the field members, who are most concerned in this matter, are the ones to advise what course to pursue in order that the matter may be properly brought before the club at the "home coming" next August.

* * *

DR. EMMETT HAMILTON Left Jan. 22nd, for Chicago, Ill., where he will pursue some special work in chemistry and physiology, at the Chicago University. His present plans are to remain until September, when he will return to his duties at the A. S. O.

In recognition of the high esteem in which he is held by the students, they presented him with an elaborate tea and coffee set, just previous to his departure.

Dr. Hamilton has the distinction of being one of the best, if not the best chemist in the profession and the fulfillment of his present plans

will place him far in the lead in this line. The disposition on the part of the teachers and management of the A. S. O., to not be satisfied with being merely the best in the profession, speaks volumes for the sincerity and integrity of the work being done at the fountain head.

* * *

A. S. O. ABSORBS THE SOUTHERN COLLEGE. Dr. Warren Hamilton left Tuesday, Jan. 14th, for Havana, Cuba, and other southern points on a few weeks tour. He stopped enroute at Franklin, Ky., where he closed the deal whereby the Southern College of Osteopathy becomes consolidated with the American School, to take effect at the beginning of the coming term. Some thirty students are expected to arrive in Kirksville soon for enrollment in the A. S. O.

* * *

THE CHARITY WARD At the A. S. O. hospital has been in successful operation for several weeks. It contains twenty beds, some eight or ten being occupied at the present time. It being a student institution, the members of the senior class are delegated to do interne work in rotation; they having the care of the patients at all times. In addition to the hospital practice a course is to be given in emergency and ambulance work by Dr. Wm. Smith.

* * *

POPULARITY OF OSTEOPATHY. One of the widest and farthest reaching advertisements ever given to osteopathy, consists in the generous space given to it in the Ladies Home Journal for January, in an article by the Old Doctor entitled, "How I came to Originate Osteopathy."

The English-speaking people of the world have confidence in the stability and good judgment of the editors of the periodical to uphold only such institutions as are worthy and honorable, without being influenced by the overwhelming members of the medical profession. This is one publication that has no faith in the adage, "Might Makes Right."

The stand taken by several of our best magazines against drugs, shows this spirit to be widespread, and now it is reported that at least one has applied to the Old Doctor for an article, and other have sent representatives to investigate and write up osteopathy for the edification of the public.

* * *

GOVERNOR OF INDIANA VISITS THE A. S. O. Governor Hanley recently delivered a lecture in Kirksville under the auspices of the Christian Associations. Thursday morning Jan. 16th, he visited the A. S. O. and met the students and faculty in the assembly halls. He gave a short address, in which he congratulated them on the work they were under-

taking and stated that there was no greater or nobler calling than that of the physician.

Dr. Wm. Smith then, in behalf of the students from Indiana, presented him with an A. S. O. pennant with the word OSTEOPATHY on it, and begged him to ever bear in mind that word. Dr. Smith then called his attention to the unjust law in force in Indiana and after a short discussion, asked for his assistance in getting such a law that would give regular osteopaths a chance to become admitted to practice in that state.

The Governor in response said that, in his opinion, there was no such law, but that it was merely the ruling of the State Board of Health that required an osteopath seeking admission to the state, to be a graduate of a school giving a four year course, and that if the members of the board were to come to Kirksville and visit the institution as he has done, they would be impressed with the thoroughness and worthiness of the A. S. O.'s work. He then agreed to see the board personally, to see if some such arrangement could not be made.

Dr. Emmet Hamilton then called the Governor's attention to the wide territory from which the students come and by way of an object lesson, had the students from the different sections of the country successively rise, thereby illustrating in a striking manner, the widespread popularity of osteopathy.

Bulletins, Ten Cents. It has been voted by the Atlas Club, and by the Axis Club in concurrence, "That ten cents per copy be charged for back numbers of the Bulletin sent to members at their request when failure to receive them has been due to a change of address without the proper notification; also that the same charge be made for all extra copies supplied to members, except to contributors of articles." —Bulletin, April, 1906.

This action of the clubs has never been revoked, so if you want your address correct on our mailing list, don't wait for us to hunt you up, but WRITE.

