

# **The Osteopathic Physician**

**January 1905**

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# THE OSTEOPATHIC PHYSICIAN

Volume VII.

CHICAGO, JANUARY, 1905.

Number 2.

## FIGHT AND WIN IN OLD VERMONT.

M. D.'s. Campaign to Shut Out D. O.'s.,  
But Are Foiled.

## NEW OSTEOPATHIC LAW IN FORCE

A Three-Year Course of Nine Months Each Is  
Enacted Which Goes Into Effect at Once—  
Our Practitioners Escape Examination  
by the Medical Board—Interesting  
Story of Conflict.

Another crisis has been met and passed in Vermont.

Again the Osteopaths are victors.

It was not a walkover, however, and but for the splendid energy, intelligence and resources shown by our profession of that state we would have been shut out of the state completely by the medical plotters. They had clever plans laid—but they were foiled.

As it was, our party was compelled to accept a law calling for a three-year course of nine months each, which clause is operative immediately, and Dr. William W. Brock tells an interesting story herewith how we were mighty glad to get off with that compromise.

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### How It Was Fought Out By Dr. William W. Brock

"Any person who, not being licensed by said Medical Board, composed of three Regulars, two Homeopaths and two Eclectics, that shall advertise or hold himself out to the public as a physician or sign a death certificate is subject to a fine of from fifty to two hundred dollars, or three months' imprisonment, or both."

Such was the wording of part of Section 10 of Senate Bill No. 42. Pray, where would the Osteopaths get off here? The Legislative Committee of the Vermont Osteopathic Association, composed of Dr. H. H. McIntyre, Dr. L. D. Martin, Dr. Guy E. Loudon and Dr. William W. Brock, took up the matter, proved the profession's peril, procured counsel, drafted and introduced Senate Bill No. 63. Dr. Russell, the Osteopathic counsel, proved to be exceptionally qualified, as he had practiced medicine for seventeen years before studying law, but he was not prejudiced by his former associates, and fought the whole battle for us solely on the grounds of fair play.

Senate Bill No. 63 created an Osteopathic Board of Examination and Registration which placed the Osteopaths in Vermont on the same footing with equal rights and privileges as any other Vermont physicians. The old Osteopathic law, created in 1898, with the 1902 amendment, gave the graduates of the Kirksville and Boston schools a right to practice their art of healing, to be sure, but this was an Osteopathic law in name only.

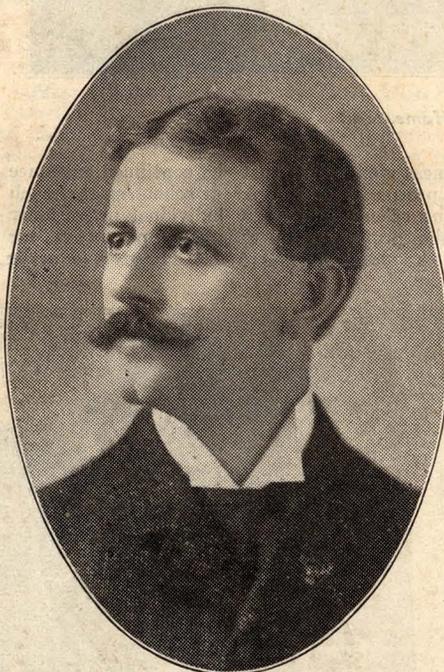
When our bill came up in the senate and was referred to the Judiciary Committee the M. D.'s were foiled, as they meant to have it die a natural death in the joint committee on Public Health where they had a majority. When the Medical Registration Bill, Senate Bill No. 42—of which the first paragraph in this article is a part—came up for a hearing before the joint committee on Public Health they tried every possible means to compel, inveigle or persuade the

[Continued to Page 3.]

## Rebukes Sycophancy and Self-Seeking

[From the Journal of Osteopathy for January]

Another lesion emphasizing his question from a different angle is indicated in the recent utterances of Dr. H. B. Sullivan. Perhaps I am not the one to discuss this subject, for I must admit that it will require evidence to convince me that Dr. Sullivan is sincere in all he has written since the meeting at St. Louis, unless, indeed, he be sincere in his determined effort to cause disruption in the profession by working on the passions of men. As long as he spoke as an individual, I purposed to say nothing, as I believed the distorted and intemperate character of his diatribes were their own sufficient refutation. But when he uses the official position of president of the Alumni association, bestowed upon him by the suffrages of his professional brethren, to add force to his misrepresentation and abuse of those who put him in



Dr. Wm. R. Laughlin, Author of *New Anatomy*

that position, it is time to call a halt. Such prostitution of official position in civil life would be punished by impeachment and removal from office with dishonor. Who appointed him censor of the loyalty of his brother practitioners?

He grows frantic over the strenuous efforts which he and those who agree with him (if there be any) are compelled to put forth as a sort of "salvage corps" to save from utter wreck the good name and fame of Dr. Still. This is pure rot. It bears very familiar earmarks. The peculiar position of Dr. Still in Osteopathy, with his well-known kindness of heart, has caused a perennial crop of fawning sycophants and self-seekers to attempt—always ineffectually—to gain some selfish end and bolster themselves up by disparaging others. Not one of these has ever developed into a reliable exponent of Osteopathy and they never will! They are not built that way. The doctor's conception of honoring Dr. Still seems to be that of a fulsome adulation which is offensive. He would have Theodore Roosevelt put "President" on his hatband. He would hang a

[Continued to Page 5.]

## THREE-YEAR COURSE IS NOW A FACT.

American School of Osteopathy Ex-  
pands Its Curriculum.

## QUIT 20 MONTHS NEXT SEPTEMBER.

Great Satisfaction Is Experienced by the Entire Profession Over the Addition of Third Year at Kirksville—Our Colleges Are Now a Unit on This Important Question of Educational Standards.

Joy reigns throughout the profession over the announcement by the American School of Osteopathy that it has adopted the three-year course, which will take effect this coming September.

This announcement is made officially by the parent school through the Journal of Osteopathy and by Dr. Charles E. Still in an open letter sent out to all graduates. It is a frank, manly, positive and unconditional declaration that the three-year course is now an accepted fact at Kirksville, and sets forth that with the enrollment of the coming February class at the A. S. O. the last two-year student will have been matriculated.

Of course the entire profession is gratified, not to say delighted, at this news. It would be hard to say whether the alumni of the American school or of the other colleges are most pleased. The former are glad because it means the parent college will be certain to retain its admirable position in the leadership of Osteopathic education. The latter are glad because the peril of going it alone on the three-year cruise is now happily removed from the course of their Alma Maters. While confident that even the younger colleges could win out on the independent three-year basis, yet there was peril in it, all agreed, and, now, that has been wiped out by all our reputable schools joining hands to institute the reform together.

The decision of the American School is a source of special satisfaction to a lot of the alumni who, as staunch advocates of three-year education, yet at the St. Louis convention were strong in sympathy for the situation of the parent college and talked and voted to give Dr. Charley Still and Dr. Warren Hamiton the time they felt was needed to work out so important a change. These alumni accepted the statements of the A. S. O. leaders as uttered in absolutely good faith when they had said they all wanted the three-year course and would institute it as early as they felt it could be done on a successful basis.

Perhaps some of the advocates of immediate establishment, regardless of cost or consequences, felt that the A. S. O. at heart did not really favor the lengthened course. The appearance of vacillation on the part of the school gave some color to this suspicion. But the alumni in good majority did not share such distrust and offered their own support as bond that the A. S. O. would be found squarely on the line of progress at the right time; and we believed to a man that that time would not be delayed longer than September, 1905. The prompt decision of the authorities within a few months after that all arrangements have been made for the A. S. O. to go upon new basis next fall now establishes the fullest sincerity for the repeated declarations of Dr. C. Still and others that they are as anxious to advance educational standards at Kirksville as



*Summer at the Old Homestead*

in any other quarter. And why shouldn't they be? Who has more at stake for the reputation of Osteopathy, on principle, for sentiment or financially?

Having laid the foundations of its three-year course broad and deep we may now expect old A. S. O. to give us a third year that will be worth the taking.

The first announcement of the A. S. O. as to its expanded curriculum was made as follows in the December Journal of Osteopathy:

**First Announcement by the School**

Some time ago it was announced in these columns that nothing more would be said editorially on the three-year course question until that time should arrive when the management of the A. S. O. had definitely decided the course to be pursued by it in connection with this question. For the past two or three years the question of increasing the length of the course of study to three years has been seriously considered, but never for a moment had the management any other idea in view than that of adopting such a plan just as soon as the way seemed clear to make a success of such a venture. The A. S. O. has always maintained, and is still of the same opinion, that a two years' success is better than a three years' failure, and has never intended to initiate any movement that it did not see its way clear to make a complete success of, although, on some occasions, urged to do so by individuals and associations.

The impatience, however, which some of our friends have manifested in urging the adoption of the three years' course, we believe arose from good and just motives on their part in their desire to advance the interests of the Osteopathic profession, and although we have opposed their efforts we do not impugn their motives. Our school, being a private institution without endowment, must be conducted on the same business principles as any other enterprise involving the outlay of a considerable sum of money; it must pay all necessary business expenses and a legitimate interest on the money invested, otherwise failure is bound to overtake it; therefore, that caution has been exercised in our financial management that has resulted in the institution to-day being in a solid financial condition. And, furthermore, it is the intent of the management to keep it so. We have realized, aside from conducting the institution successfully from a mere

business standpoint, that the continued existence and prosperity of the parent school means much to the science and every individual practitioner in the profession in this early period of our growth and development. A failure has never

been imminent nor contemplated, but, if through attempting more than could be successfully carried out, the A. S. O. should be compelled to close its doors, no one can deny that the effect not only upon Osteopathy as science, but upon the members of the profession now in the field would be disastrous. The management of the school is considered by its directors to be a sacred trust, and everything so far done by them and to be done in the future has had and will have for its object the advancement of the science.

As Osteopathy is steadily advancing in public favor, as the numbers in the ranks of our profession is fast increasing, and as the field of applicability of the science is becoming wider, the demand for a more thorough and adequate professional training is now evident. There are other reasons, aside from those financial, why we have not been in a hurry to require the third year. What would we teach? We have been engaged so far in developing the science and testing its limits of applicability, and as yet, except in a general way, there are many fields practically unexplored. And as the propagation of demonstrated truth as it relates to Osteopathic therapeutics is the essential thing, we have not hastened to hold the student a third year.

Are we prepared to teach a third year of Osteopathy, or shall we add the third year to our course and wait for developments? These are questions that have concerned us in the past. We believe, however, that the time has now arrived where we can safely, from every viewpoint, add the third year to our course of study, and that such action on the part of the A. S. O. would be a progressive step toward the advancement of the science.

We realize that our practitioners in order to more successfully conduct the general practice they are gradually drifting into need a broader and more thorough professional education, and



*Pap's "Castle on the Hill"*

we believe by adding a third year we will better be able to give it to them. We therefore announce that we will establish the three years' course September, 1905, and that we will be thoroughly prepared in every particular to make the course a strong one.

In addition to our present equipment for teaching we will have a new \$25,000 hospital, to be erected immediately.

In connection with our announcement in this issue of the Journal with reference to the three years' course, we desire to say a word in regard to the A. O. A. and our attitude toward the Association. It will be remembered that at the St. Louis convention a rule was adopted making September, 1905, the latest date for the adoption of the three years' course. We take pleasure in complying with the Association's rule, not only for the sake of professional harmony, but because we believe in the three years' course.

This action on the part of the A. S. O. in adopting the three years' course is not taken as a result of the rule, but because such action is considered by the management for the best interests of Osteopathy. Nevertheless, as the subject for contention in the past has been settled, we look forward with pleasure to the harmonious operations of the A. O. A. in the good work in which it is engaged. We pledge our cordial support and cooperation as in the past.

This declaration was promptly followed by Dr. Charley Still's open letter to the profession, which was as follows:

**Dr. Charley Still's Announcement**

Kirksville, Mo., Dec. 20, 1904.

Dear Doctor—We presume you will be pleased to know that the American School of Osteopathy has publicly announced that it has adopted the three years' course, to be instituted September, 1905, therefore, our next class, the one to be matriculated February 1st, 1905, will be the last one to be received on the two-year plan. We feel certain that this effort on our part to raise the standard of the profession will meet with the

hearty approval and cooperation of every friend of the science. It is a move that we have long anticipated and have only waited till the time seemed most opportune to initiate it. Another year added to our course of study means much to the management of the school in the way of additional responsibility and it means much to the profession if it is successfully carried out. We feel that this voluntary elevation of our standards of qualification will not only benefit those who are yet to be educated in our schools but those who are already in practice in the field. Any undertaking that better the position of Osteopathy with the public or with the scientific world will certainly also benefit all members of the profession. And, inasmuch as the responsibility of this new undertaking rests chiefly with the management of the school, we have every reason to believe we shall receive the moral support and hearty cooperation of the profession. We have planned to meet our new responsibilities to the profession by improving our equipment for teaching, we shall increase our teaching force, add new apparatus to our laboratories, and erect a new \$25,000 hospital for the use of the school. The future prospects for Osteopathy and the American School were never brighter, and we confidently look forward to the progress of our science and to the united and harmonious cooperation of all members of the profession to that end.

Fraternally yours,

C. E. STILL.

**Has Field Literature Paid You?**

Do you know whether or not it has paid you to circulate good popular Osteopathic literature in your field? We would like to have you read an article in this issue entitled "Unconscious Assimilation in Publicity." It is to be found in "Publisher's Corner" on page 14. This is a thoughtful article based upon one of the chief psychological principles underlying the art of advertising, and it is worth your becoming familiar with.

