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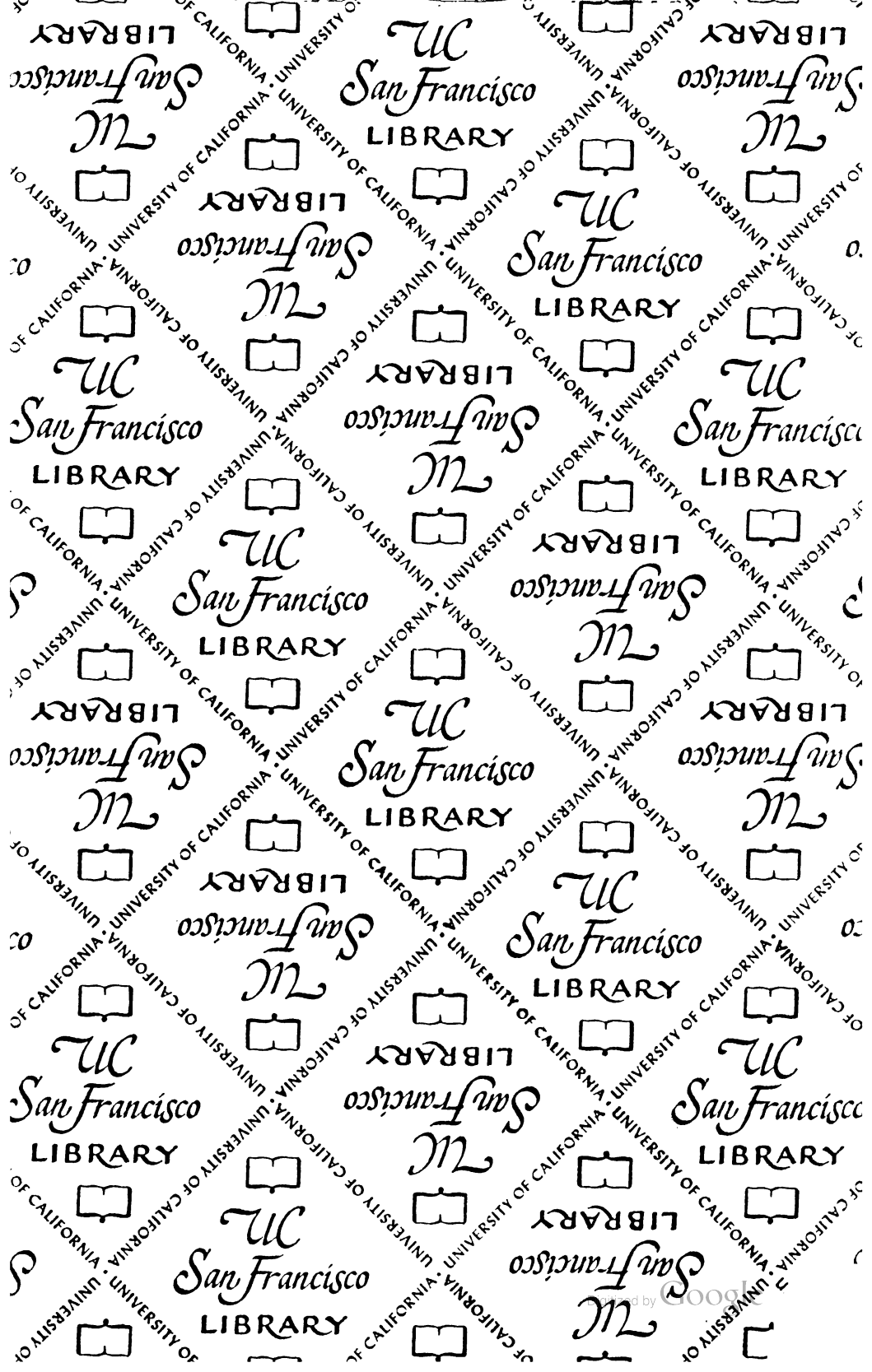
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THE WESTERN OSTEOPATH

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No. 2

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- 1.—21 persons are accidentally injured every minute.
- 2.—1 person is accidentally killed every 5 minutes.
- 3.—Five times as many are killed or injured as die from natural causes.
- 4.—Ninety-nine persons are disabled by accident or illness to everyone that dies.
- 5.—One of every 10 deaths is due to accident.
- 6.—The chance that every person will meet with some disabling injury is 11 times greater than the chance of death from any and all causes.
- 7.—Most people carry protection against fire. Did you know the chance of accident resulting in the loss of life, limb, sight, or time is 113 times greater?

