PHILADELPHIA COLLEGE AND INIRMARY OF OSTEOPATHY, Incorporated
Write for Information
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Definition of Osteopathy

OSTÉ-ÓP'-A-THY, s. [Gr. *osteon* (osteon)=a bone, and *pathos* (pathos)=suffering.

Legal: "A system, method or science of healing." (See statutes of the States of Missouri, Vermont, North and South Dakota, Michigan, Iowa, Illinois, Tennessee, California, Texas, Wisconsin, Indiana, Montana, Kansas, Nebraska, Connecticut.)

Historical: Osteopathy was discovered by Dr. A. T. Still, of Baldwin, Kan., 1874. Dr. Still reasoned that "a natural flow of blood is health; and disease is the effect of local or general disturbance of blood—that to excite the nerves causes muscles to contract and compress venous flow of blood to the heart; and the bones could be used as levers to relieve pressure on nerves, veins and arteries." (A. T. Still.)

Technical: Osteopathy is that science which consists of such exact, exhaustive and verifiable knowledge of the structure and functions of the human mechanism, anatomical, physiological and psychological, including the chemistry and physics of its known elements, as has made discoverable certain organic laws and remedial resources, within the body itself, by which nature, under the scientific treatment peculiar to osteopathic practice, apart from all ordinary methods of extraneous, artificial or medicinal stimulation, and in harmonious accord with its own mechanical principles, molecular activities and metabolic processes, may recover from displacements, disorganizations, derangements and consequent disease, and regain its normal equilibrium of form and function in health and strength. (Mason W. Pressly, D. O.)

OS{T}É-Ó-PATH, s. The same as OSTEOPATHIST (q. v.)

OS{T}É-Ó-PATH'-IC, a. Of or belonging to osteopathy; as, osteopathic treatment.

OS{T}É-Ó-PATH'-IC-ÁL-LY, adv. In an osteopathic manner; according to the rules and principles of osteopathy.

OS{T}É-Ó-PATHIST, s. One who believes or practices in osteopathy; osteopath.

DIP-LÔ-MATE in Osteopathy. The technical and official designation of a graduate and practitioner in osteopathy, the formal title of such graduate or practitioner being D. O.—Diplomate or Doctor in Osteopathy.
This issue of the JOURNAL is a hodge-podge of science, sarcasm, criticism, self-consciousness and appreciation. Our general readers may not understand these specialties, as much of this talk is for the Osteopathic family circle. We have un­sheathed herein a small stiletto and have pushed its sharp point gently under the fifth rib on the right side of the Osteopathic thorax. The thrust is not to kill, but to cure. We have tried to hide the blade with bouquets. If our friends will take it for what it is worth and be forgiving, we will thank them, and, especially, if the sick would like to have a kindly talk, they will find that we will not be as cold and critical as these pages seem; but will be as solicitous and sympathetic as their case may require. Next month we are going to be more pleasant. Au revoir.

We are throwing bouquets at other people and some outsiders in this issue; but we hope that we may be taken sincerely. We are feeling especially good. The Philadelphia College is flourishing. We have the best faculty, the largest classes, the brightest prospects, and we would just like to have a fencing match in dialectics with any or all of the other schools in the country. We don’t play ball or run a brass band in connection with our Osteopathy, but we can dissect a cadaver, give a treatment, or discuss a fine point, with any body; and if we are too lazy to do any of these things, we have students and graduates who can do it for us. Don’t be offended, competitors; it’s just fun; but if you take it seriously, here’s your challenge! Anything but a duel!

The Philadelphia College was the first institution in the country to extend its course, and we expect to stand in the forefront of the advance movement for higher culture for the profession. There is no other college that has such formidable competitors in medical education, and we have met every challenge from them, and our graduates are able to cope at once with medical graduates, and we have been in existence long enough to realize the needs and possibilities of the situation, and also to realize that our graduates are among the best in the field.
We cannot help raising the cry for Osteopathy pure and unmixt. It is a needed caution. Many Osteopthic practitioners are flirting with heterodox accessories, such as electricity and mechanical appliances. The strong tendency of the M. D., D. O. 's is to compromise at times. It's hard to regenerate an M. D. and christen him a “Simon Pure” Osteopath. Most of the unosteopathic helps are used by them. From all such—pills, powders, pulleys, potencies and paraphernalia—we say, “Good Lord, deliver us.” We saw a D. O. the other day peddling an electrical “oscillator,” and it was a fine shaker—good to make “milk punches,” if you could get the punch adjusted to the milk, but we had no use for it in our offices.

We were rather amused the other day with a question asked us by an intelligent woman from Virginia, who was sufficiently interested in Osteopathy to come to acquaint herself with our College, tho' she had never seen “but one Osteopath.” Her question was “Do you teach regular Osteopathy? I have heard that you had departed from true Osteopathy; and is your College going to continue its existence?” Having only seen “one Osteopath,” and having learned indirectly that he was located in Roanoke, Va., I’ve guessed the measure and the motive of her information. This woman suspected that we might not even understand Osteopathy. Having been a close student of Dr. Still, having seen the development of the teaching part of the science, having been one of the editors of the first Journal of Osteopathy, having written the first definition of Osteopathy, having written the first formal exposition of Osteopathy in the first catalogue of the first school of Osteopathy, having been a professor in that school, having written the Constitution of the American Osteopathic Association, and the Constitution of the Pennsylvania State Constitution, besides having been acquainted with the workers and teachers of Osteopathy during the whole course of its public prominence, since before it had won a single State or legislature, having written Osteopathic editorials for six years, we thought we ought not to have to defend our estimate of the science or the ability of our College to teach it.

We would like to hear the Roanoke, Va., man talk for ten minutes—on any subject!

We welcome “The American College of Osteopathic Medicine and Surgery,” to the sisterhood of colleges. It has always had the merit of a first-class college, for the Littlejohns are among the ablest men in the profession, and President Littlejohn has won distinguished laurels as a scholar and teacher. His Journal is par excellence. We extend our hand to his college with the hearty congratulations of our Faculty. We hope none of our readers will mistake the word “Medicine” in their title, for the institution is strictly Osteopathic, though we think the term misleading. We hope to welcome the President to our lecture rooms some day. Success to you, gentlemen.

We have always had a kindly feeling for the Atlantic School at Wilkesbarre, and have been interested in its progress, and this has been accentuated by pleasant intercourse recently with some of its graduates. We had the offer of the presidency of the school at the beginning of its career, and have not forgotten the consideration which Drs. Mathews and Hook showed us. We have not met Dr. Hewish, but hear much of his abilities. We wish the Atlantic School success, for we believe it will sustain a good standard of qualification in this State; and we are more than ever desirous of winning the State for Osteopathy; and only work of the first class deserves to win. Let us get closer together, brethren, in this educational work.
One of the greatest needs of Osteopathy is the mutual acquaintance of its disciples. This can best be attained by association. The National Association should be supported. Every living Osteopath should be a member of it, and should read its official journal. Dr. Evans has done well in its editorship; but he could do better with more capital and more contributions. It takes money to publish it. Subscriptions will bring the money. An able article on some live subject will help its columns. The editor of this JOURNAL pleads derelict in all these things, but he hopes to do better in the future. The official bulletin of the Association is bright, breezy and buoyant. Dr. Bunting drives a sharp stylus, and we like the Osteopathic Physician very much. We expect to look to it now for news.