**Fight and Win in Old Vermont**

[Continued from Page 1.]

D. O.'s to take an examination before the Union Board—even proposing to put a D. O. on the Union Board—but what show would an Osteopath have against seven M. D.'s? When we refused to go before the Medical Board and said we wanted a separate examination, as there were certain subjects in which we wanted Osteopaths examined that they knew nothing about, Dr. Darling inquired if we "pretended to say that we had discovered anything new?" I told him yes. Dr. Fish sarcastically asked if we had discovered anything not in Gray's Anatomy. "In Gray's, but you have overlooked the facts."

This was the situation: If the Medical Registration Bill passed with the first paragraph of this article as originally drawn we were informed that it would overreach our bill, so we asked that they should add this amendment: "Senate Bill No. 42 shall not effect Act 110, Law of 1902, or the Osteopaths;" and they in turn asked us to add the three-year clause. When we said we were willing, but did not want it to go into effect until July 1, 1907, the issue was this: The whole argument for our bill was to raise the standard; the only argument that the M. D.'s had against us that had any weight at all was lack of education. That's the whole story in a nut shell. We were asked if there was any better way of raising the standard than increasing this course of education. We could not escape the dilemma.

Our bill was before the senate. It was one of three things: Back down, add the immediate three-year clause—or get beaten!

While the medical course at the University of Vermont is four years of seven months each year, or a twenty-eight months' course, against our twenty months' course, if we incorporated the three years' course and waited three years to enforce it, would it not look as if we were asking for seven and giving six?

We were asking for the same protection, unre-

## Carbolic Acid and Bi-Chloride of Mercury.

These drugs are commonly used as antiseptics yet neither of them are acceptable to an Osteopath. Carbolic Acid has a rank, offensive odor and when used in sufficient strength to have any antiseptic powers is a poison and will cause suppuration. Bi-chloride of Mercury is a deadly poison and like all mercury products is apt to leave an after-effect.

My antiseptic is far more expensive than any of the ordinary products but it is so much more effective that in reality it is cheaper. It is a high-class, strictly ethical preparation and is made especially for the Osteopathic profession. I do not offer it to medical practitioners unless they are Osteopaths as well.

It can be used with the greatest freedom on any part of the body, will never cause suppuration, will not coagulate albumen and is indicated in all cases where a germicide is needed. It kills pus at once, usually alleviates any irritation or itching the moment it is applied and is a model dressing. It is made both as a liquid and an ointment and is made in different strengths according to the case.

The preparation is very successful in the treatment of Acne, Psoriasis and Eczema and is sold for \$5.00 a month for each case. In other ailments the fee is \$2.00 a course. Osteopaths who failed to receive my last booklet may have a copy on request. As about 300 case reports are given it will be very interesting to you. If you have a case that needs such a preparation send me an order with a full description of it and I assure you that you will be more than pleased with the results obtained.

**DR. R. H. WILLIAMS, 617a New Ridge Bldg., Kansas City, Mo.**

stricted rights and privileges as physicians of other schools enjoyed in every respect except major surgery. The three-year clause was the lesion and Osteopathic methods adjusted the lesion by adding the three-year clause and gaining the public's support, and from that hour on the M. D.'s felt that they were beaten.

Dr. Russell carried weight and influence with his medical brethren which was very noticeable and they added the amendment we asked, getting around the word Osteopathy in this way: "Senate Bill No. 42 shall not effect Act 110, Laws of 1902, or practitioners licensed by any other board." You may say: With this amendment to Senate Bill No. 42 why not let the matter rest and not try for the Osteopathic law until all the schools had the three-year course complete and then win? There was a deeper issue up. A friendly M. D. told me that at the last meeting of the Medical Association the subject was taken up whether it was advisable to introduce a bill at this session or next compelling the D. O.'s to go before the Union Board for an examination. So the issue now really was an examination before the Union Board or before a board of our own.

The Judiciary Committee reported our bill favorably. The Eclectics didn't want the Medical Registration Bill at all. The Homeopaths did not want Osteopathy connected with it in any shape or form, stating that they could not then get reciprocity, and that was the object of the Medical Registration Bill. So there was trouble among the three factions that made up the Union Board. With the assistance of this disagreement in quieting the M. D.'s opposition, and with what influence we could bring to bear, the senate passed our bill. After the understanding about the amendments Dr. Fish, chairman of the joint committee on Public Health, promised that they would make no further opposition to our bill—and they could be trusted until they had the next best opportunity, which was when the bill came up in the house. The M. D.'s left nothing undone and unlimited pressure was brought to bear on the speaker of the house to refer our bill to the M. D.'s committee.

No small amount of this pressure was due to the efforts of one of the most influential members of the house, who was also a member of the joint committee on Public Health and a good friend of the speaker, and his efforts were due mainly, as we believe, to misrepresentations by the M. D.'s, because, while waiting for a train, he came to me and made numerous inquiries: "What is Osteopathy?" "The number of practitioners in Vermont?" "Who they are?" "How many schools?" "How long the first school had been established?" "How many students?" "Why we wanted a separate examination?" And numerous other questions. I answered and explained to the best of my ability in the limited time until his train arrived. We saw no further indications of his assistance to the M. D.'s. But it was the same old story, the Medics were treating the symptoms; the Osteopaths removed the cause; and it went to the Judiciary Committee as we asked, much to the sorrow of the poor M. D.'s.

But it took the united efforts and successive interviews of a United States senator, sergeant-at-arms, our attorney and a number of the best friends of Osteopathy. Dr. Fish's remark tells the story of their attitude: "I have no objection to the Osteopathic bills if they are allowed to practice at all."

When the bill came up for a hearing before the Judiciary Committee of the house the M. D.'s made their last stand. Both Dr. Fish and Dr. Darling stated repeatedly before the committee that they were not there to oppose the bill, but a number of the members of the committee said afterwards that their remarks were ridiculous. What else were they there for? What else did they do?

Their first opposition was: Osteopaths being allowed to treat contagious diseases, as they understood that we did not believe in germs. Dr. Russell would not discuss the subject of germs or compare methods of treatment, but

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made the whole fight on the grounds of fair play. The Osteopath has come to stay and had been successful and his success was not questioned. Remarkable results obtained in Vermont in the last nine years would speak for themselves.

Senate Bill No. 63 was drafted simply because Senate Bill No. 42, the Medical Registration Bill, would legislate the Osteopaths right out of business, since that was the intention of the bill, and our "medical friends" did not deny the facts, but shifted their attack in another direction. Now, the D. O.'s were not asking for anything but the protection, rights and privileges granted physicians of other schools. It was only fair treatment with no nigger in our woodpile.

Objection No. 2: Allowing D. O.'s to come into Vermont without an examination, if they had practiced five years in another state. And we gladly agreed to the reciprocity clause. The Osteopath is admitted to this state without an examination if he brings a certified copy or license from a state of equal standing with Vermont. The change strengthened our bill and it certainly created the feeling among the legislators that we were trying to raise the standard and that it would take a pretty good man to get into Vermont.

Here they made another effort to get the D. O.'s to go before the Medical Board for an examination. This question was put to Dr. Fish: "How would it be of benefit or disadvantage to an Osteopath to go before the Medical Board?" The question puzzled him. The only answer he could give was "That it would give them a higher standing."

Dr. Darling then drew a graphic picture of how the medical sons had to have a first-class preparatory education, four years in college, four years in Harvard Medical or the University of Vermont Medical, and then the examination before the Medical Board and, said he, "Here these fellows go out into that distant state of Missouri—into that remote town of which we have never heard, and come back in a few months and compete with us without examination"

Dr. Russell answered him: "If you should set up that kind of a standard nine-tenths of the medical physicians in Vermont to-day would have to go out of business."

Dr. Darling saw that he was beaten, and started to leave the room, but was asked by the chairman to remain until they had finished the hearing. The M. D.'s showed that they were down and out and made no further opposition. After we had agreed to the three-year amendment in the senate they had no argument as their only plausible one had been lack of education.

I know we will be censured in some quarters of the profession for the passage of the three-year clause to take effect now, but we were compelled to do it because if Senate Bill No. 42 had passed as drawn, we were informed by some of the best attorneys in Vermont, besides our own, that Senate Bill No. 42 was far reaching and would have reached us, even if Senate Bill No. 63 did pass. And, if Senate Bill No. 63 did not pass, Senate Bill No. 42 would repeal the old Osteopathic law. We would then have to go before the Union Board for an examination which ever way it resulted, and it was agreeing to this three-year clause that secured the amendment that Senate Bill No. 42 should not effect the Osteopaths. After failing to make any impression before the Judiciary Committee they acknowledged themselves beaten and the Judiciary Committee gave a unanimously favorable report of Senate Bill No. 63 to the house. The bill passed the house. The senate acted on the amendment and it was signed by the governor. Dr. Hutchinson (who was present, but had nothing to say at the hearing before the Judiciary Committee), came to us after the hearing and offered to favor our bill on the floor of the house if we wished.

The Vermont Board of Osteopathic Examination and Registration are: Dr. H. K. Sherburn, of Rutland, one year; Dr. Guy E. Louden, of Burlington, two years; Dr. William W. Brock, of Montpelier, three years. Our three-year course

— THE —

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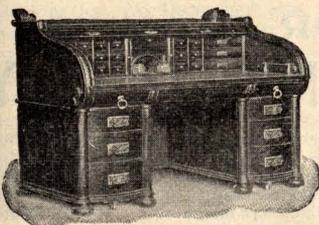
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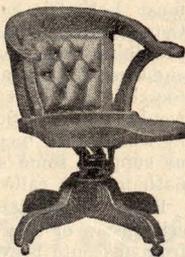
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of nine months each year, or twenty-seven months, lacks but one month of equaling the M. D.'s four-year course of seven months each year, or twenty-eight months. So we are now regarded as on educational equality with the entire medical profession in Vermont.

### The New Vermont Law Senate Bill No. 63

#### AN ACT TO REGULATE THE PRACTICE OF OSTEOPATHY.

It is hereby enacted by the General Assembly of the State of Vermont:

Section 1. The governor shall, in the month of December, 1904, appoint an examining board consisting of three members whose term of office shall expire one, two or three years consecutively from the date of their appointment; and shall annually thereafter appoint one member for three years, to fill the vacancy caused by the expiration of the term of office of the outgoing member of the board.

Sec. 2. Said board when so appointed shall be designated and known as "The State Board of Osteopathic Examination and Registration" and no person shall be appointed upon said board who is not a graduate of a reputable school of Osteopathy, and who has not been a resident of the state of Vermont, and been engaged in the active practice of Osteopathy for at least two years immediately preceding such appointment.

Sec. 3. The board shall immediately after appointment organize by electing a president, secretary and treasurer who shall serve for a term of one year from the date of said election. It shall be the duty of said board to meet at least semi-annually at such time and place as it shall designate, to examine applicants to practice Osteopathy in this state, and shall grant licenses to such applicants as shall satisfactorily pass the examination prescribed by said board, providing said applicants are of good moral character, are graduates of some recognized school of Osteopathy, requiring a three-year course of nine months each year, present evidence satisfactory to said board of a sufficient preliminary education, and shall be at least twenty-one years of age.

Sec. 4. The board shall prescribe an examination which shall include the following subjects, namely: anatomy, physiology, physiological chemistry, toxicology, pathology, urinalysis, histology, neurology, minor surgery, hygiene, medical jurisprudence, principles and practice of Osteopathy and such other subjects as the board may direct. In each of the subjects named the applicants shall pass a minimum grade of seventy per cent. and a general average for the entire examination of not less than seventy-five per cent.

Sec. 5. Applicants before taking said examination shall pay to the treasurer of the board the sum of twenty-five dollars; but any person failing to pass such examination, may at any time within one year present himself for a second examination without payment of any additional fee.

Sec. 6. Any person producing satisfactory evi-

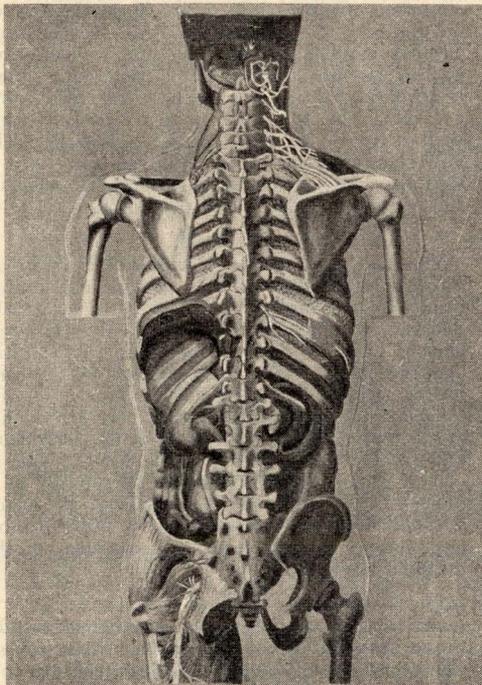
dence of having practiced Osteopathy in any other state or territory of the United States for a period of at least five years, who shall personally appear and present a certified copy of certificates of registration or license which has been issued to said applicant in another state in the union where the requirements for registration shall be deemed by said board to be equivalent to those of this state, shall be entitled to practice Osteopathy in this state upon presentation to the board of a diploma granted by a recognized school of Osteopathy and the payment of a registration fee of twenty-five dollars.

Sec. 8. Any person receiving a certificate of registration shall cause the same to be recorded in the office of the clerk of the county in which the holder resides, and shall pay the fee for such recording.