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Message from A. O. A. President, Dr. H. M. Conklin.



I am full of the spirit of the Chicago Convention; 'twas a wonderful meeting. Last year's achievements on the part of the Osteopathic profession were finer, more decided, more definite than in any one year before in the history of the profession. Partly in consequence of that fact and partly because of a happy combination of circumstances and arrangements, this year's Convention was the finest we have ever known. And that is quite as it should be. Each year should see a greater edifice erected upon the foundation of the previous year's work.

The attendance at Chicago was greater by a very considerable degree than ever before; that in itself was sufficient to breed enthusiasm, and that enthusiasm was fed by a most stimulating interchange of

ideas—ideas based upon sound thinking and backed by practice.

A notable record of professional achievement was placed before the A. O. A. by the men and women who delivered addresses and gave demonstrations, and also by the other members of the profession who in little groups of four or five discussed their work, their successes, their failures, their ideals and expectations. 'Twas inspiring; 'twas a wonderful meeting!

California sent some of her best physicians, but not nearly so many as I should have liked to see.

Indications are that this coming year will be the *great* year for Osteopathy, that we will in this year show results and continue development upon our preceding work in a measure greatly exceeding any year in the past. Consequently we will have more to give at next year's Convention. Can't you begin now to make your plans for attendance next year? Can't you think now of the special message which *you* have for the members of the A. O. A.? Can't you see where a closer fellowship with the A. O. A. will benefit you? Lay your plans now to bring a special train from the Pacific Coast to Chicago next June. The Convention of American Osteopaths needs *you* and the inspiration to be derived from what you've accomplished and will accomplish this next year for humanity through Osteopathy.

Come in *heavy* at the next Convention, as befits the splendid body of men and women who represent our profession on the Coast.

The results of last year's work in treating influenza and pneumonia alone show a most notable saving of human life. It makes, by contrast, the death record under the old school of treatment loom up in appalling fashion, and makes the more urgent the need of securing such recognition that our services may be given to the army and the navy. It makes apparent, also, this need for a more extended, a fuller campaign of educating the public to the fact that *we are physicians*, and not merely practitioners of a system of healing applicable only to gross displacements.

We need, furthermore, to build scientifically upon our previous years' work; we must perfect results. We need also to keep accurate records of our work in order that the results of our work may become available to those who may be able to edit our Osteopathic literature. There is a painful meagerness of worth while dignified Osteopathic literature and authentic texts, which shortage can be rectified not by inspiration, but only by tireless, accurate observation and recording of facts, and the generous contribution of those facts wherever and whenever they can be used for the furtherance of our science. The A. O. A. gives to each member opportunity for interchange; in one of its many capacities it serves as a clearing house. It is made up of *live* physicians. The organization as a whole and in its individual parts gives as well as takes. The adoption of the new constitution and by-laws at the last Convention gives us an adequate modern working system. Promote this progressive step by ratifying them in your State meeting, as provided for in the by-laws, and then help boost for the A. O. A. If you know physicians who are not members, bring them in, both for their own good and for the sake of our united value as an organization.

Foci of Infection in Relationship to Systemic Disease.

Charles C. Petheram, D. O., M. D.,
Portland, Oregon.

It would be impossible to adequately deal in detail with the subject of focal infection in a single, brief paper, and so it will be the purpose of this paper to consider only the more essential points of the subject.

The conception of general disease as caused by local infection is as old as medical science. During the earliest days of medical knowledge many general diseases were recognized as being due to trivial, accidental and surgical wounds. That was long before the development of bacteriology, and so the manner in which these local wounds produced the general disease was not definitely known; but it was thought to be due to a contamination of the wound with a substance which spread in some manner to all parts of the body, producing the chills, fever and general debility. Many years ago Dr. Semmelweis of Vienna proved that child bed fever was the result of a local or focal infection in which the uterus, contaminated by unclean hands of the midwife or physician, acted as the primary focus, from which a general septicemia occurred. As early

as 1885 Dr. Chapin, a physician of New York City, noted the relationship between acute tonsillitis and rheumatism, and said that they occurred frequently enough together to suggest the possibility of some connection other than mere coincidence. About the same time Dr. W. D. Miller of Berlin made his comprehensive study of the bacterial flora of the mouth and showed that septic conditions of that region caused constitutional diseases. The medical profession as a whole were slow in accepting these ideas, and it has been only during the past eight or ten years that the clinicians, pathologists and bacteriologists have accumulated such convincing evidence that few skeptics remain.