State Associations should be supported. It will do the cause good; it will help all other practitioners; but the chief good will come to the one who is ready for service. We have been admiring the work of some of the State unions. Our New Jersey brethren show up finely, and they will be heard from some day in the legislature. We have to confess for our community. We do not know of a more selfish set of professional people than the Osteopaths of Philadelphia. They are doing a good work, and probably are too busy, but, really, we ought to get together. A State society holds itself together, and soon we hope to have all our one hundred and fifty doctors sing "Blest be the tie that binds." We have about forty here in Philadelphia, but we seldom see each other. We sometimes wish we might all get arrested so that we might get to see each other at court. If some of the rich would give a banquet we might all prove that we could execute gastronomic feats, but the quickest way down the throat has not yet been tried on Osteopathic hearts. Some day one of us may die, and maybe a funeral will break the ice. We'd rather take hold a warm hand than wear crepe. Brothers and sisters, let's not wait to die for recognition!

The officers of the Pennsylvania State Association are: President, H. C. Vastine, of Harrisburg; Vice-President, Dr. Virgil Hook, of Wilkesbarre; Secretary, Dr. J. I. Dufur; Treasurer, Dr. J. C. Snyder; Executive Committee, Dr. Heine, Pittsburg; Dr. Muttart and Dr Campbell, of Philadelphia. We hope something will be done toward compacting and strengthening the organization.

We were glad to see some of our old friends during the sessions of the State Society. Dr. Kann, from Harrisburg, with his new wife, looking happy and prosperous; Dr. Grace Huston, whom we knew as a brilliant student at Kirksville; Dr. Vastine, the newly elected President, who is going to do some good work as the head of the Osteopathic movement in this State. We hoped to give his picture to our readers, but he is too modest to furnish the photo. Drs. Mandeville, Donnelly, McGuire, Downing, Peck and others called.

We are personally proud of the elevation of Dr. Charles Teall to the presidency of the A. O. A.; he is able, sound, safe and judicious. As a "drug drummer" or sales agent of manufacturing chemists, he was acquainted with the tricks and cheats of drug methods, and his first article after espousing Osteopathy was upon this subject while he was a first-term student, and it was written at our urgent request and published under our editorship while connected with the Kirksville Journal. Dr. Teall decided to study Osteopathy after reading one of our interviews in the Associated Press dispatches; and, we can add, that his good and accomplished wife, Dr. Grace Henninger Teall, studied Osteopathy because we persuaded her to do so, and we are sure she has realized more than she ever dreamed when she first undertook it.
The official "Bulletin" of the A. O. A. rather facetiously, but we suspect, rather unofficially, says the General Inspectors of the Associated Colleges are going to do some detective work, and are going to just drop down on the colleges, "unbeknowns" to anybody. That's a wise way to do. If any of them have ever "run a college" they'll find that a college of any stamina is not likely to run away from such official visitations. If any of them come our way, they had better keep quiet or our Freshman classes will call them up for the latest definition of Osteopathy, or the bearing of Dr. Loeb's researches on the Osteopathic situation in the East. We want the brainiest man the A. O. A. has, and one that can tell all he knows in fifteen minutes, to come to Philadelphia—one who can analyze our Schuylkill pelucid mud and tell how many typhoid germs are in it to the square inch. We are going to look out now for the benefits of paternalism in Osteopathic College oversight. We will ask for an appropriation of $100,000 for laboratories from the A. O. A. or the "parent-school," if we pass inspection. Philadelphia is said to be "slow." We believe in her, and hope that she may withstand even a Western cyclone.

We want to lift our hat high to Dr. Clara Martin, of Philadelphia. She is the pioneer Osteopath in Philadelphia, and she stands squarely up to truth, honesty, fairness and fraternity. These golden graces have made her a success. We wish some of the recent Osteopathic arrivals in this city would call on Miss Martin and learn from her the first principles of professional courtesy and comity. They will find her cordial, polite and efficient, in the Real Estate Trust Building. We always feel better after seeing Dr. Martin.

CURING WITHOUT MEDICINE.

We are told nearly every day by those who seem wise in other things that they do not see how we can cure diseases without medicine, and we can readily realize how most people do not know that diseases can be cured without medicine. The first and best reason is they do not know how it is done with medicine. The fact is they do not know anything about either way, and we do not wonder even at this. It is surprising how much medicine most people take, and how little they know either about the medicine or its real or supposed effects. In most cases they do not even know the name of the medicine, and if they did, the name would convey no meaning to their mind, and if they understood the meaning of the names, neither names nor meaning nor medicine would suggest any condition or effect in their bodies. Now who denies what we are saying? If this is so, is there not a very great amount of ignorance or indifference among people as to medicines and their effects? If this is so, is it any wonder that strangers to Osteopathy should not know how we get our effects? We think not.

But Osteopaths want the people to know. We are waging a campaign of education. We, most of all, desire the people to know more about their bodies, how to keep well when well, how to prevent sickness, how to get well when sick. We wish them to know as much about the chemistry of medicine, the chemical effects of drugs on their bodies, the poisonous effects of most drugs, how drugs never did, never can, and never will cure anybody or anything—as much of these important things as they will take time, and pay, to learn. We want them to know about the structure, the actions, the organs, the purposes of each part of their bodies, separately and sympathetically. We want them to know about disease and cure, about life and health, about birth and death, about the relations of body and mind, about the effects of improper thoughts, passions, actions on the health of the body. No patient takes treatment of us who does not learn something of these matters. We know that they do not know, and we make it our business to tell...
and teach them. We take the time, have the means and are pleased to instruct them. We believe it to be the first duty of a true doctor to treat and train the patients so that they can get along without a doctor. This we do. We wish to send our patients away as soon as possible, and are most pleased when they do not have to come back to us; and, as a rule, they get so well that they do not have to come; but, happily, they send others in their places, and so the good work goes on. However, there are some things they may not know, and may never know. Who that rides on electric cars knows how the power works or what the power is? Who that telegraphs knows how words are transmitted? Who that telephones knows how the tones of the voice are sent over little wires and be recognized a thousand miles away? Who that hears of wireless telegraphy knows how it is done? Who knows how the stomach turns bread into blood, or how flowers or fruit or grain grow? Who knows? Yet all these things are done every day and every year. When one boards a train for Chicago or a steamer for London who knows the way? Yet these ways are traveled every day and destinations are reached on time and in safety.

So Osteopathists all over the country are curing “incurable” diseases every day, and thousands in Philadelphia are well and happy as a result of our work. Don’t wait till you understand how it is done. Come and see that it is done. Get results in your own case. We will explain it all. Nothing makes it so clear as to get examined without questions, to be told what’s the matter in a new way, and to get well without medicine. All one may know may be used in the explanation, and if one knows next to nothing, yet one may clearly understand. It is simply wonderful, but we would rather you would say so, as you will, if you wish to understand. If you can see and feel, you need no proof that the sun shines, so if you will come and see for yourself, you will need no proof that Osteopathy cures without drugs.