In the October number of the Bulletin, we copied an article on the "Surgical Treatment of Emphysema" as recommended by various German surgeons, they expressing the possibility of treating tuberculosis of the lungs by the same method, that of resection of the costal cartilages of the upper ribs, in order to increase mobility. Now in the Munchener Medizinische Wochenschrift, Oct. 20, 1907, Hart warmly advocated its use and suggests that it may be found a servicable prophylactic measure.

Will this operation become the "popular" operation, as that for

appendicitis has been; or is it one of the stepping stones adopted by the medical profession, which leads to the ultimate discovery of a science of healing, closely resembling that given to the world by A. T. Still?

That exalted body must surely resort to some method whereby the osteopathic theory of disease may be evolved in an ethical manner. The alarming amount of concern among the medical profession, on account of the infection of popular opinion with the osteopathic germ, proves the virulence of the invasion, which must either be overcome by radical measures or incorporated in as unconcerned a manner as possible. The latter seems to be their only hope.

ATLAS NOTES.

Saturday evening, Jan. 4th, the new officers for the ensuing term were installed by Dr. F. P. Pratt of the A. S. O. Faculty, as installing officer. The new officers are as follows:

Noble Skull.....	Linus H. Walker
Occipital.....	Wells J. Howard
Sacrum.....	Ralph J. Poulter
Stylus.....	Eldon S. Detwiler
Styloid.....	Carrol B. Morrow
Receptaculum.....	Christian G. Luft
Pylorus.....	E. C. Murphy
Radius.....	Chas. B. Spohr
Right Clavicle.....	Hammet N. Lacy
Left Clavicle.....	Louis H. Most
Trustees.....	Dr. R. E. Hamilton, Dr. F. P. Pratt, K. W. Shipman
Editor of Bulletin.....	Granville B. Waller
Business Manager of Bulletin.....	Houston A. Price

The committees of the Atlas Club for the ensuing term are as follows:

PROGRAM	HOUSE AND PURCHASING
F. Austin Kerr	Maus W. Stearns
Chas. F. Kenney	Harry T. Miller
Ora M. Walker	Norman D. Wilson
PRACTICAL WORK	FLOOR WORK
Preston W. Gibson	John C. Groenewoud
Leonard Tabor	John W. Kinzie
John F. Krill	Geo. A. Haswell

LIBRARY

Francis M. Turner
Wm. S. Childs
Sam H. Stover

MEMBERSHIP

Wells J. Howard, Chairman

* * *

FINANCE

Geo. M. Whibley
Allen Z. Prescott
Jas. L. Dellinger

NEW MEMBERS:

B. H. T. Becker of Roanoke, Virginia, was induced to take up the study of Osteopathy through benefits he received in taking treatment. He attended the University of Virginia and was employed as a broker and in the mercantile business. He is a member of the freshman class.

Paul Sears Nickols attended two years at the University of Nebraska after completing the High School course. Through the influence of a former school chum who graduated from the A. S. O., he decided to study. He was employed as a railway postal clerk and comes from Vivian, S. D., to enter the freshman class.

G. S. Hodder Wilson of Preston, Canada, was attending college, and while there was the victim of an accident. The medical men could do nothing for his injuries, and as a last resort he tried Osteopathy, with the result that he is now an A. S. O. student and member of the freshman class.

James M. Farnham of Holloway, Minn., is a member of the junior class. He is a high school and business college graduate, and was employed in teaching. The saving of a member of his family from the surgeon's knife by osteopathic treatment, directed his attention to the truths of Osteopathy.

Royal W. Neff of La Cygne, Kas., is a member of the freshman class, possessing a high school education, and was employed as ticket agent for the Burlington Railway at Deadwood, S. D. He received an injury last April, which caused spastic paraplegia to develop, from which he was markedly improved by a short course of treatments.

Allen Z. Prescott of Lincoln, Nebr., seeing the results of osteopathic treatments and also the opening offered for an honorable and independent profession, decided to take up the study and entered the A. S. O. in September 1906. He is a graduate of the University of Nebraska, of the class of '05, with the degree of L. L. B., since then being employed as a bank teller until entering school. He has a brother-in-law in practice, Dr. L. A. Bumstead of Delaware, Ohio.

I. F. Craig of the freshman class became interested in Osteopathy through observation of its results and the soundness of its theory. He

was in the tourist business in Yellowstone Park. His educational training was received in the State Normal at Spearfish, S. D.