It has been largely through the splendid work of Dr. Rosenow of the Mayo clinic and Dr. Billings of the University of Chicago clinic that the profession has been convinced. At these clinics real clinical research work has been done. Living diseased tissue was obtained at surgical operations and also from patients who voluntarily submitted to have bits of infected tissue removed for experimental purposes. Histologic and bacteriologic studies of this material were made; thousands of animals were inoculated with the material and the resulting lesions studied in the animal and compared with diseased human tissue.

One of the very interesting and important discoveries made by these men was the characteristic of transmutability in bacteria; *i. e.*, bacteria are changed, not only in morphology, culture characteristics and biologic reactions, but also in their virulency or pathogenicity by alterations in their environment, such as exposure to oxygen, temperature, etc. This characteristic was discovered by growing bacteria on culture media, in which the oxygen content was increased and decreased, the hypotonisity and temperature varied, and serial animal inoculations made. This phenomenon explains why an organism may lie dormant in a tonsillar crypt or alveolar pus pocket for years, apparently causing no trouble, and suddenly, because of change in temperature through exposure to cold or decrease in supply of oxygen, the latent organism is transformed into a strain of higher virulency, invades the host and produces a severe rheumatism, endocarditis, nephritis, appendicitis or some other general infection. It also explains why a submerged tonsil, with its sealed crypts, excluding a supply of oxygen, is more dangerous than a protruding discrete tonsil whose crypts are possibly open and draining.

Another very important characteristic discovered by these men was that bacteria may develop an elective tissue affinity, or specificity. Not only may there be a variation in general virulence, but Rosenow found by his animal experimentation that a germ may be much more virulent for one particular tissue than for another; *i. e.*, a certain strain of streptococci may have a special affinity for the serous membranes of the joints; another strain for the serous membrane lining, the heart; another, a special affinity for kidney tissue; another, for the epithelium of the stomach. This special affinity it was found could be experimentally developed in a strain of bacteria. The ordinary streptococcus pyogenes, which has no special preference for kidney tissue, by culturing it in kidney extract for a few generations was converted into a strain, which when injected intravenously into a rabbit invariably

selected out the renal tissue of the rabbit and produced pathology there. These organisms would again lose their special virulence for the kidney when cultured for a time on bouillon. Again, grown on kidney extract, they would regain their special virulence for the kidney. Rosenow's experiments have shown that bacteria may acquire this elective tissue affinity within either primary or secondary foci in the host. Pathogenic bacteria isolated from a diseased appendix of a patient at an operation when injected into an animal would, in a large percentage of cases, select out the appendix of the animal, as shown by post mortem examination. If the organism was isolated from the joint exudate of a patient suffering from rheumatism, the animal, upon inoculation, invariably showed pathology in its joints. This same elective affinity was noticeable in organisms isolated from other tissues, such as gall bladder, kidneys, gastric mucosa, thyroid gland, etc. When cultures were taken from the supposed primary focus the same phenomenon was noted, but was less marked. In a case of acute articular rheumatism, if the tonsils were the focus of infection causing the rheumatism, culture taken from that source in a large percentage of cases produced pathology in the joints of the animals.

The enormous number of these painstaking experiments and the rational deductions made from them, are convincing evidence as to the etiological relationship between focal infection and systemic disease. The natural defences of the body, due to the bacteriocidal and antitoxic powers of the tissues, and blood plasma, do protect many of us from a general infection, but this immunity is never absolute. Pasteur found that the chicken is ordinarily immune to anthrax, but lower the resistance of the fowl by immersion in cold water and it at once becomes susceptible to the disease. So it is with our patients. Lower their resistance by physical or mental exhaustion, exposure to cold, starvation, debility from alcoholic indiscretion or some constitutional disease and latent pathogenic germ which have been harbored in a tonsillar crypt, diseased tooth, or other focus, suddenly invades the body through the blood stream or lymphatics and produces a septicemia, rheumatism, endocarditis or some other disease.

Dr. Billings of Chicago defines a focus of infection as "a circumscribed area of tissue, infected with pathogenic micro-organisms." Foci of infection are divided into two classes, primary and secondary. The primary are those situated in tissues that communicate with mucous or cutaneous surfaces and generally are the portals of entrance for pathogenic organisms into the body. Secondary foci, as the name implies, are those tissues secondarily infected from the primary foci.