THE OSTEOPATHIC SIGNIFICANCE OF THE NECK.

The neck is not a pillar on which to poise the head—as such any neck would do. Of course aesthetics require a nice, shapely neck, and much beauty invests a properly formed neck. We are not blind to the social prominence of a pretty neck. It is much in evidence, and always has appreciative witnesses. Osteopathy, indeed, holds the mirror up to nature and refashions fashion from an artistic standpoint, but it is the vital aspects of the neck that we wish here to exploit.

The neck is a compound, complicated cable. It binds in living contact and correspondence the centre with the peripheral circumference of the physiological world. It carries the freightage and fruitage of life—the rich, red blood, full of oxygen and carbon and nitrogen, to nourish the brain cells, and it conveys away the vast waste that follows brain activity. The passage way must be unobstructed. Cerebral anemia or hyperemia, with all the consequent diseases, would quickly follow. Bursting headaches, depression, insomnia, insanity, lack of concentration, poor memory, softening of the brain, genital weakness, numbness and paralysis, have their small beginnings in a poor neck. Having the neck pulled, Osteopathically, is salvation to a lost body. It is sweeter than pleasant dreams. It is more stimulating than champagne. Disease usually hits one in the neck. The blows may be trifling at first, but they kill in the end. A good neck is better than a good bank account. There is no disease that may not be reached through the neck. It has a conducting cable to each and every part of the body. It is a physiological switchboard. Not a vibration from the brain can reach the body except through the neck. The Osteopath knows the neck and spine like Paderewski knows a piano keyboard. If any one is so skeptical as not to believe what we say, let him come and get his neck pulled. It will only cost the effort of coming, and the profits of the turn will greatly increase his interest.
A man too busy to call for a personal interview asked us over the 'phone for an Osteopathic prescription for sciatica. Of course we prescribed a "treatment;" but he didn't understand our method. We told him it would take only fifteen minutes to get a treatment, and reasoning from the low standard of massage, he thought two dollars was rather much for fifteen minutes. He thought we ought to treat him an hour! By this time the 'phone wire was getting hot, and we told him we'd give him two dollars if he'd let us wind up his watch for an hour. Osteopathy always quits when it's through. Massage and bath-house methods never get through.

CRITICAL COGITOATIONS ON THE PHILOSOPHY OF SCIENTIFIC CURE.

NO. 1.

The battle is now on between medical and non-medical methods of cure. The issue is joined and only truth and fact count, thought and experiment alone can permanently triumph. The schools of medicine are only theoretical. They are irrationally empirical. They are not final. If they are in any sense scientific, they are not sound. It is a fact that drugs kill, and killing may be scientific. The medical science has facts on its side, and these facts are rationalized in the materia medica; but it is irrational to use killing methods in a profession of cure. There is no disposition to deny their facts or their effects. But the problem is one of cure, and when cure is sought as an end, their facts are irrelevant. The facts and science of drugs, for purposes of cure, are unsound.

We admire men who spend their lives over microscopes and laboratories. They are savants. All honor to them; but they can never become saviors of the sick so long as they seek to govern the sick rooms and hospitals by the motions of bacteria and open free dispensaries to a suffering public in order to sacrifice their bodies to the sanctities of scientific curiosity or experiment.

The theologians have tired the people with abstract disquisitions on "original sin," until many of them who think have concluded that the only "original sin" is the rejection of the internal law of the human ideal, and the going in search of a non-human, external law of "good and evil." The compound of an apothecary may be "good and evil," but the only real good to live for is the development of the good "within you," and the giving of the benefits to others.

The redemption of the world from sickness lies in being true to our humanity, to the creative power within ourselves, against the terror and the discouragement of external conditions. The man or woman who can make the sun shine within on a rainy day, or who can make it rain within on a hot day, has solved the problem of "the weather," that gets too much blame for conditions with which it has nothing to do. The kingdom of health is within you, not without.

In the last analysis there are but two possible forms of philosophic cure—there are these two opposite and contradictory conceptions of the sanctions of therapeutic law. The sanction, the force of the law, is either outside the body or it is within. Either it is in the nature-of-things or the arbitrary will of Fate or God, or el...
God, or else it is the result of causes within ourselves. For two thousand years man has been struggling against the rule of external law and in the direction of the law of the internal power, and even now we are scarcely beginning to realize the infinite possibilities of a live human organism for powers of health.

We are wakening to the sovereignty of the human body as the organ of Life and are fast discrediting every semblance of conventional authority, that has too long exercised dogmatic dominance in the form of quasi-political Boards of Health and State Medical Boards. The dogma of medicine is not only challenged, but it is waning. The free sovereignty of the people have broken faith with entrenched professionalism, and is giving its votes to those who wish for what is fine and who will a law that is fair.

The polarity of public health is fast shifting from the so-called "regular" medicine as represented by the Allopaths, and we do not know where it is yet to rest, but the evidence and attraction point to Osteopathy as a gathering centre of dynamics, and the public reaction is wholesome. Osteopathy has at least demonstrated that the laws of public health must conform to the laws of life, and these are not static, but vital. The laws of cure must also be vital, for the kingdom of cure rests upon no tradition, no code, no perfected system, but is as broad and fresh and flexible as ever-active Nature herself. Osteopathy is a new-born child of Nature and will not consent to be bound up in the swaddling clothes of drugs, but undertakes to win and dominate the conditions by the sheer kinetic reasonableness of Nature's creative resources.

Osteopathy is in the line of evolution, but not the inane evolution of materialism. Medicine is married to an insipid and sterile evolution that hopes that a live human body may be made, and Dr. Loeb, of the Chicago University, is assiduously conjuring with the elements in eager hope of making a man apart from the old-fashioned way of Nature, that is very human and very natural; but we know he will fail. Modern medicine will think itself immensely reinforced by his lucubrations, but when the chemical reactions evolved in his belabored processes clear up it will be found that it will take a real male sperm and an ovum in the old conjunctions to issue in a fetus. Chemistry attends the life-processes, but never inaugurates them. Virchow's cytology was hailed by medical savants, but it has turned out that instead of being an aid to the drug-systems, it has condemned them. So Loeb's biologic studies, in the end, will show that chemicals destroy life. Saline solutions may prolong biologic phenomena; spermatozoa may float in an alkaline medium; but semen cannot be made out of salt.

What is the greatest thing in a live human body? That's the question. Osteopathy analyzes for the greatest thing in the organism. It seeks it, and when it finds it it makes that thing the basic principle of its science. Chemistry and physics are great and wonderful. These play a great role in life and health and sickness. We study them, but we do not stop with their formulæ and laws. What makes chemistry and physics? If the bowels move what makes them move? Is it medicine? Medicine will not move the bowels of the dead, even when chemistry and physics are most active in the dead body. What, then, makes the difference? If there is an action in a live body that does not and could not take place when medicine is put into it in a dead body, to what is the action due? Plainly, not to the medicine; but to the life. Life conditions action, even when medicines are used,
and if, as can be shown, the medicine is really inimical to life, then life is superior to and sovereign over the medicine. Now it is the superior element that Osteopathy emphasizes and studies and controls. Osteopathy, from first to last, deals with Life.