Sec. 9. The treasurer of the board shall quarterly make a report to the state treasurer of all registration certificates granted, and pay into the state treasury all monies received by him for such examinations and certificates.

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Sec. 10. Each member of the board shall receive a compensation of five dollars per diem for the time actually spent by him in discharging his duties as a member of the board, together with his necessary expenses; provided the amount received for examinations and certificates under this act be sufficient to pay the same, but if the state auditor shall, at any time, find upon investigation that said sums are not sufficient to meet the per diem and expenses as herein provided, then he shall allow the expenses in full and such percentage upon the per diem that the expense to the state shall not exceed the receipts under the provisions of this act.

Sec. 11. All statutory regulations controlling contagious diseases, and the granting of certificates of births and deaths shall apply to practitioners of Osteopathy.

Sec. 12. Any person who shall practice or attempt to practice the science of Osteopathy in this state without complying with the provisions of this act shall be guilty of a misdemeanor and upon conviction thereof shall be fined not less than fifty dollars nor more than five hundred dollars, or be confined in the house of correction for not more than one year, or both.

Sec. 13. All acts and parts of acts inconsistent with this act are hereby repealed.

Sec. 14. This act shall take effect from its passage.

Approved December 7, 1904.

### Rebukes Sycophancy and Self-Seeking

[Continued from Page 1.]

placard about Dr. Still's neck with the words: "I am Dr. Still."

\*\*\*

Dr. Sullivan severely criticizes Chap. II., Art. 1, Sec. 1, of the code. Let's see. He says: "Since medicine began dogmatic experimentalism has held it in bondage. . . . The truths underlying Osteopathy are God's own truths, and, limited though the humanity of Dr. Still and Osteopathy may be, these truths are as limitless as space itself. . . ." Exactly! Just what the code says in better form. We should not base our practice on a dogma, as that has been the bane of the healing arts "since medicine began." A dogma is simply a human utterance, and even when pronounced by Dr. Still is limited by his "humanity." Even Osteopathy, as the doctor correctly says, is "limited" inasmuch as it comprises only what we know. But the "truths underlying Osteopathy are God's own truths . . . , as limitless as space itself." Those "fundamental therapeutic laws of nature," a system of divine, not of human, devising, are the basis of our practice. But the doctor wants labels on everything. "This is a cow."

He persists in reading "medicine" into everything that does not suit him. This is simply mendacity. In all the reports and standards adopted by the American Osteopathic Association there is not one word tending toward "medicine," "materia medica," or "medical practice." The whole trend of his argument on this line is toward one of two conclusions. Either that he thinks that Osteopathy—if studied too much—will be found to lead inevitably into medicine; or that Osteopaths are such weak-kneed creatures that when they learn all there is to be known about the human body in health and disease they won't have stamina enough to stand by their colors; therefore Osteopaths should be limited in the amount of knowledge they are permitted to acquire.

And he is going to "attack the present law in Michigan requiring a three-year course." That would help with a vengeance toward a legal recognition in other states! I am of the opinion that we will not get a law in another important state, especially with an independent board, on our present basis of a two-year standard. And not because of opposition of the old schools, but because the great American public believes in thorough education.

\*\*\*

In his discussion of the abortion question Dr. Sullivan reaches the climax of misrepresentation.

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He arraigns the American Osteopathic Association as a band of murderous villains. The plain facts are these: There was no professional utterance of any kind on the subject. The whole matter was wide open. But abortion is universally held to be wrong in some cases. I read not long ago of one woman who boasted of having had 30 pregnancies stopped during her married life. What a moral graveyard her heart must be! To express the opposition of the Osteopathic profession to such work, the code prohibits "any treatment or operation that may endanger life," and to leave no loophole, "even foetal life." If it had stopped at that point it would suit Dr. Sullivan. But there are cases in which good men would differ with him. Let us suppose some situations to which an Osteopath may be called:

First—A pregnant woman with antepartum eclampsia, or persistent profuse hemorrhage from placenta previa or other cause. Treatment has no effect. If something is not done quickly she will die.

Second—Labor begun, tonic contraction of uterus, normal foetus, maternal pelvis with conjugate diameter of two and three-fourths inches.

Third—Labor begun, tonic contraction of uterus, twins, partly born, interlocked. The time, the surroundings, or the condition of the woman, preclude Caesarian section or symphysectomy. In all Osteopathic literature not one word tells us what to do under such circumstances. In all the oral teaching which I heard during my five years at Kirksville there were no definite instructions unless it was to get up and run and let a better man, an M. D., who did know what to do, come in and take charge. If sacrificing the foetus in these cases is murder, then the great heart of the people would have so branded it by enactment into law and by punishment of the murderer. But they have not done so. No state in this union has such a law.

The difference then is one of "conscience," and it would be exceeding the prerogative of the code of ethics to attempt to impose upon one portion of the profession the conscientious scruples of another portion. It therefore excepts from its sweeping prohibition, quoted above, such conditions as the three named, and similar ones. They are left exactly where they were before we had any code. If Dr. Sullivan's conscience requires him to let those three women die, and the conscience of his brother practitioner requires him to save the woman—even at the sacrifice of the foetus—neither of them is required by the code to have his convictions overridden by the other man's conscience, but each is free to do what he thinks is right. The only possible quarrel Dr. Sullivan can have is that his conscience is not permitted to regulate this matter for the whole profession.

✦ ✦ ✦

The code as a whole was regarded as an acceptable statement of the professional duties, responsibilities and privileges of Osteopaths. Dr. Sullivan will recall that the only material change made in it was one presented by the "opposition" and vigorously opposed by the committee, which, it was frankly stated, was intended to permit Osteopaths to play second fiddle to medical men, to sneak in at the back door, and treat a patient who was under the care of one of them. That is exalting Osteopathy to a finish. This was done at a session at which a small number were present. I want to believe it does not represent the sentiment of the profession generally.

✦ ✦ ✦

Dr. Sullivan indulges in many flings toward the educational committee. I just want to say that this committee has always tried to observe its proper place, to put in systematic form that which the thought of the profession had worked out and was demanding. Any exceeding of this limit can be easily punished at any time by the A. O. A. by simply turning down the report and discharging the committee.

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Since the above was written the Journal of Osteopathy for December has come to hand with the announcement that the A. S. O. would establish the three-year course in September, 1905. This will rejoice the heart of every true Osteopath, and as the A. S. O. can hardly be accused of leaning toward medicine, it ought to effectually silence those who have opposed the longer course, on the unwarranted assumption that it must mean the teaching of something beside Osteopathy, as though Osteopathy were too small a thing to spend three years upon. The most superficial application to Osteopathy of the laws of pedagogics, of teaching, apart from the thing taught, could lead to no other conclusion than that the three-year course was an absolute necessity. It was a matter of deep concern to all who realized how fully the

future progress of our science depended upon the speedy adoption of this advance step, to note during the past year the unbroken silence of the A. S. O. after Dr. C. E. Still's declaration at Cleveland. This was explained at St. Louis when he stated that it was due to financial complications.

But this announcement is evidence of the successful correction of the financial lesion, and the caprice of money loaners is no longer a factor in retarding the progress of the profession. For which "again I say, rejoice." Our forces are now all in line for more vigorous, united and effective work in the advancement of Osteopathy than ever before.

C. M. Turner Hulett, D. O.  
Cleveland, Ohio.

## The Young Physician's Struggle for a Practice

By a Chicago Physician

I AM a doctor of medicine in Chicago. I was born on a farm, reared on a farm, and it was from a country schoolhouse at a cross roads that I started out, practically penniless, for the acquirement of a higher education that should be the basis of a medical training.

Well, I am regarded as a fairly successful general practitioner in Chicago. But I will say that, as compared to becoming the fairly successful practitioner that I am, counting only from the receipt of my diploma in full from the medical college, all the other hardships and heartaches, footsoreness, and weariness leading up the educational hill to that diploma are dwarfed until the path of education lies white and smooth beside the miry way of a young doctor's experiences.

I am not a "sorehead," to use a slang expression. There are a hundred others in this great city who will echo all I say in this autobiography of experiences. But what shall they do? What shall I do?

I might go far enough to say that the medical college falls short of preparing the young graduate for the rough school of experience into which he is tumbled without preparation and without suspicion of the necessity of self-defense. In a measure he is disarmed to the overwhelming ethical dragons that line the road up which he must go towards success.

### Ethics Is One-Sided

Ethics, of course, is one of the great precepts of the medical school. But it is the ethics of the student-doctor toward the established practitioners, with nothing of word or warning regarding the ethics of the older doctor toward the new practitioner. No mention is made of this, perhaps, because there is no such code in reality. And if there is none in the great city, there is aggressively none in the smaller centers of population.

On one occasion when a dollar was phenomenally large to me, I received an emergency call while I was out of my home office. I returned within an hour and responded to the call, administering to the needs of the patient, giving him far more time than I would give such a case to-day, and leaving him resting easily. I had been told that I was so long coming that a call had been sent in for another doctor in the neighborhood, but that he, too, had not come.

This physician had an established practice in the neighborhood where I was then struggling for existence. I met him on the stairs of the flat building as I went down. He scowled maliciously as he bowed and started to pass me.

"I have just been to see Mr. Blank," I said, in explanation; "they said they had called me first and I seem to have beaten you."

He scarcely grunted as he went on up the stairs, as if I had not spoken. "Ethics," as I had been taught, required him to acknowledge my explanation in a civil manner, to go on upstairs and make his explanation, then leave and distinctly not to send in a bill for services. In-

stead, however, my telephone rang an hour later and a woman's voice informed me that she was Mrs. Blank.

"You needn't come any more, doctor; Dr. Bonaset has the case."

Presumably he got all the fees; I remember that mine was never paid.

In such a case as this the ethics of the profession might easily be laid aside and the commonest interpretation of the word charity still suffice. This youth, inexperience, and newness to his environment are hardships enough on the struggling young physician without the "ethics" of the profession becoming a weapon toward his undoing.

### Lost Case to Veteran

I was still new to the business of administering to the ailing when I was called in to see a young girl suffering from a case of St. Vitus' dance that was not at all typical. Perhaps I showed the lingering doubt I felt at the first call, but I looked up every authority possible and consulted my physician friends, and altogether worried and spent time and nursing on the little patient. The father showed some signs of dissatisfaction, and I called in a physician in consultation, who backed up my judgment and my treatment in every way. I paid the fee for the consultation.

But I found that a meddling neighbor was at the bottom of the dissatisfaction. She had diagnosed the trouble as spinal meningitis, and she wanted her doctor called in on the case. They called him in after awhile, too, after I had made half a dozen more trips to the little sufferer. Perhaps he took his cue as to the disease from this neighbor friend. Certainly he did not observe that ethical principle which would have forbidden his seeing the case without my presence at the bedside.

At any rate, he was an established physician, and in his opinion the child had spinal meningitis. He shaved the back of the child's head, applied Spanish flies, blistering the back of her head and causing the skin to puff with water. This water, as I learned from the father, was pointed out as having come from the child's brain in proof of the meningitis theory. The child died, and I begged the father to allow an autopsy, but he refused.

My point in this case is that if the attending physician had had the least medical knowledge he knew at the time he was called in that it was a case of chorea. But he took the case from a struggling young fellow who had nursed it along in an intelligent way, according to the best authorities, knowing that he took it in an unrecognized way from one who needed the money for the needs of his family. He took it in such completeness, too, that I never got a dollar for all the work I had done.

It does not require a professional sense of the fitness of things to recognize that in such an experience as this the young practitioner, educated to a thorough appreciation of all he owes

to the profession that is established, gets a supreme shock in feeling how little the established profession seems to owe him.

### Another Early Shock

Another of my early shocks and surprises came to me in a case of a man who developed cancer of the liver. Soon after I was called in he contracted a severe case of pneumonia. Between the two diseases I saw there was no hope for him. As I had entered the profession determined to practice it as honestly as I had lived always, I told the wife there was no hope; that death was a mere matter of time; that at the best I could serve only in making his last hours less painful than they otherwise would be.

The result was that in an hour I received a call at the telephone, telling me that I need not come any more—that a new doctor had been called in. Afterward I had occasion to inquire under what conditions the new physician had taken the case. I was told that he had held out several kinds of hope to the family, though expressing fears for the reason that he had not been called in sooner; there was no cancer of the liver in his diagnosis, though, as I had made prognosis, the man died within a week.

Will the lay public consider for a moment just what this attitude of "if you had only called me in sooner" means to all concerned? In the first place it is a cover for the man using the phraseology; he may hide behind it if the worst is realized, and he may bask in its light if by any means the patient recovers. For the physician from whom he has taken the case, however, there is only undoing so far as that family and its circle of acquaintanceship extends; at the best the new physician has been called in just in the nick of time, while at the worst the same practitioner has made it impossible for the new physician to save the patient.

This particular family is still residing in my immediate neighborhood; the doctor who replaced me on that occasion is the family physician, and—well, the reader may imagine just what my honesty cost me on that occasion.

### Honesty Loses Many Cases

It was in this one case that I learned my first lesson regarding diagnosis and prognosis. It will not do to diagnose a case and make the prognosis of its hopelessness and its fatal ending; if a doctor in his honesty does this, the family or the friends at once call in another physician. If one will not hold out this hope that is wanted another and another doctor is called in until some one does. Then the honest physician holds the result of his scruples.