Primary foci of infection may be located anywhere in the body, but the most frequent sites are the faucial tonsil, adenoids, teeth, nasal accessory sinuses and mastoid cells. Deland says the teeth are the most frequent site, while Dr. Joseph Beck of Chicago believes foci of infection are more often found in the tonsil than all the other organs put together. I am of the opinion that the faucial tonsil, because of their favorable location and gross and histologic anatomy, are the greatest offenders. Infected tonsils and adenoids yield cultures of staphylococci, streptococci, pneumococci, Vincent's spirilla and other bacteria. Recent investiga-

tions at the Cook County Hospital in Chicago and the Walter Reed General Hospital of the Army at Washington, D. C., point to the tonsil as the principal focus for the streptococcus hemolyticus, that virulent organism, causing so many deaths at the army cantonments. Cultures taken from the tonsil crypts of patients suffering from such an infection invariably contain the streptococcus hemolyticus; while cultures taken from the throats of large numbers of soldiers after extirpation of their tonsils prove these bacteria to be decidedly less frequent.

Remember, that a septic tonsil may be normal in size or even atrophied and show no external signs of disease on inspection. A physician may look into the throat, and because the tonsils are small and not inflamed, conclude that they cannot be the source of trouble. But Dr. Mayo says the dangerous tonsil is often the small tonsil, showing no effects of local inflammation. Of especial danger are the stumps of tonsils, the remains of the tonsillotomy operation or incomplete tonsillectomies with their sealed over crypts. A very careful investigation of the tonsil must be made in every case. A chronically infected tonsil generally produces a slight redness of the surrounding parts, plica tonsillaris, and anterior and posterior pillars. With the end of the tongue depressor press against the anterior pillar, and often from a diseased tonsil liquid, pus or cheesy infectious lumps may be expressed from the tonsillar crypts. If this procedure fails to show evidence of disease, with a curved cotton tipped applicator investigate the bottom of the crypts for infectious material. Even with the most careful investigation infective foci may be overlooked, and so, unfortunately, in a very few cases, it will be impossible to say positively that the tonsils are or are not the cause of the trouble.

Until recently the importance of pyorrhea dentalis and alveolar abscess as an etiologic factor in systemic infection has not been recognized. Disease of the teeth often exists without manifestation and discomfort to the patient and therefore often escapes the attention of physicians and dentists. In such cases the true condition can only be detected by X-ray films, properly made and interpreted. We now know an alveolar abscess, an absorbed root or absorbed bone, may be the direct cause of endocarditis, myocarditis, nephritis, rheumatism and many other general infections. Beware of the tooth with a crown. Some one has said, "A crowned tooth is not a crown of glory and may cover a multitude of germs." Whenever a systemic infection is suspected a thorough examination of the teeth should be made with the aid of the X-ray and dentist.

(continued in future issue)

The Moving of Patients.

William Horace Ivie, D. O., M. D.,
Berkeley, Calif.

Having considered the patient's bed and related matters, suppose we now turn our attention to the methods of moving the patient while confined to bed. Too frequently the patient is moved with the hands alone and not with the help of the head, main strength being depended on entirely instead of the case being studied that he may be moved

with the least pain, discomfort and exertion on his part and in a manner that will be easiest on the physician or nurse, and that will enable them to lift with the least exertion and the best advantage. Study the location of your own strength and the special problem of immobilization presented. Consider these matters yourself and stimulate definite thought along these lines in your nurses, not only that your patients may profit, but that your nurses, by finding the easiest way, may protect themselves as much as possible from pelvic and other complaints so common in nurses after long service. On inquiry, you would be surprised to find how few of the trained nurses have received any extensive instruction in the technique of moving patients.

The Osteopath, and especially the woman Osteopath, should be as proficient as possible in these matters. To that end the following technique is recommended for consideration. In all manipulations, even turning, be sure to support the patient well, as nothing is more disconcerting than the fear of being allowed to fall or that a painful part may slip and be hurt. Never begin to move him until everybody concerned is ready. The patient must be ready to either thoroughly relax or to help, as has been previously determined. You should be thoroughly set and prepared to move him with the fewest movements. A narrow bed allows of all heavy manipulations being made comparatively near the edge of the bed, where they are easier to accomplish. In general, use the draw sheet where ever it will accomplish your purpose; its use usually substitutes a pull for a lift. In any movement of the patient, if possible, brace your knees or legs firmly against the bed. This will give you valuable leverage. If you have to lift the patient slip your hands as far under him as possible so that his weight comes as close as possible to your elbows. Lifting with the hands alone takes much more strength.