Can as much be said of medical practice? Certainly, it is predominantly chemical, from first to last. Chemistry, apart from Life is dead. It is destructive, decomposing. Medicine claims to ally itself with the philosophy of evolution, and if medicine is distinctly chemical, how can it explain evolution? The first law of evolution is superior to chemistry. Can any juggling with chemical elements produce a sperm cell or an ovum? Can any chemical formula improve sexual conjugation? Is any prescription of a chemical doctor needed to grow a baby, or make it mature in six months? It is just as pertinent to ask, Is any chemical needed to bring it to birth, or keep it well throughout its post-natal life? All these are pre-eminently questions of Biology. Even the biologist must deal with elements outside of the limits of his laboratory. Whoever saw Life come and go? It is not measured by scales, seen by eyes or dissected by scalpels or governed by prescriptions. It is the sovereign of earth, and yet is subject to us. This is mystery. The question that has staggered the biologists up to this time is, What is the motive force of progress in organic evolution? What is it that makes life go forward?

Most people are beguiled into thinking that “science” knows it all. Scientists do seem rather arrogant at times, and particularly the evolutionists; but the most that their experts have established is the broad proposition that all kinds of life, from the lowest to the highest, are somehow related by heredity, and they have rather startled the timid ones by insisting on our relations. It is satisfactorily shown that although man may not have sprung from the monkey, yet the two have, somewhere in the beginnings of life, a common ancestry. Even if this were true it does not justify treating a man as a monkey; and yet this is what the evolutionary anatomists are doing. Jumping too quickly to conclusions, the best anatomists consider the coccyx the atrophied remains of a tail, and very often the surgeons, with no better sense, are quick to excise it when it wags or sags a little through accidental dislocations. For similar poor reasons they are prone to cut off the appendix, when, like other parts of the alimentary tract, it becomes inflamed. How humiliating to man with “form divine,” fashioned and finished after “the image of God,” to be treated like a rabbit, a ruminant, and required a big cecum in which to store herbiverous materials, until in the cool of the day he might have time to chew his cud! If the anatomist of the day is so shallow-brained and so sycophantic to the pretensions of evolution, as to seriously hold that the cecum is the poor remnant of a monkey-tail, and that the appendix is a dwarfed and now unnecessary reminder of a once capacious grass gut, then, to be respectable, let them cut off these vestiges of a lower animalism, whenever they intrude themselves into the consciousness of polite people. Verily, such anatomists and surgeons are consistent, for they are still practicing their theories.

If the philosophy of medicine is true to its monkey ideals, then it must continue to drug and carve at its models. “Ephraim is joined to his idols, let him alone.” We do not propose to abandon sick men and women to such poor relations. Granting all that can be said of our lower relations, we know that men and women have risen to the transcendent element in life and are superior to mere animals, and we think Osteopathy is working out evidence for proving our own prestige. For all that the medical savants and chemical biologists have shown, even to this
Life is superior to last, deals predominantly destructive, evolution, and the first law of elements prove sexual con dw a baby, or any chemical fatal life? All must deal with come and go governed by us. This is time is. What makes life all. Scientists, but the most kinds of life, and they have satisfactorily the two have, if were true it evolutionary anatomists confirm the surgeons, tile through ac to cut off the things inflamed. hed after “the face was, like a ravenous reminder cut off these into the con are consistent, when it must con's idols, let him poor relations. men and women mere animals, or own prestige, vn, even to this

very present, we should have to conceive of life as flowing in an accidental, indeterminate way, or swirling in meaningless cycles, as a fortuitous concourse of atoms. We ask, How can the stream rise higher than its source? How can the less produce the greater? And there is no answer. The chemico-medical biologists, like Loeb, completely fail to show how it is that life can mount and meliorate. If evolution be taken as the Life-process, they tell us nothing of the energy and spring, the push and go of evolution. Certainly they dare not ascribe to mere chemistry or physics, and if not, then, they cannot rely on drugs as its animus or ally.

The Osteopathic philosopher might look with hope to Darwin's natural-selection theory. We see Nature pushing, pulling, persisting and progressing. She moves, she mounts, she meliorates. There is no doubt of that; but what is the law? Darwin's theory does not give it; at least, with satisfaction, to us. The chemical specialist may institute parallels in his laboratory and stimulate and even simulate Life, but natural selection and scientific artifice are inadequate as an explanation of progress, and must be discredited by true specialists at last. It is this law of progress as seen in the evolutions of Nature that is the basic law of cure, and this the Osteopath seizes and seeks to synthesize.

Virchow is just dead. Loeb is still active. Darwin has had his day and his work has made a large place in the learning and literature of Life. Lamarck made a superb guess in his day, and his followers are still guessing. These all have told and are telling us much about the life-processes that is interesting, but is not yet important. They are not teaching us anything about the way of success, and they propose no escape from the fearful round of human suffering—we cannot use their speculations for the solution of the practical problems of human life. It is no wonder that the people are weary of the monopoly of medicine and the domination of drugs and the speculations of "science," and are welcoming the simple, rational, practical, common-sense methods of Osteopathy.

THE ELECTRICAL THEORY OF PHYSIOLOGICAL ACTION.

The secret of life is a mystery. Action in the living body still baffles the human mind. We do know that it is not really helped by drugs. We also know that it may be better secured without drugs. We know there is a potency that avails, but just what it is and just how it works is yet speculative. We talk of chemical and of physical physiology, and the physiology of the nerves; but the nature of action and reaction is yet a secret. Osteopathy makes bold to say that it is electrical. The best explanation of the power that works in the body and of its control is electrical. We wonder if the presence of acids and salts in the blood does not point to the action that is now called electrical. For example, a lump of common salt dissolved in a vessel of water makes the water a conductor of electricity. Two ends of a copper wire dipped therein start an electric current. A lump of sugar has no effect.

This has been for fifty years one of the deepest problems of chemical philosophy. It remained so until Arrhenius proved that the molecules of the salts and acids are torn apart when they are dissolved, and apparently with tremendous force. We are on the threshold of a knowledge of the actions which take place in the molecular world; in some instances, as in the above case, it seems that these forces are so great that we have scarce any means of coping with them.
The effect in dissolving the salts is an enormous electrical charge on the individual atoms. In the tearing apart, one set is charged positively; the other negatively. In the case of ordinary salt sodium chloride, the metal atoms (of sodium) take the positive charge, the chlorine atoms the negative. These electrically-charged atoms, long before their nature was understood, Faraday named ions, and they are so known in present electrical literature. This simple concept has revolutionized modern chemistry. In the famous phrase of Arrhenius, “It is the ions which act.” And it is the ions which are now supposed to make muscles contract. The negative charges set them going. The positive charges stop them—that is, the accelerating and inhibiting functions are due to the electrical ions. The new chemistry holds that the heat of the body is not due, as has so long been supposed, to some mysterious influence of the more mysterious nerves, but that it comes from the presence or absence of a minute quantity of certain salts. Says Dr. Loeb, of Chicago University, whose researches are exciting the scientific world, “While continuing my studies on the effects of salts upon life phenomena, I was led to the fact that the peculiar actions of the protoplasm are influenced to a great extent by the ions contained in the solutions which surround the cells. By changing the relative proportions of the ions we change the physiological properties of the protoplasm, and are thus able to impart to the tissue properties which it does not ordinarily possess.”