The least worthy of all the physicians called in has taken the case, fortifying himself behind the fact that he has been called in late in the course of the disease, and more than secure when it has terminated fatally, as he knew it would in the beginning. The question here for the honest doctor is:

Why should I make prognosis that is unfavorable in order that I may distress the family and cause them to discard me for some other physician not nearly so conscientious? Will the layman attempt an answer?

Another phase of the same proposition confronted me not long ago. A woman came to see me. I saw at once that she was hypochondriacal, and after examination as to her symptoms I told her that she had nothing the matter with her, as she supposed.

The net results? I have offended her for life and I do not know where and when and how her influence may arise to my undoing. At the same time a friend of mine told me the other day that she is coming to his office twice a week for treatment and that her bills are all settled promptly the first of every month! Need one wonder at the old epigram in the profession, "The dust from the hat of an honest doctor will cure tuberculosis"?

### Patient Doesn't Want Truth

Yet the general public insists that it wants an honest doctor above all other needs of honesty in the professional world! Does it realize that its own position with reference to the doctor is belying that expressed want at every turn? One

may feel that he is closer to his physician than even to his pastor, and yet the physician knows a dozen things that he would not tell his patient for at least two reasons: First, the patient does not want to hear these things; in the second place he would get a new physician if he were forced to hear them.

There are diseases where the early symptoms of one are so like the early symptoms of another that no physician at a first or second visit may determine which is which. But would the physician dare tell his patients' household? Or after the disease has manifested itself, could the physician afford to say to his patient that in all medical research there is not more than a mere experimental specific for that particular trouble? It is a well established family physician in a level headed family who can answer the question: "What is the matter?" with even the guarded, "I am not sure;" and as to the other possibility, I can imagine two or three such possible confessions serving to plant a new family physician in that particular household, bulwarked there under the conditions that he knows all things and has all specifics therefor at the point of his pen.

#### Does Work Too Quickly

I have in mind a successful physician according to the full Chicago measure of the profession. Notoriously he keeps no record of his patients' ailments. His long list of patients makes the time of each short in his office; he gives them a moment, dashes off a prescription, and turns one out to be replaced in a moment by another. So far as I know only one person has sounded his methods. She is a woman and a patient of mine.

"I had been going to him for dyspepsia treatment," she told me. "The second time I called I had an impression that he did not even recognize me. Time and again I went, at two dollars

a visit, feeling that I was slighted each time. One day I called, and, while he recognized my face, I saw he didn't recall my trouble. I waited till he virtually confessed the fact, then I told him, 'That pain in my left shoulder is still there, doctor.' 'O, well,' he said, 'we'll fix that in no time,' and he dashed off a prescription. I paid my two dollars, tore the prescription up outside the door, and have never been near him since."

#### Few Smiles from Elders

Without color and without prejudice, the young physician takes up his troubles when he leaves school with his diploma. It has cost him a great deal of money in preparation for practice and he has no practice. He must fix upon a field in which to settle down, however, and wherever this may be he will feel the presence of the older practitioners who are ahead of him. His own academic knowledge of the "ethics of the profession" is fresh in memory. One of these elementary observances is that two physicians, meeting and recognizing each other's calling, at least shall share the courtesies of a "Good morning." I wonder how many young physicians of a year's experience in Chicago have numbered half a dozen smiles from as many established physicians in all that time?

Whatever this young man entering the medical practice may suffer in physical privation will be discounted in his sufferings because of professional "ethics." His sacrifice of the ethical always will outweigh his sacrifice of the material unless he have a skin supplied by nature immeasurably kinder than is his profession.

I know, for I have been both hurt and hungry in my time.—Chicago Tribune.

#### Feel the Osteopath's Muscle

[From the New York Press.]

We are gradually getting around to exercise for health and the Osteopath is driving the pill and lancet into retirement.

## Gallery of Osteopathic Pioneers

### Dr. Wm. R. Laughlin and His New Anatomy

By Dr. W. D. Dobson, Kirksville, Mo.

TO supply a long-felt want and to meet the demands for an up-to-date anatomy for use as a text in our Osteopathic schools, as well as to furnish the practitioner a ready reference book on this important subject, a work of inestimable value has been in preparation for years and is now completed by that prince of anatomy teachers, Dr. William R. Laughlin, for seven years a member of the faculty of the American School of Osteopathy.

To the many graduates and students of this school the name of the author is a guarantee of the value, accuracy and worth of this splendid book. The work is not a simple compilation of facts gathered from others, but it is the result of the experience of years of hard study by the author, as well as a keen insight into the needs of the student laboring to gain a knowledge of the human body from the Osteopathic standpoint.

The work sparkles with originality characteristic of the author; it is beautifully illustrated with original drawings and cuts made by skilled artists; and is so systematically arranged as to make it thoroughly attractive and helpful. This could scarcely be otherwise, coming from the pen and brains of one so well qualified. The writer of this article has known intimately the author and his family for 15 years and is fully able to verify every statement herein set forth.

Dr. William R. Laughlin was born on August 25, 1868, of highly cultured, well-educated, Christian parents. His father was a distinguished educator before him. In his boyhood years he was surrounded with those environments that served a good purpose in the development of keen intellect, an analytic judgment and an indomitable will. Compelled to work on the farm and in brickyards during the summer months, Prof. Laughlin was enabled to attend school during the winter until he se-

cured a good common school education, by which he was permitted at the age of 20 years to teach, which profession he has followed ever since, having taught in the public schools of Kansas four years, the high school of Kirksville, Mo., two years, one year in Beaver college, Pennsylvania, while for years has held and now holds the chair of descriptive and demonstrative anatomy, neurology and Osteopathic technique in the American School of Osteopathy.

That he is eminently qualified for his chosen profession as well as a writer of worth his college career is indicative. In addition to his common school and academic opportunities, he attended Hiram college, Ohio, three years; Garfield university, Kansas, two years; Christian university, Canton, Mo., one year, from which he graduated with the degree of B. S. in 1893, and from the American School of Osteopathy in 1898. He also took special courses in the University of Missouri, and under Dr. Eckly, of Chicago.

Dr. Laughlin has probably taught more students than any other man in the Osteopathic profession. His chief characteristics as a teacher which have brought him success are fidelity to duty, promptness in his work and an ability to discipline. His uniform kindness to new students, at that time when they stand in most need of a friend, has ever won for him friends who cherish the fondest memories of this most estimable teacher and friend.

Dr. Laughlin was married to Miss Belle Cash, of St. Louis, A. S. O., June class, '04, in 1903.

Dr. Laughlin's Anatomy is unique in arrangement in that it is given in lessons which makes it easy for study. It takes everything up systematically. It contains 290 plates, all original. Not being arranged like the existing anatomies, or edited for just the same purpose, it will doubtless prove first in popularity with Osteopathic students and practitioners because of presenting anatomy from the Osteopathic viewpoint.

### How Dr. Jones Has 'Em Coming

Dr. William H. Jones, of Adrian, Mich., is still alive and kicking, if press reports are any indication of what a practitioner is doing. The Toledo Blade and other papers receiving Associated Press service printed the following story which attracted wide attention and, although it is not stated herein that Dr. Jones is exclusively Osteopathic and some other palpable errors have crept in, we presume the case in the main is correctly reported:

† † †

### Hon. O. D. Fairbanks Was Ill with Ataxia

St. Louis, Mo., Nov. 19.—Hon. O. D. Fairbanks, who was at the point of death, suffering with locomotor ataxia, has been miraculously healed by a Michigan surgeon who specializes in bloodless surgery. Several months ago when cases of paralysis and locomotor ataxia were solicited by the surgeon Mr. Fairbanks, accompanied by his wife, who investigated the reported cures, commenced the treatment. His disease had been pronounced incurable by several physicians. He was unable to stand upon his feet, turn in bed, or feed himself; his eyesight was nearly destroyed and, in fact, all of the characteristic symptoms of advanced ataxia were present. He has been cured and now walks about without a cane, has none of his former symptoms, is free from pain and claims to be perfectly well. He was under treatment 60 days. He states that other cases were being cured by the same treatment. Mr. Fairbanks is a prominent moneyed man of Arlington, Okla. His benefactor, Dr. William H. Jones, of the Adrian (Mich.) sanitarium, expects to give the formulae to the profession after making more extended observations in the disease and its cure.

† † †

Dr. Jones doesn't let any grass grow under his feet if keeping busy will prevent it, judging further by this article which the Detroit Free Press published two weeks later:

† † †

### Adrian a Sort of Mecca

Adrian, Mich., Dec. 3.—(Special to the Free Press.)—Many invalids who journeyed to Adrian the past month returned home, chagrined and disappointed because the surgeon at the sanitarium refused to treat them. Since the remarkable cures of locomotor ataxia by bloodless surgery methods which were reported through the press some time ago, many sufferers from that disease have applied for treatment. An average of two out of five upon examination were told they could not hope to be cured. One gentleman, refusing to be classified as incurable, is said to have offered \$1,000 for the treatments, but the surgeon would not accept the case. Several homes near the sanitarium have thrown open their doors to accommodate the congestion of people, who are "clamoring after the last straw," many of whom will find a cure, and many who will not. The cures will, of course, be discussed, but will such cases as are not cured be reported?

† † †

Presumably it is Dr. Jones again who is referred to. Verily, it is good to be a hustler, and if Dr. Jones doesn't come under that classification there isn't one in the whole state of Michigan.

### Board Cannot Judge Regularity

The following appeared in the Grand Rapids Herald: "Lansing, Mich., Dec. 7.—The Superior Court rules that the state veterinary board is not clothed with power to pass upon the so-called 'regularity' of colleges which have or have not complied with the provisions of the Michigan statutes. The board refused to grant a certificate to Harry A. Wise, a graduate of the Grand Rapids Medical College, claiming that the college was not regular. The court granted a mandamus to compel the board to issue the certificate."—Fraternaly, Robert E. Jameson, Manistee, Mich.

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come all!—W. L. Thompson, D. O., Pres., Sheboygan; Harriet A. Whitehead, D. O., Sec'y, Wausau.

### A. S. O. Alumni Meet

The Alumni Association of the A. S. O. meets at Kirksville January 24 at two o'clock. A rousing jubilee is expected. Dr. C. E. Still will give the address of welcome. Dr. J. D. Cunningham will speak of our Alma Mater. Dr. W. D. Dobson will discuss the future of our schools and Dr. St. George Fechtig the future of practitioners. Dr. L. P. Meeker will speak for the senior class, A. S. O. President H. B. Sullivan makes his valedictory. The election of officers will receive the widest concern this year. Every A. S. O. graduate who can come is urged to be present.

### Ode to the Medical Man

The hapless wight is  
Sick with appendicitis;  
In fact the sick man's plight is  
But what to him  
Is wrong and grim  
To the physician right is.

When "practice" growing slight is,  
The doctor's sole delight is  
To sit up late  
In solemn state  
Inventing something "itis."

He made mosquito-bitis,  
And alcohol tightis,  
Until to-day  
The suffix gay  
Unquestionably trite is.

In fact the sick man's plight is  
A state of constant frightis.  
It seems to me  
There soon will be  
An awful rumpusitis!

—FROM "THE GATEWAY."

### To Obtain a License in California

Owing to the large number of inquiries from the profession in regard to the action of the California State Board of Examiners on the question of granting certificates to "three-year graduates" only, it seems wise to give a little information on the subject through the columns of "The Osteopathic Physician."

In April, 1903, the California Board resolved that: "We would not grant certificates, on diploma, to graduates of any school that had not had a three-year course, after the graduating of the class entering February, 1903." This action makes it necessary for those who desire to obtain certificate to practice in this state, by presentation of diploma, to make application before the end of February, 1905, unless the diploma represents a three-year course of study. The fee for certificate is ten dollars; examinations are held in February and July of each year.—Yours fraternally, J. Strothard White, D. O., Sec'y, Pasadena, California, Dec. 12.

### Coming Wisconsin State Meet

The seventh annual meeting of the Wisconsin Osteopathic Association will occur at La Crosse, Wisconsin, February 23 and 24. The programme will be as practical and helpful as possible, with no long-winded essays nor discussions on disputed theories. The time will be devoted to clinics and practical subjects. When it is announced that the following quartette of skilled, experienced Osteopaths will instruct and entertain us, it will be readily understood why we expect this to be the best meeting ever held in this state: Dr. J. Martin Littlejohn, of Chicago; Dr. M. E. Clark, of Kirksville; Dr. Harry W. Forbes and Dr. Ella A. Still, of Des Moines. No Osteopath who can "get there" can afford to miss this meeting. The instruction and inspiration one will obtain cannot be estimated. A cordial invitation is extended, not only to all Wisconsin practitioners, but to all those from adjoining states who can manage to come. Come one,

## CASH PRIZES FOR 1905

"Osteopathic Health" will give a good list of money and book prizes this year at Denver to those who write the best short articles appropriate for its pages. The first prize is \$50 in gold—a trophy worth winning surely, and each of the entire list is well worth striving for.

This annual competition was founded by "Osteopathic Health" three years ago to stimulate clearness, force, persuasiveness and simplicity of diction among our practitioners in explaining Osteopathic theory and practice to laymen and women. The best of these articles are printed by "Osteopathic Health" and their authors are also singled out for credit in the current number of "The O. P."

Articles of 500 to 750 words are regarded as of ideal length and, other things being equal, preference will be given to those that explain single diseases, rather than discourse on general principles, although special excellence will always count more than arbitrary conditions. The Judges of Award are: Dr. E. M. Downing, York, Pa.; Dr. Dain L. Tasker, Pasadena, Calif.; and Dr. Henry Stanhope Bunting.

