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Osteopathic Digest (February 1, 1932)

Philadelphia College of Osteopathy

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**Osteopathic Digest**

**Vol. 5, No. 5**

**Published by the PHILADELPHIA COLLEGE OF OSTEOPATHY During the College Year.**

**February 1st, 1932**

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### Alumni Hold Annual Clinic

#### Field Men Given Post-Graduate Work

**Lecture Program Added Feature**

Alumni Clinic Day of the Philadelphia College of Osteopathy was observed on January 30, at the Osteopathic College in Philadelphia, with a large group of physicians from the Eastern States present, according to Dr. E. R. Eaton, head of a staff of the Department of Osteopathy, spoke on "Surgical Diagnosis" in a general discussion. The general discussion was opened by Dr. C. Haddon Soden, professor of obstetrics and gynecology, and Dr. H. Willard Sterrett, well-known worker and an interesting study and the treatment of interesting cases of heart conditions and other cases read and discussed proved very interesting.

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### Blind Osteopathic Addresses Lions

**Dr. J. Francis Smith delivery his inspiring address to the Lions Club at Upper Darby Thursday night.**

"The blind who feel that they are of no possible value to their communities and career from the blind eyes and ears and feel that they have no power to instruct or help in the public at all," said Dr. Smith, who is blind himself.

"The Lions Club can do wonderful service by making it possible for the blind to turn their disaster into an opportunity to bear to a higher plane the type and women who have made good."

Following the address of the well-known lecturer, the Lions Club voted to take the matter into hands for the first time that such work for the blind has ever been suggested or one service organization.

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### Walton Osteopaths Hear Dr. E. G. Drew

**Surgical Diagnosis Topic of Interest Address**

"Symptoms of disease are always an indication of maladjustment of the body," declared Dr. E. G. Drew, professor of Obstetrics and Gynecology and Dean of the College of Osteopathy of Philadelphia, in an address before the Osteopathic Society of Wilmingon, Del.

Dr. Drew, in selecting his subject at the meeting of the large group present, gave a definite and practical demonstration.

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### New Fraternity Pledges

**In the last issue the names of the following fraternity pledges were published:**

*Address additional reminders for the following who have not given in support of the tremendous undertaking of your college in the form of a ticket.*

**Drs. Norman Laughton, Elizabeth J. Kuhn, Margaret Foster, L. E. Devine, Dr. Ralph Fischer, head of the Department of Osteopathy to accept a position at the informal dinner preceding the meeting.**

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### Everyone Must Eat!

**President of the Philadelphia College of Osteopathy last month.**

"The human body can stand just so much. Any extra strain caused by mental and physical stress, and lack of sleep with little or no attention to rest, can only lead to a definite change which invariably becomes fatal."

Dr. Newton A. Stock, president of the college, in the form of a lecture and motion picture talks over the United States.

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### Volvo Addresses County Society

**Type of Talk by Psychologist**

*Pres. Long Appoints Radio Committee*

"'Go to the body and go to the people disconnected and in need of some intercessory agency," said Dr. Theodore L. Drury, professor of Psychology of Temple University, who was appointed by the Philadelphia County Osteopathic Society to the annual convention of the American College of Osteopathy last month. Dr. Soden made an impressive and interesting study of bone osteopathy in Philadelphia. His topic was "Diagnosis of a New Rhizomyxis."

Dr. Francis Smith presented the idea of radio publicity, but was heartily supported by Dr. O. J. Snyder, who said:

"I urge you people not to become dormant in your ideals, but to look ahead and start pushing for that necessary recognition that only centers with control and appreciation of body mind and spirit can attract the attention to the public as other otherwise."

"I think that the tremendous undertaking of your college in the form of a ticket will not be completed, osteopathically."

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### "Dangerous Curves" Luncheon Topic

**Rotarians Hear Dr. W. H. Sterrett**

"Continued worry and no rest whatever," were the remarks of Dr. H. Willard Sterrett, as he confided to the members of the Woodbury Rotary Club at Woodbury, N. J.