FOOD AS AN ELECTRICAL SUPPLY TO THE BODY.

The electrical ions have been shown by Dr. Loeb to enter into the most intricate of life processes, such as growth, reproduction and muscular action. The paramount question with the Osteopath, who stands ready to appropriate the latest scientific facts, is this, Can the electrical ions be charged and changed by food, and independently of chemicals introduced from without? This has immense import to us. Food is our only source of supply of the power to build up tissue. Barring all that Dr. Loeb has done with chemical salts applied to excised tissues, we gladly admit his evidence as to food. He says, “Evidently the chief role of food is not to be digested and ‘burned’ by the muscles and organs, as present-day physiology assumes, but to supply ions. ‘The heat developed is a by-product. The chief action is the production of electricity. The body is in some sort a dynamo. Food, then, is of value according to the amount and kind of electricity it affords.” We like this. We have been teaching for two years in our chair of dietetics that the only thing of value in food was the sunshine it contains, and when this was converted into bodily uses all other elements of the food were waste to be eliminated. These suggestions are of far-reaching consequences in the physiology of assimilation.

THE FOODS THAT CARRY ELECTRICITY.

Thomas Graham, a great English chemist, made a distinction between those substances which crystalize when they solidify and those which do not. The latter he called the colloids, the glue-like substances. An ordinary hen’s egg, or gelatine, is a good example. When the cook stirs up fat or jelly in hot water, she makes a colloidal solution. Speaking broadly, the human body is such an affair. That is, it is about seventy-five per cent. water; the rest jelly and bones. The action of the colloids in water was long a bothersome puzzle. Much light came when Hardy, of Cambridge, in England, demonstrated that the colloid particles bear an electrical charge, that these complex molecules (some chemists suppose the ordinary white of egg molecules to contain five or six thousand atoms) act just like a simple ion. Further, Hardy showed that the colloids carry positive electricity, and are precipitated by the negative kinds of ions.
HOW THE FOOD-IONS AFFECT THE NERVES.

If muscle may be made to act under the ions, it is but natural to ask if these same ions have an equal effect on the tissue of nerves. Now the nerves and brain cells are eighty or eighty-five per cent. water. The nerves are, crudely speaking, simply highly phosphorized fats in a weak salt solution. Again, the nerves consist of colloid particles in suspension. The colloid particles are positively charged. The colloid particles may be precipitated or brought to a state of jelly. The nearer the nerve substance is brought to a jelly the better it conducts and the more easily it is stimulated. The thinner the solution in the nerve the less easily it conducts. A nerve loses its ability to be excited by dissolving its particles more and more. Consistency, therefore, of the nerve substance conditions its functioning power. The action of a nerve is a wave of precipitation of its colloid particles. Dr. Mathews, a collaborator of Dr. Loeb, reasons thus: If the negative ions be in excess in the solution, and the positive and negative ions in the nerve be just balanced, the effect would be the precipitation of the first layer of colloid particles bearing positive charges, and in contact with the solution. This would release a certain number of negative ions lying next in the nerve sheath, and these in turn would precipitate the adjoining colloids. This would result in a kind of wave of precipitation, traveling along the nerve, and at the end would be a set of free negative ions, ready to call the muscle into action. The nerve impulse is a series of precipitations.

OSTEOPATHIC STIMULATION BY THIS METHOD.

How may Osteopaths stimulate nerves, according to the new chemico-electrical theory? This is where our main interest centers. How may a mere mechanical stimulus, a push or blow, set up this wave of precipitation? This can be accounted for by supposing the effect is the same as when raindrops on a window coalesce when the window is struck. Two or more colloid particles coming together would have their surfaces reduced, hence their electrical charge reduced, hence the release of a corresponding number of negative charges. The wave is started.

EFFECT OF DRUGS ON THE ELECTRICAL CONDITIONS.

Let it be borne in mind, from first to last, that we always mean the inherent electrical conditions of the body, and never those induced by batteries. We have no use for applied electricity in our Osteopathy. We have gained immensely if we can realize the tremendous natural potencies of the body, apart from any artificial conditions induced from without. To develop, control and conserve the natural electricities, by food and treatment, is our work. Anything that destroys, dissipates and weakens these inherent electricities is an evil and a danger to the tissues. This makes applied electricity unnecessary, and destructive. It also sets aside drugs. Another notable work is doing by Overton and others, on the effect of anesthetics; chloroform, ether and all their like dissolve fats. Their action on the nerves is to deaden, to stop sensation—that is, to retard the progress of the nerve impulse. And the nerve being highly phosphorized fats in a salt solution, the action is directly destructive. Drugs make the natural nerve solution thinner, and this lessens its functioning power. This seems to be a valuable contribution to Osteopathic science, and we have given it this full presentation because of its being the latest research of chemistry and biology, and we ever stand ready to incorporate all such facts into our science, when they are based upon the natural laws of the living body.
SOME OSTEOPATHIC PRINCIPLES RELATIVE TO MUSCULAR CONTRACTION AND NERVE ACTION.

All organic function depends on the nerves, cranial, cranio-spinal and sympathetic.

Nerve conditions are related to contractures; they induce them.

Blood conditions follow quickly nerve conditions.

Vaso-motor conditions induce contractures.

There is no mechanical contraction apart from the nerves, directly or indirectly.

Hyperemia requires vaso-dilatory action.

Blood stasis, or congestion, depends on nerve action.

Collateral equalization would take place as a matter of hydrodynamics, if stasis were not conditioned locally by some nervous condition.

No mere mechanical theory is sufficient without nerve consideration.

Nerve conditions are not molar and mechanical; they are dynamic-molecular.

Osteopathy does not rely upon static, but dynamic, vital conditions.

Mere muscular contractures, apart from nerve conditions, are not explanations of pathology.

No mere muscular treatment, like massage or rubbing, is competent. It must be technical nerve treatment.

Massage bears the same relation to Osteopathy that whitewashing a telegraph pole or pulling a wire would be to sending a message.

There are bath-house rubbers who work by the hour and there are Osteopathic operators who always quit when they are through, just as there are laborers who paint and number telegraph poles, and there are operators who telegraph messages.

Contractures act not as such directly, but through vaso-motor centres and fibres which they involve.

Chemical doctors and masseurs work to cure contractures without knowing their cause.

Contractures impinge sensory nerve terminals and these act afferently on the medulla.

Myostatic reflexes—muscular tensions—are partly tetanic and are preceded by more or less of hyperesthesia.

Sore spots are impinged sensory nerve fibres. These spots are in relation to the seat of lesion.
Osteopathy diagnoses conditions from these sore spots, because it knows their meaning. An ordinary doctor would try to kill the impinged nerves with drugs and the masseur would try to crush them out by brute force or the titillation of animal magnetism, because they didn’t know their meaning. One may as well smother a child for crying from pain or choke a cat for making a noise because your foot was on its tail.

If the lesion is chronic, muscular flaccidity follows. Impinged sensory terminals soon affect sympathetic, organic life. This is true apart from any effect the blood condition may have.

Direct sympathetic effects follow irritation of sensory nerves.