Fred B. Keller of Webster, N. Y., has an academic and business college education. Previous to his entering the present freshman class, he was employed as a carpenter. He was led to study Osteopathy through the personal efforts of a practitioner in the field.

Chas. P. Hanson of the freshman class is from Normal, Ill. He received his education at the University of Illinois and was a teacher. Experience with osteopathic treatment resulted in his coming here to study the science.

Clark Marshall of Lincoln, Neb., has a normal school education and prior to entering the A. S. O. this fall, was engaged as a teacher and later as a salesman. He became interested in Osteopathy, through observation and the recommendation of field practitioners.

* * *

At the club election, held Dec. 14th, Fred W. Morris was elected Pylorus for the coming term, but on account of his wife having a plectic stroke a few days later, he found it necessary to resign the office.

* * *

It becomes our sad duty at this time to chronicle the death of one of our brightest and most promising members, Ralph J. Poulter, of the junior class. Jan. 7th he was taken sick with pneumonia, from which he was recovering nicely, being four days past the cessation of any febrile symptoms, and he was thought to be practically out of danger, but in spite of the best of care, the end came suddenly from heart failure at 3 A. M. Sunday, Jan. 19th. A man of marked energy, he was an indefatigable worker and the esteem he had won as a man, as well as the success he had won as a student, makes his death a loss not merely to his class, but to us and to our profession. He was one of our newer club members, having been affiliated with us Oct. 19, 1907. But three days previous to his taking sick, he was installed as Sacrum of the club, to which office he had been elected in recognition of his worthiness as a man and his zeal for the advancement of Osteopathy and the work of the club. The members of his family evince a great devotion to the science of Osteopathy, his wife, two sisters and a brother being enrolled at the A. S. O. School was closed Jan. 20th out of respect to the deceased, and the funeral services were held at Memorial Hall at 2 p. m.

* * *

Saturday evening, Dec. 28th, the members of the Atlas and Axis Clubs who remained in town for the holidays were entertained at the club rooms by Dr. E. C. Link, of the faculty, and Dr. Heine, of Pittsburg, Pa., who was visiting in Kirksville with his parents.

Mr. Prindle, Miss Conger, Mr. Carlow and Mr. Morrow rendered vocal solos, which received hearty encores.

Dr. Link talked on rib lesions and cited numerous cases to illustrate the efficacy of correcting such lesions.

He also spoke of the various heart, lung and throat conditions resulting from rib lesions. Rib lesions are often very troublesome to correct but if one works conscientiously on a stubborn rib for several treatments and endeavors to correct it each time, results are sure to be satisfactory in a short time.

Anesthesia was his next subject, in which he emphasized eternal vigilance on the part of the anesthetist, in order to reduce the danger of anesthesia to a minimum. It is an easy matter, however, to watch the condition of the patient, the most common indicators being the pulse, respiration, and principally the pupil. The pupil is small during anesthesia when everything is going all right. The danger signal is dilation. It is better to be on the safe side than careless, in consequence of which, it is advisable to examine the pupil 3 to 5 times per minute. Sometimes when the anesthesia is not profound, the skin reflex is not abolished, some act of the surgeon may cause the patient to react by dilation of the pupil. In this case, dilation of the pupil is not indicative of danger, for you will notice that the pulse and respiration are all right, and further, that the surgeon has done something to cause it. Otherwise, artificial respiration or some other method must be applied to partially rouse the patient. When there is organic heart disease, chloroform must not be used, and when there is nephritis, neither chloroform nor ether can be safely given, and only in cases of absolute necessity should either be given. The fact that the heart occasionally skips a beat does not indicate heart disease, it is the murmur that is listened for, as it is present in such a condition. It takes longer to get a patient under with ether than chloroform, hence Hoffman established the custom here, of starting with chloroform, and finishing with ether when so desired. See if the patient has false teeth, and if so, remove them before anesthetizing. Two cases occurred here, in which the teeth became loosened so that they had to be fished out of the mouth during the progress of the operation. When necessary to partially revive a patient, use artificial respiration or a dash of cold water in the face. The most effective method of reviving is to dilate the sphincter and by the fingers, or better use a rectal speculum and open the blades quickly. The patient may quit breathing. This indicates nothing unless it remains so for over a minute or two, when it is necessary to get busy at once. Tickling the ribs or pressure on the epigastrium will generally start the

breathing again. Simply asking the patient to breathe will sometimes be all that is required, as patients will respond even while anesthetized. In the use of ether, the respiration is more noisy, the face is redder and there is more mucous in the mouth, and consequently is not preferable for children. Children take chloroform readily and require very little of it.