Likewise, choose, if possible, the side of the bed which will allow you to use your strongest arm to the best advantage to carry the greatest weight, etc.

Remember, in practically all manipulations the knees, if possible for the case, should be flexed, with the feet placed firmly on the bed, as otherwise the full length of the legs will drag and be a dead weight, and, besides, almost all patients can help a little by pushing the feet down against the bed. This is possibly the big point in easy movement, so remember it.

No matter what the case is, thought and care will move him to the best advantage. There are some two-man problems, so no matter how proficient you may become, do not be tempted to hurt yourself in too difficult cases.

If the patient is to be moved over in bed this can usually be accomplished by loosening the draw sheet and using it to pull him over. If there is no draw sheet, move first the upper part and then the lower part of his body over, considering in the moving all the items just mentioned.

If you are to turn a patient on the side the following will be found an easy way and one of special value where twisting of the patient's body is contra-indicated from any cause (abdominal incision,

etc.). Stand at the side of the bed to which the patient is to be turned. Get the patient's arms out of the way by folding them on his chest, flex his knees well and place the ankle of the leg farthest from you over the ankle nearest you. This "fixes" the farther leg and prevents it "hanging back." The patient is now lying on his back with his knees flexed and his ankles crossed. Take hold of the knee and shoulder farthest from you and pull him toward you. He will roll easily and with no twist or strain on the sides of the abdomen or other parts of the body. To complete the turning and make the patient comfortable give the hips a further slightly increased turn by reaching over and grasping the draw sheet (loosened on your side) close to the buttocks, giving it a pull upward and slightly from under him, or by doing the same with the night shirt if made of strong material. This can also be done by slipping one hand under and placing one hand on top of the hips and pulling them into position.

Many patients, especially the unconscious, have difficulty in remaining on the side even with this extra twist and constantly tend to roll over on the back. They can be anchored very effectually on the side by turning them sufficiently at the hips that the upper leg, both being flexed but the upper one the most, is crossed over the under one above the knee and lies on the bed in front of it. If the legs or knees are sensitive a pillow can be placed between them.

Frequently the head will be more comfortable when the patient is lying on the side if the pillow is pulled slightly downward in front. Placing it on a slant seems to make it fit the neck better. Finish by tucking the covers well down behind the back, or, if necessary to give the back more support, tuck in a pillow.

If the room is not so cold as to prevent turning the covers down off the patient, it is a comparatively easy matter to turn the patient from one side to the other with only one movement. If you remember to flex the knees and arrange the ankles and to cross the arms on the chest before beginning. The pillow should be under the head only, for any portion of it being under the shoulders will interfere. This is the position and movement to be used in changing the under linen.

Other problems in moving patients will be considered next month.

Convention Echoes.

Arthur T. Seymour, D. O.,
311 Elks' Building, Stockton, Calif.

Well, boys and girls, the Eighteenth Annual Convention of the California Osteopathic Association was a *real* convention—no fooling.

At the public lecture, held on Monday evening at the Gamut Club, Dr. Tasker very ably presented the truths of Osteopathy as grown on the Tree of Knowledge, and contrasted them with the fallacies of the M. D.'s as produced by the Tree of Ignorance. The Tree of Ignorance having been of much longer growth, was, of course, larger and stronger, but its branches were constantly being decimated as one fallacy after another was cast into the discard; while the Tree of Knowledge was waxing vigorous under the stimulating warmth of the truths of Osteopathy, first promulgated by Andrew Taylor Still and elaborated by his disciples

in the profession. Dr. Tasker drew attention to the one time idea of the curative powers of medicine, followed later by an increasing tendency to discard them one by one—the catching at new straws as evidenced by the exploitation of unproven serums and vaccines—and wound up by comparing the present day volumes of Preventative Medicine and Curative Medicine, the former being a volume of some 1000 or more pages, while curative medicine was about the size of a Quiz Compend.

Dr. Gerdine budded a branch on the Tree of Knowledge, showing how Osteopathy has expanded to take in disorders of the mind, as exemplified by the Still-Hildreth Sanitarium at Macon, Mo., laying especial stress upon cases of dementia in the young, a class of cases heretofore considered as incurable by our medical brethren.

Another bud to our Tree of Knowledge was furnished by Dr. Gaddis, who showed the realm of acute disorders invaded by our science, with especial emphasis on the recent influenza epidemic and our enviable showing in this disease.