Write on one side of the paper and, if possible, typewrite it. Sign your full name and address to the article. Send in as soon as possible. Here are the list of prizes this year:

First Prize: \$50.00 in Gold.  
Second Prize: \$25.00 in Gold.  
Third Prize: Dr. Young's Surgery.  
Fourth Prize: Dr. Tasker's Principles.  
Fifth Prize: Dr. Clark's Gynecology.

Sixth Prize: Dr. Hulett's Principles.  
Seventh Prize: Dr. Hazzard's Practice.  
Eighth Prize: Dr. McConnell's Practice.  
Ninth Prize: Helmer & Merton's Charis.  
Tenth Prize: Dr. Higgin's Muscles and Arteries.

**THE OSTEOPATHIC PHYSICIAN**

**The Organ of News and Opinion for the Profession.**

Published on the 15th of every month by The OSTEOPATHIC PUBLISHING COMPANY, 705, No. 171 Washington Street, Chicago.

**HENRY STANHOPE BUNTING, A. B., D. O., President.**  
**R. CARROLL CASH, Manager.**

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VOL. VII. CHICAGO, JANUARY, 1905. No. 2.

**Fairness! Freedom! Fearlessness!**

**EDITORIAL.**

*"How to the line, let chips fall where they will."*

'Rah for advancing standards!

Who will pass the next good law?

Plan to meet us at Denver next summer.

Get your nearest Osteopaths into the A. O. A.

New Hampshire is the latest state to organize.

Indiana and New Jersey are both about to be heard from.

We have more students in our schools to-day than are to be found in the homeopathic colleges.

Have you a good idea for an early issue of "Osteopathic Health?" Isn't \$50 worth reaching for?

Greater New York society love feasts are something that any Osteopath would cross the continent to enjoy.

At the rate our new state societies are growing one would scarcely say the disciples of A. T. Still are at a standstill.

Keep on organizing local and state Associations throughout the land. Let us make of every state an Osteopathic stronghold.

Three years of preparation in ten-finger Osteopathy ought to put our graduates where the M. D. will fairly howl for mercy!

Vermont gave us our first legal recognition and now gives us our last and in point of being well done this last job is certainly among the first.

Our medical friends have used the "big stick" so long and so aimlessly that we wonder now that they don't go at something that gets better results.

Our Vermonters should not jubilate over their new law with its three-year clause until Dr. H. B. Sullivan has given his word that he will not attack it.

With a fight for equality as physicians, and a three-year course to back up our position, the profession need never again fight over that battle of the windmills.

The universal adoption of three-year education is the best piece of politics that Osteopathy could possibly have played just at this juncture. Without it our name would have been Dennis in more than one fight just beginning. With it we

go into these fights with every confidence of winning.

Up to the hour of going to press Dr. H. B. Sullivan had not done anything punitive to the Michigan Osteopathic statute—but the profession trembles.

The American Osteopathic association is the cohesive working force of the profession, and he who would strike a blow at it is willing to see the profession's undoing.

Come to Kirksville January 24, alumni of the A. S. O., for the future of the organization depends upon putting the direction of its affairs into the hands of safe leadership.

Methinks Nevada has not yet reported a state Osteopathic association. Is it possible that here is a spot that has escaped the eagle eye of our hustling team of A. O. A. secretaries?

Osteopathy would have surely experienced some lamentable legislative reverses in 1905 if we had been unable to go before the world this year and say "All our schools are on the three-year basis."

Every year added to Dr. A. T. Still's golden sheaf of life proves to be the best one yet for Osteopathy. Long may the good Father of us all be spared to share professional victories and life's blessings!

Dr. McConnell felt a little shy in a big town like New York, but the company proved to be old friends, and when his turn came to speak he found his voice easily and said things that set them thinking.

Children are not allowed to practice Osteopathy in Vermont—no matter how precocious. Applicants must be 21 to be licensed. That is as it should be. The issues of life and death are serious enough to entrust to mature minds.

The time when self-seeking and sycophancy counts in our ranks has passed—as well pointed out by Dr. C. M. Turner Hulett—and those willing to resort to demagoguery to put themselves into prominence will only find immersion in a sea of ridicule.

**The Amende Honorable Is Due**

After his unwarranted insult offered to the American Osteopathic Association and its members Dr. H. B. Sullivan should either apologize or hand in his resignation. Otherwise he may hear from the organization at Denver.

**Independent Boards Satisfactory**

Our experience argues in favor of the independent Osteopathic board as the best arrangement to regulate practice. It insures giving every man a square deal and nothing more. It easily disposes of the pretensions of fakirs. With our three-year course we should be able now to get independent boards in all the states.

**When Laws Should Take Effect**

Editor Laughlin sounds a note of warning about the propriety of making new three-year laws operative before June, 1908. He points out that there will be no three-year graduates before that time among those who enter school next September. Wherever new laws are adopted this extension of time should be allowed if possible to arrange it.

**When Patients Question You**

Every practitioner feels the keen force of some good argument or the value of some illustration to make his practice clear and simple to the layman at least once or twice each week all through the year. It is usually something that occurs to him when he is being prodded with questions by a patient. If it is good for that inquirer, doctor, it is good for all who

are in his situation. Why not write it down and send it in to compete with the prize essay writers?

**Unconscious Assimilation**

One of the most important phenomena of psychology is termed "unconscious assimilation" and it has a very important bearing upon your bread and butter. We invite you to read carefully the article on this subject near the end of this number and to discuss it with us by letter, if your opinion remains at variance with ours after so doing.

**How to Judge a Colt**

Self-appointed Moseses are to be detected in the early stages of frost by three symptoms: (1) They must be elected president of something; (2) They must make a speech; (3) They must say something audacious and foolish enough to attract widespread attention. Any person who evidences these characteristics in sufficient native exuberance is entitled to regard himself as famous and to feel called upon to write more speeches.

**Strong Armed Osteopaths**

Many Osteopaths throw needless vigor into their treatments and punish delicate patients far too roughly. I run across cases of this frequently and wish to caution the field against it. Patients who believe their doctors punish them needlessly and who think they have suffered from overtreatment—which I am sure they very often do—are usually lost to Osteopathy for good, so the "strong-armed" practitioner would better heed what he is doing.

**Select an Able President!**

Let representative A. S. O. alumni go to Kirksville for the annual meeting January 24th in as large numbers as possible. Not least of the duties of the hour is the selection of a representative man for president of the Association who will understand the proprieties, be above fanning dissensions and not talk too much. Leaders should be men of discretion who will put the common weal above personal ambitions. As alumni most of us have been negligent, perhaps, and have left the affairs of the organization too much to accident.

**An Overtworked Vanity**

It pays to advertise. Look at H. B. Sullivan. Three months ago who knew that he was president of the Detroit Alumni association, president of the Michigan Alumni association and president of the United States Alumni association? Now the only thing to do is to elect Harry president of the Alumni Association of Absorbed Colleges and then federate the alumni of the Children and Grandchildren Colleges of old A. S. O. and let him preside over them severally and collectively and then everybody can be presided over by Harry.

Of course this does not yet provide for Osteopaths in foreign climes, but then they can organize by mail and Harry could doubtless lend them a typewritten copy of his inaugural for a few days till they got well initiated. Wonderful—this feverish genius to preside!

**Big Stick in West Virginia**

The West Virginia Medical association and the state board of health held a caucus December 16 to adopt certain recommendations for the legislature which would shut out Osteopaths if adopted. The Huntington Dispatch, speaking concerning the situation, says: "It may be remarked that the Osteopaths are in a bad way and their extermination seems assured. Opposed by the combined forces of the regular medical schools, the drug trade and the undertaking business, they do not present a very attractive proposition as to life insurance." The profession has heard that sort of talk before, however, and by united effort and heroic fight—the kind Stoessel put up in Port Arthur—still lives to tell the tale without having lost a single state.

But it will take work in West Virginia this trip, sure. Dr. Fletcher, secretary of our association, writes that our people are soon to map out their plan to defeat the conspirators.

### Bated Breath in Jersey

Our New Jersey brethren are holding their breath pending the announcement of the court in the Herring case. If it is decided for the Osteopaths the state can appeal. If it is decided against the Osteopaths, we cannot appeal. We would be shut out altogether. One hundred good Osteopaths like New Jersey as a place of residence and practice and would hate to move out. The sky is therefore full of doubt for them. But their hearts are brave and they mean to win if possible.

These court cases are treacherous, however. They are not fought on broad issues. They are not determined always by an appeal to justice. Technicality and precedence are the chief factors and, while we have almost invariably fared sumptuously at the hands of courts, yet we cannot but show a trifle of nervousness when we await a decision against which there is no appeal for us if we lose.

"The O. P." sends a message of courage to our brethren and sisters of New Jersey in the hour of fate and trusts the decision will be in the interests of personal liberty and justice.

### The Psychological Moment

The American school seems to have made its declaration for the three-year course at the psychological moment when it will do the profession the most good. It has already come to be defined in legislative fights that we as a profession cannot get what we want unless we shall raise our standards of education. In Vermont—almost at the hour of this announcement at Kirksville—a battle royal was being fought and settled and the terms of peace—aye, of Osteopathic survival—were that a three-year course for Osteopaths should be immediately effective. Ohio, Michigan, Wisconsin and other states had previously declared for the same principle—some even asked more of us—and, as prophesied in the editorial columns of "The O. P." many months ago, it has now become the sole campaign of the medical men to attack Osteopaths on its recent vulnerable point of too scant preparation.

Had we not risen equal to the emergency at this hour we would have heard a great deal more about this handicap in the immediate future. It would have been injected into every campaign as an issue and would have cost us heavily in every contest. As it is, we deprive our enemy of their weapons and strategy at one stroke and occupy a position where we can continue to be pretty generally victorious.

We could never hope to get legal recognition in New York and Pennsylvania without the three-year course, and we stood in imminent peril of being shut out of first one state and then another so long as we gave but 20 months of education. Instead of proposing, therefore, to abolish such secure legal protection as the profession now enjoys in states like Michigan on the three-year basis—which one humorist proposes to undertake—the profession is now able to rally magnificently to the standard of advanced educational qualifications and to win wherever trouble is precipitated.

It is consequently a matter for congratulation all around that the parent school and the rest of the schools can agree on this progressive policy at the opening of the year of grace, 1905, and there can be no doubt that our future looms brighter with legislative victories that shall now shortly be enacted.

### Plaster Casts Necessary in Congenital Hip Cases

A good deal of misunderstanding prevails in our own ranks about the Lorenz operation and its success in forming sockets for congenital dislocations of the hip. Now and then an Osteopath goes on record saying that Osteopathy

can cure these cases better than the Lorenz method with its six months in plaster casts. The following newspaper clipping from a D. O. whom we know and respect highly as a practitioner shows how bold our own people often are in making these claims:

Children are sometimes born with dislocations either produced in utero or by violence of forced delivery at birth. You will recall the case of little Lolita Armour, who was born with dislocation of the hips which was not discovered till the time arrived for the child to walk. How last year with what heraldry the coming of Lorenz, the great Austrian surgeon, was announced; that he received a \$100,000 fee for performing his operation which though far more cruel and inferior was somewhat on the order of Osteopathy. An Osteopath would by patience, gentleness and persistence have accomplished by gradual force what Lorenz did at one time with cruel celerity and six months in plaster casts would not have been necessary afterwards.

Now the facts of the case—so far as the editor has gleaned them from our doctors who have given this field careful study—are that Osteopathy cannot reduce congenital hip cases at all without the Lorenz method, or at least that part of it which our people so often discredit, fixation in plaster casts for some six months. Here is the situation as the editor understands it:

In congenital hip dislocations no normal socket is there and it would do no good merely to draw the thigh down to its proper place with no acetabulum to receive and hold it. It would at once slip back. That would happen whether the hip were set gradually by an Osteopath during six months or by a Lorenz follower with violence in six seconds. The part that counts after reduction is fixation with constant irritation at the spot where a new socket is needed which prompts nature to grow a new

one. In this the Lorenz operation is brilliantly successful in the great bulk of the cases and is entitled to our praises and should not be decried. The violence which tears tissues sets up the very inflammation which will at length develop a new socket.

Now what possibly can be argued with all fairness is that Osteopathy in the first stage of treatment may accomplish reduction by gentle and gradual means in a way better than the Lorenz method using force—but I have the impression that that is not true in these congenital hip cases. I should like to be informed by one who knows. But, if this were true, it is certain that Osteopathy would then have to hold the hip in its new position by a plaster cast while the new socket grew as a result of the femur working against its pelvic base. So it is always unfair and even silly to decry this plaster cast chapter of treating these congenital hip cases.

I got the idea from Dr. George M. Laughlin at St. Louis last summer that Osteopathic manipulations are even unfavorable as a preliminary to the fixation of these congenital cases. He said that our gradual movements of the femur gave motion to the hip joint without allowing after-inflammation to develop, which is regarded as a necessary factor after securing reduction; and that it improved the blood supply to all parts and built up the tissues so in the region of the joint that the muscles were stronger and made it more difficult to keep the femur in the new position after it had been put in the correct yet the new and strained position. But most important of all, our soothing relaxing treatment puts the tissues in such a condition that inflammation will not often develop after reduction and therefore no new socket can be cultivated.

I saw a case which Dr. Laughlin pointed out as suffering from just this error, being a case of congenital hip dislocation which had received six months or more of Osteopathic manipulation and in which the femur could very easily be drawn down without causing any discomfort; but Dr. Laughlin said that when held by a plaster cast, after being put in such a healthy condition, that no socket would grow. That, at least, is my recollection of the interview.