DR. HEINE.

Dr. Heine spoke about his being a crank on professional conduct, and called attention to the great harm done to the profession by unprofessional conduct by the members themselves. Two osteopaths in a western city went so far as to give lectures and demonstrations with a skeleton in typical street fakir fashion. "You couldn't hire me to put my ad in a newspaper in Pittsburg. It is a very conservative city, and one of the editors told me that he would not have a thing to do with me if I did such a thing. That is a method employed by quacks."

The medical people call us irregular, we must beat them at their own game. Let them go around with a chip on their shoulder if they want to, there is a field for them. Don't run down the M. D's every time you get a chance, there is no person closer to the people than the family physician, and you can't tell who you may offend to our own detriment.

Don't talk too much to your patients about bony lesions. Patients will come in just to see what you have to say about them, and then among their friends distort your words, as in the case where the patient said he was afflicted with "circumlocation of the tonsorial vertebra," and another who had to take "two epidemics."

Don't ask the patient for his subjective symptoms every time he comes, because you will be expecting results between each treatment. His symptoms of a subjective nature are to be used simply to indicate what to look for. He may be able to fool you on his subjective symptoms, but not by his objective symptoms. By placing your dependence on his objective symptoms, when you tell a patient he is better, he and you will both know it for a fact.

The personality of the operator is what holds the patients and not Osteopathy? Make friends of your patients, but don't take your friends for your patients. "I hold my patients by making a 'cheerful idiot' of myself, dignity being reserved for the reception room."

The personal appearance of the physician requires considerable attention. Don't let the patient see you wearing the same shirt more than one week. The appearance of the finger nails also attracts the attention of the nervous patient. You will inspire confidence by washing your hands before and after giving the treatment.

It has been said by many people, that even if osteopathic treatment does no good, that it cannot do harm. This is erroneous. You can overtreat. If after a long course of treatments, you fail to get results, let them have six months rest, and then start in and you will find they respond nicely.

Don't be a grafter. If cases come that you know you cannot help, turn them down. You will gain more patients by so doing. People will say you are honest and thereby have more confidence in you.

You go into a new field. You will have to cure "incurable" cases to make a start. You will have to take cases the first year that you wouldn't the second, and will turn down still more in later years. Don't take the class of cases on which you have lost your nerve. If you have lost your nerve, the patients will find it out, and remember, that in a state where Osteopathy is not protected by law, one case against an osteopath, ruins the chances of legislation for several years. The medical people say we claim too much, but that is not so.

In starting in practice, several kinds of bluff have been practiced. If the physician has several patients, he has them come at the same hour. If he has an extra hat, he leaves it on the table in the reception room.

If the physician has office hours, he has no excuse for not being there. The patient may not come on time and thereby disappoint you, but you must not disappoint the patient by being out when you are supposed to be in. If you are to be away from the office fifteen minutes, have your sign read "Back in five minutes." The patient will sit down and wait, whereas he would leave if it read "fifteen minutes." If you are married, keep your wife away from the office.

A woman osteopath has no earthly business treating a man. There is a field for her among her own sex. Some women needlessly expose women patients, so that they will not go to a man for treatment if they can avoid it. This is a display of jealousy on the part of the woman practitioner and is unjust to the whole profession. Don't be jealous of the new osteopath in your vicinity, the more the merrier, anything that advances osteopathy benefits you. Don't locate in a large city if you are not prepared to run at a loss for a year.

When you locate, call on all the old practitioners. They don't want to call on the new man. If you are the old practitioner who is calling on the new man, people will see you go into his office and say that he must be all right, inasmuch as you seem to have business with him.

Join your local, state and national osteopathic associations, for you are going to send patients to the doctors you meet at the conventions and vice-versa. In this way you make money by every meeting you attend.

ATLAS FIELD NOTES.