Dr. Goodfellow grew still another branch to our Tree of Knowledge by an able discourse on the relationship of apical infections in the production of sinusitis and the part of Osteopathy in treating it.

To Dr. Spencer fell the task of adding yet another limb to our Tree of Knowledge, which he very ably did by showing the part Osteopathy is playing in reconstruction work among the soldiers, sailors and even baseball players.

To our ubiquitous and genial Dr. T. J., facetiously called by one of his patients "Ever Ruddy," was allotted the task of adding yet another branch to this Tree of Knowledge, which he did in his usual inimitable way by a lecture of more than usual interest, illustrating with stereopticon views on hay fever. With consummate skill he guided us through the maze of Daisy Fleabane, Rag Weed, Golden Rod, Grain Pollen, dandruff and odors emanating from animals, and showed conclusively how impossible it was for them to cause hay fever. The pollens are carried by insects and insects do not inhabit nor invade the nose—animal dandruff certainly does not invade it, but the odors could—but they are not capable in themselves of producing hay fever. He did show, however, that lesions of the upper dorsal and cervical regions interfering with the normal nerve and blood supply to the head region, particularly those that influenced the normality of the mucous membrane of the nose, causing thereby a turgescence, could be causative factors. Deflected septa, enlarged turbinates, spurs, polyps and other deformities all had their bearing and acted as ticklers to the patient; in this instance the ticklee producing the ticklish. Removal of these lesions—three-finger treatment in nose and throat, correction of nasal deformities and presto—vanished is hay fever.

The various topics on the program were of unusual interest and invited for the most part spirited discussions, particularly "Influenza."

We must not forget the Baby Clinic on Wednesday afternoon, under the able generalship of "our Gwladys." Dr. Morgan was, indeed, a busy lady, and to her untiring efforts we owe much to the success of our campaign for better babies. Dr. Charles Spencer examined for bone, joint

and spinal deformities; Dr. Ruddy, the eye and ear; while your humble servant elicited squalls when endeavoring to gaze into the oral cavity and nasal orifices of said infants.

The Round Table—afternoons at 5 P. M.—with three-minute talks on topics of public interest, conducted by Dr. Ruddy, was an innovation well worthy of repetition. Some pithy instructive talks were had and much of value to us all resulted. Altogether, there were in the neighborhood of seventy-five speakers listed for the Round Table. Here's hoping it will be repeated next year.

The clinical features and arrangements for carrying on post-graduate classes and opportunity of viewing and in many cases assisting at operations, could not well be improved on. Hospital operations were scheduled for as early as 7 A. M., enabling all to attend classes by 8 or at latest 9 A. M.

The Eye, Ear, Nose and Throat Clinic at the College is fine, and great credit is due those in charge. It is conducted on the office plan. Each intern examines his own cases, while Dr. Ruddy checks over the diagnosis. Then each intern treats his own cases and operates on them if need be, under the direct supervision of Dr. Ruddy. I am informed reliably that in no other clinic conducted for this class of work is the opportunity given for the intern student to do the actual work in the operative field himself. The College of Osteopathic Physicians and Surgeons then must be given the credit of conducting the best Eye, Ear, Nose and Throat Clinic in the country. This is on a par with the high standard maintained by the college in all departments.

The noon luncheons, with each State chairman meeting with his committee to discuss and formulate plans for the new year's work, was very successful and gave us all a chance to get better acquainted with our co-workers.

We must not forget our Publicity Committee and the magnificent work accomplished. As you all know, Dr. Ruddy was chairman; over 200 letters were sent daily to newspapers throughout the State; over 200 newspapers came daily to the convention. The wires of the Associated and United Press carried news of our convention doings. Feature articles, with photographs, appeared in the leading Los Angeles dailies. The baby clinic attracting particular attention, with a large picture of Dr. Gaddis' little Miss at the top; in the middle, Dr. Charles Spencer with Margaret Jean, while below Dr. Gwladys Morgan was shown measuring a youngster for a proud young mother. Gaumont and Pathe motion picture concerns took films of our barbecue picnic and auto parade, to be shown on screens the country over, and, by the way, that barbecue was some feed all right; there were no barbs to it, but we all took the cue when the bell rang and there weren't no core left, either. The evening was spent in dancing and all had a joyous frolic.