Nerves generally are stimulated through their sensory terminals in the muscles. Such stimulation is followed by vaso- and viscero-motor changes.

Contractures, therefore, act through the vaso-motors directly, and indirectly upon the blood quantitatively.

Blood conditions—anemia and hyperemia—are through vaso-motor nerves acting on the vessels.

If a lesion brought blood upon a vaso-constrictor centre, it would be stimulated at first, and this would result in anemic conditions.

This hyperconstriction and anemia would finally result in paralysis—loss of constriction would be followed by a tendency to return to normal equilibrium.

Excessive dilation and hyperemia may also be produced, resulting in engorgement of a part or viscus, which would likely be relieved by a spasm.

Vaso- and viscero-dilation and hemorrhage in turn react on the nerves through a surcharge of CO₂ toxicity, resulting in detoning nerves and depressing vital action. This, also, may require a spasm to relieve it.

A spasm is a motor disturbance initiated by cerebrum to remove toxic stasis, and to re-establish vaso-constriction and tonus.

The principle of action and reaction, being equal and opposite, regulates equilibrium.

The balance of power in equilibrium between vaso-constrictors and dilators is seldom re-established when lost without some kind of motor-spasmodic action.

Excessive anemia or hyperemia would soon detone, and degenerate centres and nerves by starvation or intoxication if the psycho-motor centres did not act as a storm centre, precipitate a convulsion.

There is a law of reciprocity between blood and nerve-action and nutrition—anemia and hyperemia.

This law holds true in relation to cutaneous surfaces and deep structures. If superficial vessels are dilated the deeper ones are contracted, and vice versa.

Oxygcnated blood acts as a true stimulant to nerves and centres.

Venous blood temporarily stimulates, but soon depresses, nerve action.

Osteopathic treatment is capital for the blood and nerves. It induces arterial tonus, diffuses congestion, equalizes circulation, prevents venous stasis, and by nutrition sustains normal nerve action.

**AMERICAN OSTEOPATHIC ASSOCIATION.**

We are glad to hear that the late meeting was the best, and that augurs better things for the science and the profession.

The endorsement of the demand for higher education was given. This could not very well be withheld, as the demand had been clearly made by the educational leaders of Osteopathy. The Association must keep pace with what is best in the forefront of the Osteopathic ranks.

Some of the colleges, independently of mere conventional resolutions, had already extended their course. Two years ago the Philadelphia College projected
and advertised an “Advance Course,” which met with great favor, and last spring the Boston Institute formally extended its course to three years. Then this summer the American School and the Still College had “Summer Courses.” Let them all raise their standard.

The chief necessity for higher education has been felt in the larger cities in the East, particularly in Philadelphia, New York and Boston, where Osteopathy comes into sharp contact with the highest professional culture. In these great cities are old and rich dominating medical institutions that offer powerful opposition to Osteopathy, and the early graduates from the American school under its then short course, have found it necessary to add to the Osteopathic equipment; and even the two-year graduates, in legislative fights and personal encounters with skilled medical doctors, have found that they needed more training. The later graduates have had better general training and have been able to make it apparent that a better culture was needed. So a strong sentiment has gone out, and we are glad the Western colleges have fallen in line for higher education.

We are glad to see every broadening influence operative in the Association, for it has been working perilously near the narrow limits of provincialism and partisanship. Children may play the “baby act” in nurseries, but men must seem bigger in national relations. Too many little conceits have dominated some of the policies of the A. O. A. and the A. C. O. There is too much play of personal feeling between Kirksville and Des Moines, and while all the other colleges seem amicable, it looks at this distance that the withdrawal of the American school was not from the highest motive. This act certainly needs explanation.

The time is past when mere individuals should expect to control Osteopathy. No school or man or set of favorites can safely be allowed to dictate in a movement that is national. Of course, all differences and conceits will in time settle themselves; but it looks “little” to outsiders. Osteopathy is like a free republic, and the “divine right” idea will not be popular.

We are hearing it said that the graduates of the American school act and talk as though they were the only regular, qualified Osteopaths, and this is true not only in localities where they come into sharp competition with graduates from other schools, but that it is general throughout the country. This has been the provoking spirit of many unpleasant conditions in Osteopathy. Personally, we have never noticed it, or seen any direct evidence of it; but we feel that it is condemned and contemptible, and we should make it seem so to the bigot who is fool enough to show it. If this is so, we ask why should Kirksville graduates feel as they do? Is it provincial narrowness, or is it simply the fact? Are they any better qualified than graduates from Boston, Philadelphia, Wilkesbarre, Des Moines or Minneapolis? Who will answer this question? We would like to know the truth, if any one is ready to speak out frankly and fairly. We have a cue as to the situation, but we prefer a square and open statement.

The reason assigned in public prints for the withdrawal of the American school gives color to the suspicion that this school thinks it is the only school, or that it is superior to other associated schools. Dr. Charles Still is reported as saying that the association of his school with others was “giving credentials to younger and weaker competitors.” This seems the real reason, and if it is, we can easily understand the feeling of some of its graduates that they are superior to other schools.
and last spring when this summer. Let them all
be the American and if it is, we know the truth, this
American Association. forates from other
Des Moines. That's the rub, and even the
skilled medi­
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Osteopathic Association will increase. At present it is pitiably small, and there has been felt
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right and necessary that they do not, if they do not, it will be known.
Editors hear everything. All facts float into our sanctum. and we take
people and things for what they are worth. If a school does faithful and full work
and graduates competent men and women, old age needn't shake its head; they
will get on. If the parent school keeps faithful, their graduates have simply the
common chance. The fit only survive, and the fit do not ask for endorsement.
The sentiment that the American Osteopathic Association should be conducted
in the interests of the profession and not in the interests of any one school, is a
popular one, and whenever this becomes the evident policy the membership of the
Association will increase. At present it is pitiably small, and there has been felt
on the part of the really working element of the profession a narrow policy that
has been considered almost a clique. Nothing less than a broad, catholic, lofty,
impartial and truly professional spirit can lift the Association to a plane of
minent respectability and fraternal enthusiasm. Osteopathy co-operant means
control of the American school, or
will be reported as
credentials to
and if it is, we
are superior to
other graduates. We wonder if this is the spirit inculcated into the students by
the promoters of the American school. We hope not. It makes a pitiable impres­sion
upon the intelligent public who know little about the Western schools. We
are willing to give honor to Kirk­sville and she gets proper honor from all gradu­
ated Osteopaths, but it doesn't seem just like Kirk­sville to put on such airs, and
arrogate everything to herself. Let others praise her. If what is felt by Kirk­sville
and her graduates is true, they needn't fear competition. They can afford to
be generous. Kirk­sville should give its hand to Des Moines. That's the rub, and
the whole behavior of Kirk­sville in this matter looks impulsive at this distance. We
do not say this in a captious spirit, but because some one should speak out what
many feel, and we are not afraid. We are loyal to Dr. Still and to Osteopathy,
and we think Kirk­sville should not act as though her grandchildren and great­
grandchildren were illegitimates. Dr. Still is fond of calling himself "Pap,"
and his children needn't get nervous because he is a "Grandpap." He and they ought
to be proud of all the associated colleges, and not fret because some of them are
big enough to go it alone.