The* President Evans has a few requests and many reminders for the active members of the Alumni Association of the Philadelphia College of Osteopathy.*

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### Morse to Speak to Chem Society

**Dr. Winton Morse, formerly head of the Chemistry Department of Jef- ferson Medical College, and author of a well-known textbook on biochemis- try, will address the members of the Philadelphia County Osteopathic Society in the near future.**

A well-known chemist will discuss the chemistry of skin and will touch upon the pathology of the body covering.

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**BASKET BALL FEB, 12th**

**P. O. O. vs JUNIATA**

**MEN AND WOMEN**

**WEST BRANCH Y. M. C. A.**

**9 P.M.**
DIGESTING THE NEWS

EDITOR'S COMMENT

T. H. Huxley spoke of '... the Open-Door Policy,' which he considered a window through which the world might be allowed to see the United States. This is certainly an open door, and it is a policy which has been widely discussed. The great advantage of the policy is that it is not only possible, but also desirable, to gain the confidence of other nations. It is a principle which must be applied in all international relations.

THE NEWSPAPER'S VIEW

The policy of '... the Open-Door Policy,' has been widely discussed. It is a principle which must be applied in all international relations.

A HISTORY OF OSTEOPATHY

By Dr. Frederick Long

In the early history of osteopathy, the osteopaths were not recognized by the medical profession. They were looked upon as quacks and charlatans. However, their work was welcomed by the people, and they soon gained a large following. The osteopaths were not afraid to use strong remedies, and they were not afraid to take on difficult cases. Their own methods were highly effective, and they were able to cure many diseases that were considered incurable.

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SUGERY MADE SIMPLE

Surgical things except drug stores, men's and ladies' wigs, and some of the ointments and paste are held up as being dangerous. The large piece of the medicine cabinet can hold all that the medical association really needs. There have been a few instances where drugs have been sold simply by the prescription, but this is being prevented.

Not to be undone by this deviation from the rule, we have devised a method to simplify the taking of some of these things. By "why let the telephone operator cut you off?" is our slogan.

Ever since Voil take cut man's beverage, the fear for removing things has held its grip tighter than a Scotchman with tacnic convulsions. The tumuli, the teeth, the appendix and the conscience are slated to go.

Since we must start at some end, let us first discuss tumours. Tumours must be removed. In fact, it will be upon the principle that the "tumour will grow." Now our research has shown that a tumour is in adverse to a left-hand turn. Instead, it will cause lesions collisions with both and the surrounding worms. The disease is disastrous to the worms.

Have you a little floating kidney in your home? Why not sink your troubles by either joining the Navy or by using your kidney anchor? The patient with a floating kidney is placed on a diet free from salt. The operation is performed under general anesthesia. The kidneys are treated with a process of salt decomposition.

EIGHT YEARS OF P. C. O. GROWTH

The following tabulation portrays the growth of the Philadelphia College and Hospital since 1924

<table>
<thead>
<tr>
<th>Year</th>
<th>Combined Assets</th>
<th>Buildings and Contents</th>
<th>Student bodies and Students</th>
<th>Tuition Fees</th>
<th>Campuses</th>
<th>Gifts, Donations, and Endowments</th>
<th>Student bodies</th>
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<tr>
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<td>$1,168,000.00</td>
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<td>165,000.00</td>
<td>500</td>
</tr>
</tbody>
</table>

(Continued on page 4)
Surgical Procedures for Hallux Valgus

CASE 1, Series I. (Complete case history not outlined. Only findings pertinent to the surgical procedure will be cited.)

PATIENT: Female. Age: 66 years.

CHIEF COMPLAINT: Severe pain in both feet with radiation from toes to the joints, severe disability, difficulty in getting about, and history of previous surgery.

HISTORY OF PRESENT CONDITION: Denies any history of childhood.

Yea r s, r e aching will b e cited. (This patient has been under observation for the past 31 years, reaching its maximum during the past 2 years.)

PHYSICAL EXAMINATION: Hallux valgus presents in a case of both great toes which are encroaching on the other foot with slight deformity in the area of the metatarsal-phalangeal articulation and as well as the planter surface.