Never before in the history of the Association has there been a more enjoyable banquet than was held Friday evening at the Hotel Maryland, Pasadena, and never before has there been more unity on the part of the Osteopathic profession. Speaker Wright and Assemblymen Merriam and Miller were there, and each gave a talk in his

own inimitable way. Dr. Vanderburgh, our new President, certainly panned certain types of legislators that were sent to Sacramento to frame our laws and made a plea for a higher and more intelligent grade of men to be sent hereafter from certain sections of the State, with particular emphasis on the bay region. He concluded by stating that the referendum was to be invoked on Pharmacy Bill 604 and complimented the Governor as only he can.

The Western Osteopathic Association, comprising the States of California, Oregon, Washington and Idaho—was formed, and it is hoped much benefit will come from this Association.

To Dr. Whitehouse is due much credit for his tireless effort and valuable assistance in helping Dr. Spencer effect the fine organization the State Association now enjoys and aiding in the formation of a new constitution and by-laws.

To Dr. Charles H. Spencer, the best President we ever had and a fighter—more power to him—is due praise without stint for the masterful way in which problems, probably the most difficult the Association has yet encountered, have been met and mastered. Our Legislative record is enviable; we succeeded in getting passed by the Legislature practically all we went after, and had we not been thrown down so unscrupulously by Governor Stephens, who vetoed Osteopathic Bill 933, and then stabbed us by signing Pharmacy Bill 604, we would have had nothing but rejoicing; as it is our defences have been battered by the enemy, but not captured, and we are going to turn loose our big guns, capture the referendum for 604, and rout the enemy.

Let me say again, this was the best convention ever held and the most unified. This was a real, live convention and those of you who weren't there missed more than you can know.

Some Impressions of the Twenty-third Annual Convention of the A. O. A., Chicago.

Dr. W. V. Goodfellow.

Chicago was not so hot as it sometimes is, and this fact contributed very materially to the success of the convention. Held in one of the older hotels, with not enough space for the large attendance, the sessions would have been unbearable had the weather not been fairly comfortable. Because of the large attendance and the manifest interest in all of the proceedings, the Louis XVI room was not large enough, so the Crystal room was opened by several double doors and both rooms were packed to the doors at all sessions. The arrangement of the program was ideal. Surgical clinics were held early in the morning, from seven-thirty to nine. The general sessions began at ten every morning and continued until 1 P. M. No sections or clinics were held at this time. At 2 P. M. all sections held their sessions. Some conducted clinics and others had a set program. This divided the large attendance into audiences of good size for effective work. This plan of program should be followed in the future.

This was a progressive convention. This was clearly demonstrated by the result of the election of President for next year. Dr. Asa Willard of Montana, "ultra-conservative," was the choice of the nominating com-

mittee, but received only one hundred and fifty votes, approximately, out of six hundred votes cast. The attendance upon surgical and ear, nose and throat clinics attested to the desire of the average Osteopath to be a good diagnostician.

A new constitution and by-laws was adopted. This provides for a house of delegates, composed of representatives from each State, the number to depend upon the A. O. A. membership in the State. This house of delegates will number about seventy-two and will have the function of attending to the legislative matters of the profession, including the election of officers. This last function was bitterly assailed before the adoption of the constitution by those favoring an election of officers by the convention assembled. This house of delegates, however, will be more representative of the entire profession than any session of the annual convention can possibly be. The locality immediately adjacent to the place where the convention is assembled has always had a predominance of voting power. This year California, with over five hundred Osteopaths, had only about ten votes. Under the new constitution California would have equal voting power with the States immediately adjacent to the meeting place.

Another interesting feature of the new constitution is the provision that no one can renew his membership without being first a member of his own State Association. The State associations become division societies of the National Organization.

Altogether, this convention was notable for the amount of work, both professional and business, that was put through. Sessions were called promptly and business was transacted expeditiously. The officers and trustees are to be commended for their industry and devotion to duty.

Case Report No. 2612.

Dr. Ed. S. Merrill.

Male, aged 30, not married, with common school education; a returned soldier; was admitted July 3, 1919.

Family History.—Paternal grandmother died in the London, Ontario Asylum. The patient's father was irritable and bad disposition. Mother, now 65, is neurotic and has been confined to Eloise for the last 17 years. Siblings: Five other children, four of whom are well and normal, and one sister is neurotic.

Make-Up.—Negative until adolescence, when he became irritable, seclusive, reading books which gave information especially along mechanical lines, and was hard to discipline. He would stay long in one position.

Personal History.—Gestation and birth, negative. No history of injury or severe illnesses. He went to the sixth or seventh grade in school.