Now comes the news from Des Moines that Dr. Harry W. Forbes is going a distinct stage ahead of the Lorenz method in treating these cases first Osteopathically and then surgically with fixation. This statement is puzzling in view of the foregoing and we would like to know just what Dr. Forbes can tell us. Will he not give us a statement for the "Shop Talk" department next month?

It is safe to emphasize, however, that our practitioners are entirely wrong in decrying the use of plaster casts in these cases, and if pointing out this fact will prevent any fellow Osteopath from committing such a blunder the editor will feel repaid for his trouble in calling attention to the matter.

## FEBRUARY

### "THE WINTER NUMBER"

- "RIGHT AND WRONG TREATMENT OF PNEUMONIA." Dr. Bunting
- "WHY NOT ABORT LA GRIPPE?" Dr. Bunting
- "THAT COLD IN THE HEAD." Dr. Louise Burns
- "WHY YOU MAY FEEL WORSE AFTER TREATMENT." Dr. Bunting
- "PHYSICIANS CANNOT GIVE HEALTH." Dr. J. Homer Dickson
- "PHILOSOPHY OF OSTEOPATHY BOILED DOWN."
- "THE REASON OSTEOPATHS SEEK LEGISLATION."

Truly, a valiant number. "Osteopathic Health" has a record of growing constantly better. How many will you circulate in February? Place your order early.

## JANUARY

"Osteopathic Health" will contain:

- "WHAT DR. STILL HAS DONE FOR WOMAN," By Dr. Henry Stanhope Bunting.
- "RHEUMATISM," By Dr. Addison O'Neill.
- "A LITTLE TALK TO MEN."
- "HOW OSTEOPATHIC PATIENTS ARE TREATED," By Dr. Henry Stanhope Bunting.
- "A TRUCE TO ASTHMATICS."
- "SHORT PARAGRAPHS."

The field should circulate twice the usual number of this issue because of its power to make converts.

A great number for the women. It tells them how they may hope to get well themselves and then what to do to make "father" or "hubby" also happy.

Osteopathic Health will also give a handsome "Art Calendar for 1905" with every single order, new contract and renewal of contract received now or in January.

### A Ridiculous Roast of Osteopathy

One of our doctors has called our attention to what Dr. John K. Mitchell has to say about Osteopathy in his work on "Mechanotherapy and Physical Education. Including Massage and Exercise," which is Vol. VII. of Solis-Cohen's System of Physiologic Therapeutics. It is not only a ridiculous tirade and shows malice against Osteopathy to the point of jealous spleen, but is full of misrepresentations. It is a pity that a book which contains so much really valuable information should go out of its way to pass upon the merits of something its author knows nothing about.

It is certain, too, that the publishers will not increase the popularity of this set of books in our profession by admitting such rot to its pages. Mr. Blakiston's head proofreader should have used some of the discretion which a partisan physician like John K. Mitchell, M. D., filled with the honor and glory of his own school and

himself, would scarcely be expected to show, and blue-penciled these two pages of comment. Or, if very anxious to add a short chapter on the subject, the publishers might have found an M. D., D. O. of recognized ability and even judgment who would have made a statement fair to truth and just to both contending systems of practice. However, such was not done, and it is well for every Osteopath to read what the benighted medical prophet of Philadelphia has to say about us. On pages 79 and 80 Dr. Mitchell says:

*"Osteopathy"*

Since the admirers of the very latest curative system that has gained vogue proclaim loudly that it is not massage, there is an evident necessity for one writing on massage to say something about that method which rejoices in the sufficiently barbarous name of Osteopathy. Its prophets announce that it is destined altogether to supersede ordinary medical practice. Ordinary medical practice, according to the prophets of the new dispensation, consists only in the administration of drugs; and with these Osteopathic practice asserts that it does not concern itself. In short, we have to deal with a new "pathy," that is to say, with an exclusive system founded on one idea; an idea, to be sure, rather more rational than that now-abandoned theory on which another exclusive system was built—namely, the origin of all chronic diseases in the itch. This "Osteopathic" idea is—or was—that nearly all diseases are the result of displacement of bones, which, thus displaced, press upon various nerves and organs, and so give rise to manifold and varied symptoms. The "Osteopath" treats the resulting conditions, theoretically, by replacing the bones; practically, by a rather rude massage. It hurts his feelings to call the preceding massage, and it is indeed rather hard—on massage; but that is what it is—a fact which is not altered by the claim of

its having been invented in Missouri. The books of the school are numerous, and generally hyperbolic or ill-written; the work of its founder being particularly vague, windy and pompous. In their manuals of practice may be found directions for the treatment of smallpox, scarlet fever, apoplexy, whooping cough and headache, by manipulation of certain regions in which they

trouble is "displacement of a rib!" This causes heart disease, dyspepsia, constipation and other difficulties.

Except for its wide spread, the matter is hardly worth wasting time on. The "new school," as it likes to call itself, knows nothing that is not already a part of legitimate medical literature, barring its absurd invention of "lesions." It magnifies and verbosely misapplies its little knowledge—and much unfounded assumption—concerning the vasomotor or sympathetic nervous system. The "Osteopaths" put aside as useless lumber all physiology, all pathology, all etiology, all physical diagnosis except what they pretend to learn by touch—a wide enough claim, since they assert that they can touch a number of unreachable organs. Bacteriology, chemistry, and the normal and abnormal functions of the organs of digestion and assimilation are impartially ignored by them.

The fact is that if all educated physicians really knew and appreciated the proper place and value of massage and other forms of mechanical therapeutics, and made right use of the knowledge, the Osteopaths would never have had a chance; for, let them say what they will, if study of their books makes any one thing certain about the system, it is that they have found out and exploited the usefulness of massage and manipulations. The force of the accusation against them lies in their claiming impossible things and doing harmful ones.

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**48 PAGES CIRCULATION 15,000**  
**"The Mouthpiece of the Old Doctor."**  
**Edited by DR. GEORGE M. LAUGHLIN**  
**Advertising Rates:** One inch, single column, per year, \$18; per month, \$1.50. One inch, double column, per year, \$35.00; per month, \$3.00.

find "lesions." Everything is due to a "lesion," and a lesion apparently means only a bone out of place. Some of the "lesions" which they commonly find are interesting. For instance, "Dr." Hazzard's book on the subject describes dislocation of a vertebra as a very frequent cause of disease and one easily remedied by proper manipulations; the atlas vertebra is particularly subject to "lesion," but is fortunately readily restored. Another fruitful source of

*A Newspaper View of Us*

[From the Chicago Record-Herald.]

"Are you the doctor that makes new bones grow?" asked a man who had waited for a long time in the outside office of a leading physician. "I am an Osteopathist," said the doctor, "if that is what you mean."  
 "A which?"

**THE MICHIGAN SANITARIUM OF OSTEOPATHY**

**ADRIAN, MICHIGAN**



WM. H. JONES, Ph. D., D. O. (A. S. O.), Proprietor and Physician in Charge.

MRS. WM. H. JONES, D. O. (A. C. O. M. S.), in charge of Ladies' Dept. and Nurses.

D. B. STREET, M. D., Surgery.

**THE PLACE** to send your patients who need a change of climate. We want your Hay Fever and Asthmatic patients. Send to us your difficult chronic cases which you think would recuperate faster if they were in a cool, up-to-date sanitarium. Our place satisfies the most fastidious. All the rooms are light, airy and outside rooms. They are expensively furnished and the table is pronounced by all A1. (Running water in every room, including fine baths.) We have all the modern apparatus for aids to diagnosis that are used in the leading colleges and infirmaries of Osteopathy, including Microscopes, Chemical Laboratory, the X-Ray, etc., but if you expect us to use vibrators and plasters and braces and many of the so-called adjuncts you had better send your patients elsewhere. We claim to be simon-pure Osteopaths. We number our patients from nearly one-half of the states of the Union, and we have yet to hear of one practitioner who has sent us patients who was not perfectly satisfied with the consultation courtesies extended and the treatments given to their patients.

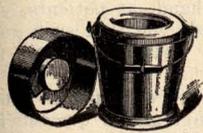
**Treatments \$2.00 Each.**  
**Board and Room \$4.00 to \$8.00 Per Week.**

Arrangements made for patients who prefer to live outside of sanitarium and thus reduce the expense.

Write for further particulars to Dr. W. H. Jones.

**The Michigan Sanitarium of Osteopathy, Adrian, Michigan**

# Hygienic Water-Seal Commode



**IN SUBURBAN HOMES** where modern bath-room facilities are denied from lack of sewerage the **Hygienic Water-Seal Commode** is an absolutely necessary for comfort and sanitation. Needed in all Hospitals, Sanitariums and Hotels.

**In Sickness** especially in **Contagious Diseases**, the Commode is indispensable in every home, as the **WATER-SEAL** prevents the escape of all germs and odors. It is light and portable—weighs  $5\frac{1}{4}$  lbs: made of best galvanized iron: will last a life-time. Provided with Disinfectant Cup. Invoiced by leading physicians and nurses.

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**HYGIENIC WATER-SEAL COMMODOE CO., 356 Dearborn Street, Chicago, Ill.**

"I practice Osteopathy—the manipulating and mending of broken bones."

"Kerrect! I guess I've hed as many bones broken as the next man, an' if you can fix me up good as new I'll be much obleeged an' pay the bill hansum likewise."

"All right," said the doctor as he led the way into his private office. "Just sit down in that chair and relax."

"How?"

"Let your muscles loose. Don't try to keep together. Now go back to your early infancy and tell me every accident that ever happened to you and what results followed."

"Sho! Fust accident that took me was fallin' outer bed afore I was a year old."

"What was the result?"

"Why, it proved to the folks that I warn't a fool. 'Thout a youngster tumbles out o' bed or downstairs afore his first year is up he ain't considered bright. I did both—yes, by jiminy cricky, I did!"

"And your next accident?" suggested the doctor.

"There ain't no next. There was jest one continued chapter from that on. I broke four ribs tryin' to fly, an' dished my collarbone at the same time. When I cud ride the colt to water, he ran off an' gave me this Roman nose—ha! ha!—an' the fust time I driv' him to harness he kicked over the dasher, and that's when I lost my front teeth. I've hed both legs broke an' one arm in three places. This 'ere hole in my shoulder ain't from a bullet—it's where our old cow hooked me for half a day. This bone in my left wrist got mashed in a separator, an' four of my fingers was wrenched at the same time. My elbows—"

"Stop!" shouted the doctor, rising hurriedly and handing the broken-up man his hat. "You've mistaken the place. You want to go to the anatomical museum on the next street and have your skeleton articulated. Good day, sir."

✦ ✦ ✦

Such wit-based, as it is, on the popular assumption that Osteopathy's diagnosis depends upon broken bones, and its cures, upon mending together the scattered fragments—is in common evidence in the mind of the people. It is an eloquent argument why our profession should not only continue, but increase, its efforts to educate the people into a correct conception of what Osteopathy really is by circulating "Osteopathic Health" liberally. Some practitioners seem to think this sort of missionary work is not really needed—that the people already understand us. I wonder how such doctors square that belief with a newspaper story that limits Osteopathic etiology to broken bones! How do they feel when the public refers to them as "rubbers" and call their treatment massage?

We are still very generally misunderstood, fellow Osteopaths—thanks to the tireless energy of M. D.'s to disseminate light!—and about the only way we can get understood properly is to continue to educate the people and do our individual duty as physicians. Meanwhile the editor will continue to give his best efforts to producing a monthly magazine for the profession's use which will give the Osteopath's

own explanation of his system—not some traducer's or some other person's wholly ignorant of Osteopathy, and it is such a publication as no one can read or even inspect casually without having a greatly enhanced appreciation of our science and practice.

✦ ✦ ✦

Permit us to suggest to you, fellow Osteopaths, that you are failing to harness one source of helpful energy that could accomplish very much for you if you do not circulate "Osteopathic Health" liberally in your field.

## AMONG THE STATES

### Wisconsin State Board

The Wisconsin state board met in Milwaukee January 10th to 12th inst.

### New England Will Meet

Boston will hold a New England Osteopathic Convention January 26 and 27. All success to it.

### New Hampshire Organized

The New Hampshire Osteopaths organized December 29 and elected the following officers for the ensuing year: President, Dr. G. W. McPherson, Claremont; vice president, Dr. Cora L. Gooden, Nashua; treasurer, Dr. J. M. Gove, Concord; secretary, Dr. Willard D. Emeny, Manchester. We are to have monthly meetings for social intercourse and the discussion of timely subjects that will tend toward personal and professional advancement. The victory just won has set us going.—Fraternally, Willard D. Emeny, D. O., Sec'y.

### San Francisco Society Indorses Three-Year Course

The regular meeting of the Osteopathic Society of San Francisco was held at the California College of Osteopathy, 1368 Geary street, December 7, at 7:45 p. m., with a good attendance. The programme, besides regular routine of business, consisted of a lecture on "Diagnosis by Form" by S. F. Meacham, M. D., D. O., of Oakland, illustrated by clinics. Dr. Meacham is an original thinker and a forceful speaker, so that the lecture proved to be suggestive and interesting. These resolutions, proposed by Agnes G. Madden, D. O., member of State Board of Osteopathic Examiners, were adopted without dissenting voice, commending the report of the Educational Committee at St. Louis relative to the three-year course of study:

"Resolved, That the Osteopathic Society of San Francisco heartily indorse the report of the Educational Committee submitted to the American Osteopathic Association at St. Louis July 14, 1904, and regrets the postponement for another year, by said Association, of the recommendations of said committee relative to the enforcement of the three-year course of study.