Do you expect to attend the A. O. A. meeting here next summer? No doubt you do, and if so, would you not like to see the club properly represented and a rousing good old time reunion held at the club rooms, where you can meet all the club boys as of old?

We are anticipating such a meeting and are now endeavoring to curtail expense in order to carry out this plan in a manner creditable to the club. It will take money we know and our plan is this:

We do not ask a cent of the field members in the way of assessment or subscription, but merely request of them what properly belongs to the club, that is that those who are in arrears get right with the club.

There are nearly five hundred field members at present. Now your dollar or two, as the case may be seems small indeed but stop and consider what one year's arrearage on the part of each member means.

At the present time the unpaid field dues (not considering 1908) amounts to nearly four hundred dollars (\$400.00.)

Some have paid promptly which we appreciate very much but others have neglected to do so. We know you are busy and we're glad of it. Its the busy man who finds time to do things.

We know you appreciate the "Bulletin" and feel certain that there is still a warm spot in your hearts for the club. We need you and want you to remain as one of us and feel confident that your intentions are good and that if you stop to consider the matter you will immediately send the necessary wherewith to place you in good standing. Do it now. The Pylorus would like to see the books straightened up.

E. C. MURPHY, Pylorus.

* * *

Wm. Horace Ivie, Berkeley, Calif.: "I would be glad to know how the matter of the arrangement for the alumni chapters, is progressing. Hope to hear that the club is pushing the matter as fast as may be. Don't forget that when the time comes for the granting of such charters, that we of San Francisco and vicinity have the first application in (filed some two years ago). It seems to me that now is the time for the local chapter to take active steps, looking toward the formation of a National organization. All the preliminaries should be worked out, and the matter so sifted that the organization can be easily and quickly completed when the brothers come home next August. You have never succeeded in doing this by proxy at any of our former A. O. A. meetings and should not throw away this splendid chance now. Congratulate the editor of the Bulletin for me."

O. O. Bashline, Grove City, Pa.: "I have just received the Bulletin and enjoyed reading it very much. I am glad to learn of the club's prosperity and to note the excellent quality of the new members."

* * *

D. H. Clouse, Loveland, Colo.: "The Bulletin is certainly received and read with interest. May the good work ever continue."

* * *

Dr. M. C. Burrus of New Franklin, Mo., visited in Kirksville a couple of days, on business, returning to his practice Dec. 20, 1907. He desires for us to state that the agency for his gynecological sling is placed with W. D. Bledsoe whose ad appears on another page.

* * *

Dr. Frank R. Heine of Pittsburg, Pa., spent Christmas in Kirksville with his parents. He remained for the club meeting Dec. 28th and gave the clubs an instructive talk, the synopsis of which appears elsewhere in this issue.

* * *

Dr. Mell S. Slaughter of Webb City, Mo., spent the second week of January in Kirksville, visiting the home folks. He visited the club Jan. 11th and gave words of encouragement and advice to the members present.

* * *

Frank L. Goehring, Pittsburg, Pa.: "Business has been very good considering the financial situation. The more I see of osteopathy, the more I am convinced of its merits. Have had some very interesting cases and in more than one case, I have had the pleasure of putting the M. D's. on the run. Give my regards to all the club members and tell them they should shake hands with themselves for being members of the Atlas Club and students in the A. S. O. So many people ask me if I am an A. S. O. graduate, and very often if I am an Atlas man."

* * *

Elijah Collier, Decatur, Ill.:

"The Bulletin is a reminder of other days,

The days that were all too brief.

Where we studied our lessons with a free good will,

With A. T. Still as our chief."

* * *

Dr. E. D. Holbert of Sedalia, Mo., visited the A. S. O. and Kirksville, Jan. 10, 1908.

* * *

Jno. J. Schmidt, Vancouver, B. C.: "Wish the Atlas Club and the Bulletin a prosperous new year."

Carl P. McConnell, Chicago, Ill.: "I think all the practitioners enjoy and appreciate the good work that the Bulletin is doing, especially its stand for A. T. Still osteopathy."

* * *

DEIED.—At Alma, Ill., Oct. 19, 1907, Dr. W. C. Stephenson of hemorrhage following typhoid fever. Dr. Stephenson practiced at Johnson City, Tenn., until this fall, when he removed to Alma, Ill. He held the office of Noble Skull of the Atlas Club, while in school, being in office from June, '04 to Jan., '05. His wife, Dr. Harriet Boles Stephenson will remain in Alma.