We are no special pleader for incompetence. We take nothing for granted. Diplomas do not make doctors. We ask no favors from any one. Every Osteo­
path has to work for his success, and his training is only an aid. We hear of some
failures from all the schools, but it is not the fault of the schools. The schools
must do good work, and if they do not, it will be known.

The biological implicate that a living organism must assimilate rather than be
assimilated to its surroundings, applies forcefully to Osteopathy. The question
is not, Shall the profession dominate the schools, nor is it, Shall the schools
dominate the profession. Either position or policy can end in partisanship.
The real question is, Shall not the professor and the practitioner stand shoulder to
shoulder,—shall not technical and applied Osteopathy blend into unity,—shall not
the theorist and the worker go hand in hand,—shall our faith harmonize with
our work,—shall not our thinkers and our toilers help each other,—shall not all
our schools and all our doctors be the best of friends,—shall not the entire rank
and file of Osteopathy, from Dr. Still down to the humblest regular graduate, be
brought into a living, loving, healthful fraternity and family? We have diverse
and divergent elements scattered over the biggest country on earth, under different
conditions; we are composed of everything, but let it not be said we are compacted
into nothing. Our enemies rejoice to see us divided or subdivided, and they will
respect us most when we are unified into the solidity and solidarity of a sympa­
thetic organism. We all hold loyally to the head—Dr. Still—but let no man
or woman, who has been baptized with the distinctive chrism of Osteopathy, feel
that he or she is insignificant. The head cannot say unto the foot, "I have no need
of thee." The brain can be made to suffer when a distal phalanx is injured. Osteo­
pathy must have feet and hands, and some of the very best work for the sick and
for legislation, is done by humble workers. We know of as pure spirits and as
clear brains and as deft hands and as brave hearts in Osteopathy as any that
grace the official ranks. These will do and dare for the science, when hard work
is demanded. The strong hands of the Association must reach out to these and
come into touch with their toil. Through local and territorial organizations, em­
bracing the cities and towns, these must be marshalled for united work. The
headquarters of Osteopathy are out in the field, under the open heavens where the
sick are, and its sweetest applause is often not heard beyond the walls of the
operating rooms.

We must have great faith in the eternal fitness of things and the timely in­
spiration of progress. One of our principles is improvement through adjustment
and change. Whenever the necessity and usefulness of the Associated Colleges of
Osteopathy is ended, we can see it go, as the petals go to give place to fruit, or as
old tissue is thrown off for the new. New wine sometimes bursts the old bottles.
The truth never fails. It makes its organs. Life cannot be bottled. Osteopathy
will yet our grow all its present channels. Adaptation to new conditions is the idea.
Our colleges and curricula, our technique and our methods of applying the truth,
will all change. Life is change. Progress cannot be welded to mere forms. No
arbitrary dictum can veto thought. New ideas will come, and we must welcome
them. New books will be written, better than any of the old ones. Books cannot
bind ideas. Morocco covers are not as fine, as soft as living skin. The greatest
book on Osteopathy is the pulsing, moving, wonderful human body, and this is the
only authority to the earnest Osteopath. The body of a little babe has more in it
than all the books Dr. Still could write. All the books on Osteopathy are feeble
commentaries on the living body, and compared to it are as the stars to the sun.
The only service Dr. Still or a college or books can render is to help us to get at the
body, and the sooner we can become independent of the help the better. The one
thing we must love and live and labor for is, primarily, not the honor of man, or a
school or a teacher, or a theory, or our own emolument, but the truth. He who
is not free in the Osteopathic truth, may easily be a slave to any or all of these.
Anything less than the truth is conceit, and it is easy to grade ourselves by this
alternate standard.

WHY I BECAME AN OSTEOPATH
BY THE EDITOR.

Five years ago I was a minister of the Gospel, a full-frocked clergyman in the
Presbyterian church, and ten years ago I was pastor of a congregation in Philadel­
phia. Each week my sermons were reported in the papers, as I preached of
sin, sickness, suffering and death—of life, light, liberty and the Divine love. I
think my message was invariably one of cheer and courage, as very many of rich
and poor alike in this city will testify. I felt in my heart that cheer and courage were what men and women most needed in life; and they needed these things chiefly because they were sick. It was sickness that burdened them, and it is still the real burden of life. It is easy to be happy—yes, it is easy to be good when one is well. It is the most difficult thing in the world to be either, when one is sick. Most of the sorrow and suffering of the world is associated with sickness. Sickness is the supreme problem that 90 per cent. of the people have to settle. The D. D. and M. D. are doing their best to help. The people hear all they want of the devil, of sin, of hell and pills—and they have all they want, too, of these things. They dream of heaven and health and rest, and pray to get more of these good blessings; but the great question of how to fully realize them is still pressing for solution. I was brought up on the Bible, and the catechism, calomel and blue-mass pills, and they always produced results, especially the pills, but none of them saved me from sickness. I had to take so much of these orthodox remedies that, like the Irishman, I was sick a long time after I got well.