"Resolved further, that the Osteopathic Society of San Francisco commend and endorse all the measures taken to bring about and enforce the three-year course in all Osteopathic colleges.

"Resolved, That the secretary of said society be, and hereby is, instructed to send a copy of these resolutions to the "Journal of the Amer-

ican Osteopathic Association," "The Journal of Osteopathy," and "The Osteopathic Physician."—Fraternally, Mary C. Stewart, D. O., Sec'y.

### New York Welcomes President McConnell

The Greater New York Osteopathic Society never does things by halves at any time, but when it has the inspiration of a visit from Dr. Carl P. McConnell it rises to the occasion. At its regular meeting on the 17th inst. a dinner was given at the St. Denis with covers laid for nearly 100 Osteopaths from Greater New York, New Jersey, Pennsylvania, Connecticut, Massachusetts and Ohio. The toasts were short and witty until Dr. McConnell's address was reached. He gave a most thoughtful and helpful paper on "The Limitations of the Osteopathist," taking care to call attention to the fact that it was not the limitations of Osteopathy he meant, for he held that it is applicable to all parts of the body mechanism. It was a delicate subject exquisitely handled. Before the dinner an informal reception was held for Dr. and Mrs. McConnell at which were the local representatives as well as Dr. and Mrs. Achorn and Dr. Crawford, Boston; Dr. Willcox, Waterbury, Conn.; Mrs. A. L. Conger, Akron, O.; Dr. Pressly, Philadelphia; Dr. Vastine, Harrisburg, Pa.; while every member from New Jersey was in attendance. The order of exercises was as follows: Charles C. Teall, toastmaster; R. M. Colburn, invocation; Charles Hazzard, "Some Things to Be Thankful For;" Ada A. Achorn, "The Emersonian Osteopathist;" Hardy W. Carlisle, "Does the 'Skeeter Cause Malaria or Malaria Cause the 'Skeeter?'" Helena Ferris Smith, "The Anatomical Wedding;" Carl P. McConnell, "The Limitations of the Osteopath."

### Rouse, ye Indiana Osteopaths!

The Indiana legislature convenes within a few days. Securing common justice to Osteopaths is the issue that confronts us. It behooves us to bestir ourselves if we would live. Success depends largely upon the individual efforts of every Indiana Osteopath, whether his duty be to join his state society, contribute funds, distribute literature or enlist patients and friends to use their influence in our behalf, or send a letter to, or have an interview with, the legislator of his district, he should cheerfully bear his part.

Don't be a drone or a sponge. Now is the time to get busy and keep busy till we succeed in getting a "square deal."

The time is ripe to rid ourselves of wolves that have been provided to protect sheep, hawks to protect chickens. What think you? Are you willing for the administrators of poisons to continue filching from us our titles, besmirching our cause and trampling upon our rights as citizens of a common interest, working for the common good of humanity? Methinks I hear all acclaim: "Never! Thrice never!" If that be the slogan, get busy and exert all the influence you can possibly muster in defense of our inalienable rights of life, liberty and the pursuit of our calling without molestation.

It is only by concerted action and combined effort that we successfully meet the enemy; hence it behooves every Indiana Osteopath to become actively identified with his state and national societies and to take a hand in upholding the rights and merits of the safest and best system of healing ever given to the world.

The crisis is at hand—the die is cast. Will you help us, doctor, or will you suffer us to succeed without your assistance? Let's be there with our cultivated touch and a big glove. This appeal is made to every Osteopath in the state, and we expect you to get busy now. Do your utmost for the success of our cause in your community. We expect to win, and you will be sorry it you failed to contribute or have a part in the gallant fight we shall make. What say you? Inform us how your legislators stand. Fraternal yours,

J. F. SPAUNHURST,  
Chairman Legislative Committee.

## Publisher's Corner.

### Unconscious Assimilation in Publicity

WHENEVER a lawyer or preacher or lecturer is caught delivering some other fellow's speech the popular apology for the theft nowadays is to wipe responsibility away by saying it was a case of "unconscious assimilation." That is to say, the first man's speech was so skillfully thought out and seductively phrased that it stole in upon the senses of the plagiarist without his becoming aware until, at length, it burned itself into his mind as an inspiration of his own brain and was then uttered as a new creation!

Psychologists recognize this as an easy process and many a public man—caught with whole paragraphs, even pages, of other men's thoughts and words in their own discourses—have been acquitted by expert students of mental phenomena as unconsciously victims of this law of assimilating without any sense of doing so. The mind, in fact, can be trained to gulp down knowledge omnivorously by this process; and most very learned men possess the faculty of "unconscious assimilation" in great degree. We all have it somewhat.

The operation of this law really has as great effect upon business as upon intellectual life. Take the great bulk of the money spent every year in legitimate advertising—how does that take effect? By directly causing the public to go and buy the goods advertised—do you suppose? By no means. It works largely by the "indirect method"—which shows itself in the minds of the public as "unconscious assimilation" just as truly that as when a man steals a sonnet by the same process.

Take Pear's soap for illustration. Pear's soap is in your mind and mine as a substantial fact—so substantial indeed that we use the term almost as if we thought we were creating a new phrase when we utter it. "Good morning—have you used Pear's soap?" we are apt to say to any acquaintance when we feel half-way facetious. It has cost millions of dollars of advertising to educate us to take that friendly liberty with this old trade-mark.

"Three years ago I used Kirk's soap and I have not used any other since" is another bright saying with many of us, which cost the proprietors of another soap just as much in gold as the foregoing line—but likewise it has given them several pots of gold for each one they spent while burning it into public consciousness. And what is the result of such education?

If you went to a druggist's to get toilet soap, for instance, and had the price, and wanted the best you could buy—what would you ask for?

"Pear's soap, please."

Of course. You have been educated to think it the best of the toilet soaps by systematic advertising. You have read Pear's soap's ads. hundreds of times; and if you have tried not to read them, you have seen them just the same—couldn't help seeing them—until, at last, you knew your lesson well. So do we all.

"Unconscious assimilation!" Simply that and nothing more. It is one of the greatest of the basic principles in advertising. It is the glue in the ad. that sticks—the feature of promotion that pulls.

If you should say that you would probably not ask for Pear's soap at all, but for Ivory because "it floats," or because you happen to know it to be as good for the toilet as for laundry purposes, then I submit that you exhibit the same mental phenomena stamped with another trade-mark. The Ivory soap people, then, have conducted the best campaign of advertising, so far as you are concerned. Your mental retina sees "Ivory," whereas another sees "Pears'"; but both got famous by the same route—advertising—and both are a part of your vocabulary of life without your stopping to realize probably the how or why of it.

Should you want a camera would you not

be sure to ask for a "kodak" without meaning that you wanted the camera of the Eastman make? None but the Eastman's make kodaks, yet they have advertised the term so well that most everybody now uses it synonymously with the field of snap-shot photography.

This was all done pretty much, too, by "unconscious assimilation." That is to say, repetition, repetition, repetition, cleverly done, which has caused mankind to accept the advertiser's idea as its very own.

Now this principle has important bearing upon the work which the Osteopathic profession is doing to educate the public up to the benefits of its system of natural, drugless healing. The biggest part of our gains must be expected to come from the workings of "unconscious assimilation" on the part of the public mind and there is absolutely no doubt that we do experience that sort of benefit in very gratifying measure.

To make this point plain I will go back to Pears' soap. If Mr. Pears, for instance, sat down to figure out how many cakes of soap he sold every time "The Daily Screamer" or "Monthly Mascot" printed his ad. at so much per inch it is entirely likely he could scarcely find a record on the spur of the moment where one person read the ad., laid down the sheet and went out and bought a cake of Pears' soap. He doesn't expect that sort of thing to any great extent. It happens sometimes, to be sure, but that is trifling in importance to the masses who use "unconscious cerebration" yet buy Pears' soap over and over all through the year—even as you and I throughout most of our lives.

So with the Osteopathic physician who puts out a high-grade popular magazine like "Osteopathic Health" every month which tells the story of health without knife or drugs. Some people, to be sure, go at once to the Osteopath for the new treatment; but many more do not respond immediately; yet they go ultimately. It may be weeks or months after this sort of conversion is begun, or completed, in the minds of the new recruits that he falls ill, or concludes to try the new treatment, or send some friend to the Osteopath whom drugs haven't helped and who needs assistance. But he has become an exponent of "unconscious assimilation," just the same. He has adopted your idea. He is your convert. He may not know why. He cannot tell what did it. Yet he acts automatically—as you wish him to act—when the time comes. You get the benefit of his influence and patronage—that's all; and it's a ten-to-one shot you do not give this all-important literature which the man has read—or heard about from some one else who has read it—the credit it deserves in building up your reputation and practice. "OSTEOPATHIC HEALTH" by its very name has had its influence in making the community put the estimate upon you and your practice which you covet.

I have a letter from a doctor who stated three things, seemingly as plain and sure to him as daylight, yet anyone who has been a student of this principle of "unconscious cerebration" and the fruition it gives in advertising will understand how very certain it is this good doctor is entirely mistaken as to his conclusions. He says:

(1) He has used "O. H." as literature for two years, circulating 100 copies a month in the homes of his community regularly.

(2) That he has not, so far as his knowledge goes, received a single patient from this campaign during all that time.

(3) In the same breath he adds that his practice has grown very gratifyingly indeed all this time until now he has about all the patients he can well attend to!

The unfairness of believing that these 2,400 pieces of popular health literature, carefully written, skillfully edited and judiciously bestowed, which he has circulated in the homes

of 100 or more leading families of his town, have had no important influence in causing scores of thinking people to turn from pills and powders to rational Osteopathic methods of cure is readily manifest to anyone who will consider the situation candidly.

Must a patient come to you, doctor, bearing a copy of "O. H." in his hand—as patients, you know, do often—to persuade you that such good literature as this surely "pulls practice" for you?

Does Mr. Pears wait for his customer to come, bearing an ad. in one hand and a quarter for soap in the other, before he realizes that by advertising he is making money?

Or, does he know, when the community takes to his commodity and holds it in the favor it justly deserves, that good intelligent publicity is entitled to a very large share of the credit for the good patronage enjoyed?

Why is it true, too, that in soaps and other such toilet articles, in cameras, guns, bicycles, automobiles and a hundred and one other things, the houses that succeed happen to be the ones, and only the ones, that have spent fortunes (and continue to spend fortunes) to get and hold the keys to this phenomenon of cerebration which we term "unconscious assimilation?" It is because tradesmen who, unlike doctors, are not all psychologists by any means, yet understand that, to put the idea into the mind of a prospective customer that their goods are just what he needs, will infallibly result in him buying these goods some day. They pay to educate him in the ways of "unconscious assimilation" and ultimately he returns their outlay and a profit besides for their trouble.

Now every Osteopath in the United States owes it to himself and to his science and profession, which has its traducers and plotting enemies, to utilize to the fullest degree possible this helpful psychological tendency, and it more-over means money in pocket and enhanced reputation to each one severally who does. And those who have followed out this campaign at our suggestion, and who believe, after an epoch of successful growth in prestige and practice, that they yet have not got their money's worth, are just as reasonable as Mr. Pears would be if he said:

"Tut—advertising never helped me—it was the acknowledged merit of my soap that sold it—every cake sold was good to sell another."

There is some show of justice in this view, to be sure, since good goods—good service, surely brings more patronage; but that does not diminish the share of credit that is due good publicity and promotion for making a market.

Now, Dr. Osteopath, if you have waxed prosperous while using our good field literature, be fair enough to give "O. H." the share of credit it deserves. It never pretended to be able to work up a successful career for any practitioner without personality and ability in the treatment room to back up the publicity we give him; but it does claim to give very valuable and definite aid to that personality in establishing and holding a successful practice; and it has proven its right to this claim in hundreds and hundreds of cases in the past four years. Scores of those who have shared these benefits go on record voluntarily in these columns every year. You have doubtless read columns of these testimonials.

You are losing golden opportunities, Dr. Osteopath, if you do not compel "unconscious assimilation" to burn your name and practice into at least 100 brains in your field each month throughout the year.

It pays.

DR. HENRY STANHOPE BUNTING.

### Publisher's Notes

December can be had at two cents per copy now—"it's a back number," but still a very good one. How many do you want?

January issue of "Osteopathic Health" exceeded all its predecessors in circulation. That

speaks volumes for its excellence. Not too late to secure a supply. How many do you want?

It is not spasmodic, hip-hip-who-rah advertising that gets the best results, but the steady campaign of education that is kept working every month in the year.

The O. P. Co. has demonstrated to its entire satisfaction that Osteopaths, in common with all business people, appreciate good, straightforward business principles. Results: January issue of "O. H." has the largest circulation of any to date and we have more subscribers on our paid "O. P." subscription list to-day than ever before; but both papers are going to do even better in the future.

About one dozen essays have been received already for the "O. H." 1905 contest, and if you are interested in this competition you should be moving.

Money and books both will be distributed this year at Denver to the winners of "Osteopathic Health's" prize essay contest. Those who wish to compete should be getting their papers in hand.

### Your February "O. H."

Your February issue of "Osteopathic Health" has been prepared with a view, doctor, to what you need just in the middle and fag-end of the wintry season.

"Right and Wrong Treatment of Pneumonia," by the editor, is a clear presentation of the case, which every business and professional man in your community would be glad to read if he had the chance, for they are all afraid of pneumonia. The good wife of the household will be just as much interested in it, too, for she will be glad to have her mind made up what to do when her husband or children show the least signs of lung fever.