* * *

MARRIED.—On Thanksgiving afternoon, Nov. 28, 1907, occurred the marriage of Dr. David A. Mills of Detroit, Mich., to Miss Clara Boles. On account of the death of her brother-in-law, Dr. W. C. Stephenson, the wedding was a quiet affair at the home of the bride's aunt, Mrs. M. L. Baker, Marion, Ill. They left at once for Detroit, Mich., where they are at home to their friends at 387, 2nd Ave.

* * *

BORN.—To Dr. and Mrs. Ward Loofbourrow of Sewickley, Penn., an osteopath girl, Dec. 21, 1907, Gertrude Van El. The Dr. writes, "Merry Christmas to all the club members. I've got the swells."

* * *

CHANGE OF ADDRESS.

Bowen, Margaret, '06, Tazewell, Va.

Crossland, Emma C., '06, 721 Broad St., Grinnell, Iowa.

Davis, D. L., '05, Box 334, Hico, Tex.

Ellis, Irene H., '98, 687 Boylston St., Boston, Mass.

Farley, R. Monroe, '06, 320 Montgomery St., Syracuse, N. Y.

Hull, Ella, '05, Fargo, N. D.

Johnson, Julia A., '06, 620 Cookman Bldg., Asbury Park, N. J.

Kerr, Janet M., '06, 123 East Ave. 53, Los Angeles, Calif.

Krohn, G. W., '04, 209 N. Hanover St., Carlisle, Pa.

Love, S. R., '03, De Land, Fla.

Marts, Tena May, '04, Le Grande, Calif.

Millard, F. P., '01, 4 Richmond St., E. Toronto, Ontario, Canada.

Millay, E. O., '04, Henry Bldg., Detroit, Mich.

Pigott, Adalyn, '03, Dominion Bank Bldg., Toronto, Ontario, Can.

Schmidt, Jno. J., '01, 619 Granville St., Vancouver, B. C.

Shupert, Mary E., '07, 3rd National Bank Bldg., Rockford, Ill.

Smith, E. C., '02, Carrollton, Mo.

Stephenson, Harriet Boles, '05, Alma, Ill.

Thomas, Maud, '03, Goodwyn Inst. Bldg., Memphis, Tenn.

Webster, G. V., '04, Carthage, N. Y.

AXIS NOTES.

Our semi-annual election occurred on the 15th, inst., and the following officers were elected for the ensuing term:

President.....	Elva James Lyman
First Vice President.....	Helen R. Kinsell
Second Vice President.....	Alice M. Conger
Recording Secretary.....	Frances Hamblet Thoms
Corresponding Secretary.....	Carrie Stealy
Financial Secretary.....	Maude Barger
Treasurer.....	Mrs. Belle Givens
Chaplain.....	Mrs. Helen L. Haynes
Escort.....	Grace Shupe
Janus.....	Edna Earle
Librarian.....	Rose Wismer
Assistant Librarian.....	Clara Elsie Heneke

Miss Frances Pearle Saunders has been appointed Axis reporter for the next semester.

Miss Eva L. Barger of Chattanooga, Tenn., and Mrs. R. J. Poulter of Waxahachie, Texas, were our January initiates.

Mrs. Poulter was only with us at one meeting owing to the sudden illness of her husband, which terminated fatally. She accompanied the remains to the Texas home. Our deepest sympathies are with this sister. Mr. Poulter was an Atlas man, held in the highest esteem by all who knew him, and a full account is given in the Atlas notes.

Through misunderstanding the item in the December Bulletin gave Mrs. Ray's home address Galesburg, Ill., and it should have been Tecumseh, Neb.

The Axis members who remained in Kirksville during the holidays were delightfully entertained by the Atlas club on the evening of Dec. 28th. Dr. Heine gave a very practical talk, which is published elsewhere in this issue, and his remark that the "woman osteopath should not treat men" called forth much discussion and came very near taking first place as a feature of the evening.

Mrs. Betsy Dyer spent the holidays in Springfield, Ill., a guest at the home of Dr. Preston Gibson and while there met Dr. Pauline R. Mantle, who is a very successful and prominent D. O. Dr. Mantle sends New Year's greetings to the Axis girls.