But, seriously, life is easy until one gets real sick. We have our troubles with the world, the flesh and the devil, but it's sickness that tests our faith and our fortitude. All went well with me and mine and the world was bright and promising until my health was wrecked with nervous prostration, and my horizon was clouded by insufferable depression and blackened by the horrors of suicidal mania. I had all the promises quoted for my comfort. I had the prayers of the church offered for my recovery. I had all the biggest and blackest pills that Dr. Shoemaker could compound for my purification. I had all the tonics and rest and dark rooms that Wier Mitchell could devise for my peace of mind and body. I had the advice of the great Hayes Agnew that I should go abroad and rest in Southern Europe for two years. My last prescription from him cost me $5.00, and was for a sore throat that an Osteopath could have cured in ten minutes. I had Van Lennep mend broken bones I sustained in a bicycle collision in the park, precipitated by my nervousness. I don't think any man had a more varied experience while struggling with conditions that were wasting her away and that finally reduced her to 90 pounds. The conditions made an invalid of my wife also, and for four long, weary years I saw her struggling with conditions that were wasting her away and that finally reduced her from 150 pounds to 92, and, as I afterward learned, it was chiefly the severe treatment she received that did it. Twice I had her laid on the operating table for the want of air; and, knowing what I now know, I cannot but feel that she died for the want of air; and, knowing what I now know, I cannot but feel that she died through professional ignorance. After we had laid her away I went back home to take up again the weary round of pill and powder. My grief and weakness gave way to a strange sense of heroic determination—of conviction and of courage. I felt moved to renounce drugs forever. I asked that the doctor be kept away for one week; the four members of the remaining family were receiving his daily attention. I gathered up the medicine bottles and boxes and put them in the furnace. I could have welcomed death for us all. I was frenzied with mingled despair and determination. What would we do? Ah, these were trying, terrible times. All the sunshine and scene in the world seemed to mock at our condition. To continue in such a plight was hell. I cried out for hope, for help, for heart. No one can ever know the stress and strain of those times. An unpitying heaven seemed to vouchsafe no answer. A sympathetic but timid little woman brought to my suffering wife a copy of Godby's Magazine, giving an account of Osteopathy. She read it with avidity, and grasped at the prospect as a drowning man to a lifesaver, though it seemed to me only a straw. I denounced it with all the bitterness
of a prejudiced M. D. I felt that it would be a disgrace to turn to Osteopathy. I still retained some sense of respectability, but to go to Osteopathy seemed worse than chicanery. A woman’s hope prevailed, and my wife sought the nearest Osteopath. I was ashamed. I made fun of it secretly, and pitied the credulity that would think otherwise. But Osteopathy soon brought real hope. In the meantime I vowed that I would study the human body, and that I would not allow any doctor to know more about myself—my body—my head—my heart—than I did. I had studied everything else. My father made me take a good education. I finished up by taking the theological course at Princeton. I made a special study of God and the soul, but knew little of man and his body. I grew tired talking of such high themes when I saw men, women and children struggling on earth with diseased bodies. I longed for a Gospel for the Body—a good gospel of the body. I studied holiness till I thought it came from wholeness. To be whole was to be good. Holiness meant wholeness—to be whole—wholth meant health. It seemed like a revelation from heaven. A fresh study of the life and work of the Great Physician showed me that his primary work was for the body. He healed the sick. This was His chief credential. It was the cue to his signal success. He drew crowds by His healing. I read that healing was the leading credential of His Kingdom. He charged His followers particularly to Heal. Healing and teaching were the two commands. These commands are still the standing order of the Divine Kingdom. They have never been repealed. I found that Pharmacy was classified as one of the black arts against which the malediction of heaven was uttered. Witchcraft in Gal. 6:20 is Pharmacy. I realized that Healing was a lost art in the church and that it was relegated to the Pharmacists, who were specially mentioned as workers of the flesh—and the drug-doctors are the descendants of these condemned Pharmacists. I had seen thousands of the sick and suffering prayed for, consoled with Scripture, and blessed with spiritual advice, but, withal, left to suffer and to die. I prayed to be a new kind of doctor—not a doctor of divinity or a horse-doctor, not a doctor of philosophy, or a faith doctor, but a real doctor of the body. I wanted to take hold with my hands and help just where and how it needed. I had seen enough of prayer-books and prescription pads. The sweetest and strongest collect I could say failed to cure even a case of colic. I wanted something like hand-work—chirurgics—for the best work in the world is not machine work, it is hand-work. I had been in the grind of the medical machine, until I was ground into a grist of powder and pills. I wanted human hand-work for the sick body. These were my longings. In the meantime my wife said she was improving. I still thought she was fooled, or hypnotized; but I wondered. Finally, after an experience that would amuse you. I thought she was getting better, and I said, “If Osteopathy cures you, I’ll study it, and give my life to helping sick bodies.” I reasoned that the shortest way to a sick man’s heart is through his body, that the shortest way to a hungry man’s stomach is down his throat. I believed that heaps of the world’s sin could be cured by a sound and scientific sanitation—that physiology was more important than theology in keeping a man’s liver right. I am now sure that dyspepsia is the chief weapon of the devil, and that a bad gall-bladder can come nearer upsetting the world’s equilibrium than a wicked heart. Indeed, if one’s liver is right, one’s living will be right. When one looks yellow and feels blue, the devil has succeeded. To check the devil we need only to remove drugs and cultivate health. Under the influence of these new ideas we all began to feel better. I wanted to see Osteopathy at its best. I visited its founder and spent several days investigating the curious and strange things I saw in Missouri, an odd place to go. I thought, for progress and science in the healing arts. I got much comfort and assurance from Mrs. J. B. Foraker, wife of the great Ohio United States Senator, and decided after her talk that I would risk my life and family, and the little that remained of a small fortune that had mostly gone to the doctors—risk it all with Osteopathy. My purpose became public, and it was heralded all over the country by the Associated Press in hundreds of
columns of interviews which such papers as the Chicago Times-Herald and the New York Journal gave to the public about my decision. Very much of it was exaggerations of my real attitude, but it brought Osteopathy to the attention of thousands of people. I retired from the pulpit, and have not preached in the old way for four and a half years. I have not been unfrocked, but still hold my clerical credentials. All this time I have studied—studied as never before. I have kept quiet. I have reached new views of life, of health, of sickness, of disease and death—yes, and of sin and suffering, of the soul, of heaven and hell and eternity. I do not know that I shall ever preach after the conventional fashion, but I want to practice a new way. Preaching is all right, but it is practice that counts. No greater blessing could come to the preachers than knowledge and skill to practice the acts of the body, soul and spirit. It is wonderful what some of them know, but very many of them don’t know enough to keep their bowels open. God pity them! I may be pardoned for poking fun at some of my erstwhile brethren, for when I began studying Osteopathy one of them said in a good church paper in this city, now issued from this building, that I had abandoned the ministry and was going to be a “bone-doctor.” That little joke has stuck with me, and as a mild retaliation I have lived to see his financial agent beg us for an “advertisement” for that same paper. The Presbyterian doesn’t shy at a skeleton of Osteopathy now, but will articulate its praises to the tune of $20,000 a column. Bones may rattle, but money talks. Nothing succeeds like success. Some people know pretty well now that I am not a bone-doctor. I hope to speak out now, for I know something new. Osteopathy is and will be for time to come a “bone of contention” to the doctors. Osteopathy is and will be for time to come a “bone of contention” to the medical schools and professions. Some of them said Osteopathy was still-born, and would never see the light. Its founder’s name was Still—Andrew T. Still. Only in that way was it still-born, for it has proved to be the liveliest baby the medical doctors have had to handle. It was so lively and well-trained from the start that it never wore swaddling clothes. It was too big to wear a napkin. I have known it since it began to stir in the world—before it uttered its first big cry—and it has come, like Minerva, full armed, from Jupiter’s brain, into the world. But all this and more is a matter of history—though only five years! There are other aspects of Osteopathy to which we desire to allude. After five years of the study of the fundamental problems of scientific therapeutics, and after three years of practice and experience with disease—testing this new gospel—and after the careful study of the theory and practice of medicine, the chemistry of medicine and the action in the living body of drugs, I wish to give public and profound utterance to the scientific facts which have been demonstrated to be true, and which are destined, I believe, to work a quiet revolution in all branches of the healing arts, in medical education and in the health and well-being of the human family, because they will effect a change among the people in the bad habit of incessant and excessive drug-taking.

IMPORTANT NOTICE.

We are exceedingly gratified to make prominent the following important action, and shall do all in our power to further such a good cause. We are proud of the Association and its able and efficient official directorate. The graduates of the Philadelphia College of Osteopathy met on Monday evening, Sept. 8, at the offices of Drs. Keene and Leonard, in the Weightman Building, and organized...
an Alumni Association. A constitution was framed and by-laws adopted. The following officers were elected for the ensuing year: President, Dr. W. B. Keene; Vice-President, Dr. E. Burleigh; Secretary and Treasurer, Dr. H. E. Leonard; Executive Committee, Drs. Keene and Leonard, ex-officio Dr. G. G. Banker, Dr. Lillian Daily, Dr. Ira Frame. All graduates not present at the meeting are earnestly requested to sign the constitution and by-laws at their earliest possible convenience. The Association will meet every three months for the purpose of promoting fraternity among its members, to discuss matters relative to the advancement of the science of Osteopathy and for the presentation of papers."

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