"Why You May Feel Worse After Treatment" shorter, but a well pointed article, which carries just the moral that it should—that Osteopathy is the thing to cure "the grip" and prevent sequelae. Also by the editor.

"That Cold in the Head" is a fine contribution from the pen of Dr. Louise Burns. It is one of the competing essays for those 1905 prizes to be awarded at Denver. It is simple, logical and good. Osteopathy shines through this article also.

"Why You May Be Worse After Treatment" is a very timely explanation written by the editor. It is in response to a request from the field. It tells why patients are not to be discouraged if treatment is giving them a general shaking up with exacerbation of symptoms, because that is the best sign of impending improvement and recovery. It tells why.

"Why We Seek Legislation" is a simple statement of the reason why Osteopaths wish to pass laws to regulate their practice. It is very timely while so many legislative fights are on.

"Philosophy of Osteopathy Boiled Down" is a brief digest of the theory of Osteopathy from the pen of the editor, which is meant to be so simple that everyone can understand it.

"Physicians Cannot Give Health" is a good short story by Dr. J. Homer Dickson, which explains some misapprehensions and drives a moral home for Osteopathy as a system of healing.

Other things as well.

"A very good number," you will say, we trust.

We think so, too. We have labored to make it so and believe we have succeeded. It will surely be good seed corn wherever it is sown. What is your order?

### None Can Afford to Miss It

January is certainly is a fine issue—one of our best. The leading features are two articles from the pen of "Ye Editor," both being repetitions, having appeared in prior issues of OSTEOPATHIC HEALTH. Since the first appearance

# The American School OF Osteopathy

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DR. A. T. STILL

Founder of the Science . . . . President

The largest and foremost Osteopathic College in the world. Ten years of successful school work. Number of students exceeds seven hundred. This institution teaches genuine Osteopathy—no adjuncts.

Teaching facilities unexcelled. Thoroughly equipped laboratories in all departments. Clinical advantages unlimited. Faculty composed of fifteen able and experienced instructors who devote their full time to teaching. Anatomy taught in every term—three professors in charge of this department. Special attention given to dissection and to the study of anatomy in general.

Course of study covers a period of two years, divided into four terms of five months each. Classes formed in September and February. Next term opens September 5, 1904.

Write for catalogue, "Journal of Osteopathy," or any information. Address

## American School of Osteopathy

KIRKSVILLE - MISSOURI

we have had so many requests from the field for a reprint of both articles that we couldn't do otherwise than comply. The leading article was entirely revised and rewritten, and therefore is even better than it was originally. One, "What Dr. Still Has Done to Lessen the Pains of Women," appeared in OSTEOPATHIC HEALTH 18 months ago, and at that time was said to be one of the best popular articles ever written on the subject. The other is a short two and a half page article explaining in terse language just what a lot of people of your community, especially women folks, want to know—just how Osteopathic treatments are given. The editor handles the subject admirably, and you would do well to distribute this article quite generously, as there are lots and lots of people who would take Osteopathic treatments if they knew just HOW they were given. The balance of the edition is rounded out with some good strong arguments for Osteopathy, which makes it all in all one of our best issues.

### Prize Essay Interest

Interest is now accentuating daily in the prize essay competition for 1905, and it is certain that twice as many competitors will be in the list as ever before. This does not mean that you should not try, doctor, for it will be all the greater honor if you win it. Fifty dollars in gold to be handed somebody at Denver will be a prize worth coveting and working for, and the labor that will be required for somebody to win it is not to be compared with that required to give the average patient two months of treatment. It will be fun to enter this race, and remember there is \$25 for the second place, and a fine list of books and charts for others. Send in your effort.

### To Secretaries and Reporters

State secretaries and others sending news items to "The O. P." are requested not to abbreviate the names of state associations, such as "W. S. O. A." for the "Wisconsin State Osteopathic association." The style of this paper is not to print the initials for the name of the association—at least the first time it occurs in a report, anyway—and it is difficult to interline it in the average copy sent in because of scant room. This is a trifle, but we will thank our correspondents to heed it as far as possible.

### Come Forward, Sisters!

We want our women Osteopaths to take a hand in the prize essay contest this year. We have a lot of clever writers among them and there is no reason why one or two or three of them should not figure this year among the prize winners if they wish to. Women usually win at whatever they set their minds upon. Know ye, sister Osteopaths, that "Osteopathic Health" expects to hear from you with essays between now and summer. Come forward.

### Fraternities Attention

"The O. P." will be pleased to print a brief sketch of each of the Osteopathic fraternities and sororities if the officers will furnish copy for the same briefly written. A good photograph or two will also be acceptable.

### The Cost of "Osteopathic Health" On the Various Plans

We offer a choice of several plans for circulating "Osteopathic Health," endeavoring to give regular users as much saving in price as we are able to secure on our part from printers by having a large volume of work contracted for at lower rates. It saves us on the cost of our service to know months ahead how big editions we can contract for, and we simply give our patrons the advantage of this economy. Those who use a hundred a month on the yearly plan get their service 50 cents cheaper per month than those who order on the monthly plan. Those who operate on the six-months' contract save 25 cents a month.

We are pleased to serve patrons on any plan that suits them best, but recommend the annual contract plan for 100 copies a month—not so much because it enjoys the cheapest possible rate, as because systematic advertising, everlasting hammering at the desired end, is what gets the most glorious results. But, remember, single orders are always welcome and receive prompt attention. Here are the prices for our service on the various bases, carefully figured out, so that you can tell at a glance just what you want to know—namely, the total cost for your order on each plan submitted:

**Prices on the Yearly Contract Basis**

One hundred copies a month, with the professional card feature included, will cost as follows:

**First Month:**

Fixed Monthly Cost.....	
100 copies magazine, blank.....	\$3.00
Printing card .....	.25
Extra charge first month only.	
Composition six-line card.....	
Electrotyping six-line card.....	1.00
	<hr/>
	\$4.25

**All Subsequent Months:**

The cost is \$3.25, including the professional card and good envelopes for mailing, plus expressage, which is always an added cost to the contract price of magazines. Expressage varies with distance and railroad facilities, but to most points east of the Rocky mountains it is 35 cents per hundred magazines, with envelopes.

**On the Six Month's Contract Plan**

**First Month:**

Fixed monthly cost.....	
100 copies magazine, blank.....	\$3.25
Printing card .....	.25
Extra charge first month only.	
Composition six-line card.....	
Electrotyping six-line card.....	1.00
	<hr/>
	\$4.50

**All Subsequent Months:**

The cost is \$3.50, including the professional card and envelopes. Expressage is always an added cost to the contract price of magazines. See explanation under annual contract plan.

**On the Single Order Plan**

Fixed cost, if professional card is wanted:	
100 copies magazine, blank.....	\$3.50
Printing card .....	.25
Extra charge, at time of first order, if professional card is wanted:	
Composition six-line card.....	
Electrotyping six-line card.....	1.00
	<hr/>
	\$4.75

**All Subsequent Single Orders:**

The cost is \$3.75 per 100 copies with professional card; \$3.50 without card.

**WANT ADS.**

A SNAP FOR A STRONG OSTEOPATH WHO wants to work himself to death in a cash practice. Will sell for a trifle more than the office and household furnishings are worth. This is the third time my health has failed me in two years, so must give up. Decide quickly, as I am refusing new work every day and can't hold out. Address "Snap," care of "O. P."

A GOOD PRACTICE WILL BE GIVEN AWAY to a good Osteopath in a town of 4,000 inhabitants in northeastern Kasas. State qualifications, etc., addressing "W," care of "The Osteopathic Physician."

FOR SALE.—A GOOD OSTEOPATHIC PRACTICE, of four years' development, in one of the best towns in Nebraska. A great bargain. Address "R. N.," care of "The O. P."

FOR SALE.—A GROWING PRACTICE AND good office in Ohio town of 25,000 inhabitants. If looking for a good location, investigate. Address Herrick, care "O. P."

WANTED.—OSTEOPATHIC PRACTICE IN A California city of 5,000 to 50,000. Address —, care of "O. P."

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352 Pages, 166 Illustrations, Best Book Paper, bound in Silk Cloth

"I would have given a hundred dollars to have had that book fall into my hands on the day that I first entered on the study of Osteopathy."—H. S. BUNTING, D. O.

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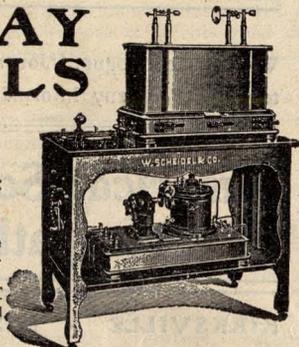
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**Removals**

Dr. Homer Woodruff, from El Paso, Texas, to 210 Avenida Juarez, Mexico City, Mexico.

Dr. Dale H. Craig, from Kansas City, Mo., to Harrisonville, Mo.

Dr. Henry Snedeker, from Neosho, Mo., to Cincinnati, Ia.

Dr. P. W. Polly, from Hatfield, Mo., to Emmett, Idaho.

Dr. F. H. Warren, from Stamford, Conn., to No. 277 Belleville avenue, Newark, N. J.

Dr. Geneva Green, from Washington, Mo., to No. 1317 Admiral boulevard, Kansas City, Mo.

Dr. Clara B. Wilcox, from Everett, Mass., to Ozark, Mo.

Dr. George Parks, from West Plains, Mo., to No. 1502 Locust street, Des Moines, Ia.

Dr. R. L. Starkweather, from Shelbyville, Ind., to Cason-Neal building, Lebanon, Ind.

Dr. L. M. Beaven, from Salt Lake City, Utah, to Vincennes, Ind.

Dr. W. C. Beaven, from Fulton, Mo., to Vincennes, Ind.

Drs. E. A. and Myrtle E. Carlson, from Sedalia, Mo., to No. 419 East Main street, Madison, Ind.

Dr. Lytton G. Ament, from Washington, D. C., to No. 70 Bradford building, Charlestown, W. Va.

Dr. Retta Collicott, from Jackson, Mo., to Fredericktown, Mo.

Dr. E. O. Vance, from Richmond, Ky., to 608 East Main street, Lexington, Ky.

Dr. Fannie B. Laybourn, from Denver, Col., to Southern and Loan building, Knoxville, Tenn.

Dr. Earl Laughlin, from Fayette, Mo., to Marysville, Kan.

Dr. D. S. Harris, from Linz building to more commodious quarters in the Wilson building, Dallas, Texas.

Dr. C. W. Farwell, from Paxton block to 612 New York Life building, Omaha, Neb.

Dr. F. G. Whittemore, of Buffalo, has opened a branch office at Hamburg, N. Y.

Dr. Ida De L. Webb, from Ridgway, to 4601 Wayne avenue, Germantown, Pa.

Dr. V. P. Urbain, from Hamilton, Ohio, to 11 and 12 Elks building, Tampa, Fla.

Dr. D. E. Hatter, from 20 and 21 Rialto building, to 218-19 State National building, Texarkana, Ark.

Dr. J. S. White, from 340 East Colorado street to 313 Slavin block, Pasadena, Cal.

Drs. Best & Gault, from Monrovia, Cal., to 503 Mason building, Los Angeles, Cal.

Dr. E. M. Spales, from 502 to 405 Trude building, Chicago.

Dr. Earl McCracken, from Hillsboro, Texas, to 301 First National Bank building, Shreveport, La.

Dr. E. D. Warren, of Minneapolis, Minn., has removed to Kansas City to assist Dr. R. H. Williams, 617 New Ridge building.

Dr. F. E. Gamble sold his practice at Bloomfield, Neb., to Dr. M. S. Elliott, of Rapid City, S. D., and returns to his home, Wayne, Neb., to resume practice.

**Dissolution of Partnership**

The partnership of Drs. Elmer Martin and F. N. Grimsley, Decatur, Ill., has been dissolved. Dr. Martin continues practice at 405 Powers building.

Drs. Shearer & Baldwin, Abilene, Kan., have dissolved by mutual agreement, Dr. Shearer remaining at Abilene and Dr. Baldwin seeking another field.

**Personal**

Dr. Willard D. Emery is in the November number of The Optical Journal with "Some Mechanical Causes of Eye Trouble."

**Married**

Dr. Hiram H. Straight, Minneapolis, Minn., to Mrs. Lydia May Howe, at Milwaukee, Wis., November 25.

Dr. E. H. Laughlin, Marysville, Kan., to Miss Jennie Gardner, at Kirksville, December 28.

Dr. Asa D. Cain, Jackson, Mich., to Miss Eva Belle Buchanan, December 21.

Dr. Frank M. Geeslin, Jackson, Mo., to Dr. Florence L. Magers, Fredericktown, Mo., in December.

Mr. Fred Eberle, Seattle, Wash., to Dr. Cassandra Hubbard, at Independence, Kan., October 4.

Dr. Wilfred A. Streeter, to Dr. Jessie O. Fulton, at Worcester, Mass.

Dr. James W. Gorin, Atlanta, Ga., to Miss Lucy Wilson, at Franklin, Ky., November 28.

**Born**

To Dr. and Mrs. F. C. Heyer, Toledo, Ohio, a daughter, December 9. The delivery was by Cesarean section, being regarded as entirely successful, and both are now believed to be out of danger.

To Dr. and Mrs. R. A. Glezen, of Kalamazoo, Mich., a son, November 20.

To Dr. and Mrs. C. L. Sheppard, Mt. Pleasant, Pa., a daughter, November 20.

To Dr. and Mrs. Benjamin Smyth, Yankton, S. D., a son, December 12.