Mr. and Mrs. L. H. Most are the proud parents of a 10 pound boy which came to their home Jan. 11th. The Axis club honored our juvenile brother with a spoon bearing the Axis emblem.

Mrs. Eleanor Dashiell has just returned from a month's visit at Washington, D. C., having been detained by the illness of her mother. Mrs. Dashiell attended the annual banquet of the Greater New York Osteopathic Association held in New York City at the Hotel Knickerbocker on the 18th, inst., and enjoyed meeting so many of the earlier members of the Axis and Atlas clubs, among whom were Drs. A. L. Conger, Nellie Whitecomb, Walter A. Morkley, Chas. Hazzard, George W. Riley, and others. It was a brilliant and inspiring function.

Those of our members who have been on the sick list and unable to attend to school duties since holiday vacation are Miss Alspach, Dr. Sandus and Mrs. Ewing.

Mrs. Sarah L. Dille was called to Garnett, Kans., this month to attend the funeral of her mother, who died on the 7th, inst.

AXIS FIELD NOTES.

Dr. A. Maude Sheridan, Holdrege, Nebr.: "Wishing the Axis Club a prosperous year."

Dr. Emma Crossland, Quincy, Ill.: "Please change the address on my Bulletin to Grinnell, Ia. Dr. Kerr has located in the west and I will take her place with Dr. Hibbetts. I enjoy every number of the Bulletin. Best wishes for the success of the Atlas and Axis Clubs."

Dr. Ida C. Hart, Pittsburgh, Pa.: "Wishing you every success."

Dr. Loula A. Rockwell, Asheville, N. C.: "Wishing the Club continued success."

Mary J. Bowden, D. O.: "Best wishes to the Axis Club for a happy and profitable new year."

Mary E. Shupert, Rockford, Ill.: "The Bulletin is fine and I enjoy it very much. Best wishes for the prosperity of the club and love to the Axis girls."

Jessie Lyeon, D. O., Goodland, Kan.: "I like my new location much better than the south. The west is the place for western folks."

Georgia people are addicted to quinine and calomei and don't wish for anything any better. They are all right after they become educated to osteopathy, but it takes too long to educate them.

I am glad Dr. Gerdine has returned. Would love to see Philip."

Dr. Marie W. Day, Portland, Me., lost her father on the 15th of this month.

The friends of Dr. Sarah E. Carothers, of Lawrence, Kans., enjoyed a few days visit with her during the holidays.

Dr. Amanda N. Hamilton, Greeley, Colo., writes: "Entirely too long a time has elapsed since I wrote you but I assure you I always think of the dear Axis club as a source of strength, and find the Bulletin is indispensable. I am hoping to be with you during the convention and to meet with you in the dear old club rooms is not one of the least of the attractions. I have done well here; worked too hard in the high altitude before becoming acclimated and had to go east for a long rest, and now after four months' rest am back at work feeling fine. I find osteopathy all and more than I expected. It does the work.

Dr. Isabella Brewington was visiting in Denver and I had the pleasure of spending the day there with her. Her husband was on a business trip and she accompanied him. She is much interested in osteopathy and the club.

Dr. Frey is nicely located and has a good practice for the short time she has been in Denver. We look for great things from Dr. Frey. Love to you all."

Resolution.

It is with a feeling of deepest sympathy that the members of the Axis Club record the death of Dr. Gertrude Forrest, which took place at her home in Lovillia, Iowa, Dec. 18, 1907.

The profession has lost a worthy representative; the Axis Club a loyal, true hearted member and friend.

Resolved; That we share with the bereaved family their sorrow and grief and hereby tender our heartfelt sympathy; and spread upon our minutes a copy of this memorial.

ALICE M. CONGER.
MRS. MARY EWING.
EVA I. MAINS.

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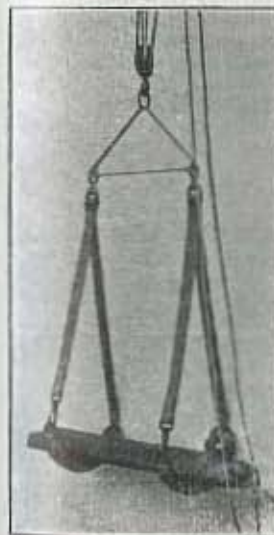
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