RADIOGRAPHIC STUDY: Routine examination of both feet in both anatomical planes reveals marked bilateral hallux valgus deformity, tenderness toward enlargement of the first metatarsal-bone articulations, and in the distal end of the proximal interphalangeal joint.

Considerable deformity is noted in both fibulae and left metatarsus, with hallux valgus, with metatarsal-phalangeal articulation.

The patient submitted to surgical correction of deformity.

PROCEDURE: A longitudinal incision was made over the medial side of the first metatarsophalangeal joint. This incision was then extended from the dorsal interphalangeal articulation back to the base of the great toe. A thin layer of tissue was then made through the skin. The muscle fibers of the foot were then retracted with forceps. The joint was flexed by the second metatarsal bone and the patient was discharged from the hospital two weeks from date of admission.

Two principal types of hallux valgus are distinguished, that is, dislocation of the joint capsule induced by impaction which results in the fragments of the capsule on the lateral side of the joint has been partially displaced. Another type is the arthritic type in which there is deformity.

Authority states that pain present in the toe and the joint is due to involvement of the interosseous nerve and thus compression of the interosseous nerve. The term used is "interosseous neuritis." The nerve is not actually destroyed but is irritated to a point where it becomes irritable and cause reflex irritation.

The term "hallux valgus" is derived from the Latin "Hallux" meaning great toe and "Valgus" meaning outward.

"GROSS FINDINGS: Head of metatarsal synovium. Burr excised with filar knife. Dissection of arthritic deformity of the metatarsophalangeal articulation and spongy, Exostoses on medial side of the joint and the proximal end of the first metatarsal bone."

"RADIOGRAPHIC EXAMINATION: Roentgen examination after surgical intervention: Revealed that the great toe plantar shows a decrease in the width of the first metatarsal-bone present with removal of vanishing structure from the distal end of the first metatarsal bone, together with removal of the first and second metatarsal bones from the first metatarsal toes. There is definite correction of the deformity noted in the previous study, and improved articular relationships is noted at this time through the first metatarsophalangeal structure."

"SPRAINED ANKLES As Related to General Health"

By Dr. GEORGE S. KOSHEVY

Professor of Topographic Anatomy and

Gastroenterology.

When affected, a sprain of the ankle may be due to a direct injury or may be caused by the effect they may have on other structures in the toes, legs, handg and foot. As well as in the toes, the ankle joint is made up of three bones, the two big bones and a bony promontory at the back of the ankle. Lower extremity injuries are quite common in children, and the ankle joint is permitted the motion of bending the foot upward and downward on the leg. The joint that permits a side bending at the ankle is not only in the ankle, but is the joint that is involved most when the ankle is in a position between two large hours of the leg and provides for almost all of the use involved in the ankle area.

The two bones that make up this joint are held in relation to each other by a strong fan-shaped ligament (the deltoid) on the inside of the joint, which has three strong bands on the outside of the joint and the fibula and tibia. When the ankle joint is strained, there is a tearing of these ligaments, which in turn is caused by a strain of the muscles on the foot. The joint of the foot is sprain and sprains of the ankle are as a rule more common than sprains of the toes.

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"THE CASE OF THE MONTH"

OSTEOPATHIC HOSPITAL CASES OF INTEREST

This is the Fifth of a Series of Cases the Digest Will Publish

CASE V, Series I. (Complete case history not outlined. Only findings pertinent to the surgical procedure will be cited.)

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**Osteopathic Digest**

**The College Plan of Osteopathic Education**

(Continued from Page 2) probable benefit that can be derived from the method proposed will be calculated. In the estimate the institution will endeavor to make its college and of the institution in general as well as the various colleges and of the various departments within the college. The estimate will be based on the assumption that the institution is prepared to make a substantial investment in the college and that the institution will be able to provide adequate facilities and personnel to support the college.

In conclusion, the institution is committed to the development of a comprehensive and integrated plan of osteopathic education. This plan will be designed to provide the best possible education for the osteopathic profession and to promote the well-being of the public. The institution is committed to the principle that osteopathic education should be an essential component of the health care system and should be available to all who seek it.