Present Trouble.—The patient is reported to have had two Neisser infections eight years ago. He was drafted April 26, 1918, and sent to Camp Custer. After a period of training he was sent overseas. He is supposed to have had malaria and was taken to a naval hospital, where

he remained as a bed patient for a while, and then was allowed to be up and helped around the institution. He was sent back to this country to Fort Sheridan in February, 1919, and discharged from Camp Custer, March 3, 1919. Immediately after his discharge he went to his brother's home in Detroit. He then lost bladder control and thought he was sick. He went to a private physician in Detroit and the latter part of March went to a marine hospital under the auspices of the Home Service of the Red Cross. While there the patient began to have somatic complaints, stating that his bladder was the size of a walnut and that his urine was retained. He was worried. He complained about not having proper treatment. He was then taken to Harper Hospital, where somatic delusions were further elaborated. The patient had a towel tied around his chest and said that water was flowing from the bladder; that a man used a towel from which he got infected. He became dissatisfied with the treatment and asked for gonococcus serum. He had bladder irrigations after he left the hospital. He was restless, paced the floor, complained of insomnia, confused, voracious appetite, forgetting that he had had meals earlier in the day; refused to see his doctor because he said doctors would say he had venereal disease, and all the doctors in the David Whitney Building knew his trouble. On May 26 he went to Battle Creek for treatment. His delusions continued. He refused at times to take exercises or baths, was restless, taking his own pulse; had delusions about his food being poisoned and that treatment was experimental work, anyway. Two weeks ago the patient made application to the War Risk Insurance Bureau, but was brought to the hospital as a private patient.

Course Here.—Physical examination is negative, except for bad tonsils, some skin eruption and bad dentition.

Neurological examination shows dilated pupils, but reaction normal. Cremasteric reflex was not elicited.

Laboratory examinations on June 13, 1919, at Battle Creek showed a white count of 12,300, but examination here shows 8,500.

Mental Status.—*Appearance, Behavior, Attitude and Emotional State.*—He is somewhat restless, mildly excited, refusing to sit when asked before the staff. Excessive emotional depression.

Motor Condition.—Restlessness of apprehension.

Speech.—Tendency toward explosiveness.

Stream of Thought.—Flows well for a short time after questioning, but he loses the goal idea and becomes irrelevant somewhat circumstantial.

Content of Thought.—Somatic delusions, elaborated and taking in the whole environment; some hallucinations.

Orientation.—Oriented correctly in three spheres.

Memory and Thinking.—School knowledge is well retained. Recent events are well retained. Thinking is difficult. He refuses to solve problems after a certain time. He lacks concentration.

Intellectual Level.—He has occupied as good a place as could be expected for the education he has, but had dropped from that before he went into the service.

Narrative.—The patient was well, so far as can be obtained, until he had malaria on the way to Brest. He was in the hospital there, but he does not give a clear account of why he did not go again into active

service, but after a short period in the hospital he was allowed to do ground work there, but never returned to the front. He went from one hospital to another, until in February he was sent to Fort Sheridan and then to Camp Custer for discharge, on March 3. Immediately after this he developed somatic delusions as a result of a Neisser infection eight years ago. He went to private doctors, and was in the Marine Hospital where he developed marked somatic delusions of gonorrhoea and pus. He was taken to Battle Creek for treatment, part of which he refused because "there was no sense in it, as he was going to die, anyway." Shortly after that he made application to the Bureau of War Risk Insurance with the Red Cross, but was brought here as a private patient.

Insight.—None.

Ward Notes.—Practically no change in his condition since he came in.

Diagnosis.—This patient has some of the symptoms of mania depressive in that he has delusions, depression and what might be interpreted for pressure of activity, but he is correctly oriented. His flow of thought tends to stop short and does not run out like mania depressive, depressed phase. Content of thought is irrelevant, but is not like a flight of ideas and motor reactions are more like the restlessness of anxiety.

Psychoneurosis might be considered, but the symptoms are not grafted upon him from the outside, and the disturbed mental and intellectual field is not like that of a psychoneurotic. He has not the vasomotor symptom complex of disturbance of the sympathetics common to the psychoneurotics.

Dementia praecox must be considered, for he has in the delusions of gonorrhoea and pus the complete splitting off from the reality, giving schizophrenic reactions. He drifts away from the topic under discussion and difficulty in interest and concentration. His judgment is poor and he has hypochondriacal complaints. Memory and orientation are good. He has a blocking, rather than a retardation, noted by repeating each question after the examiner. His content of thought is delusional, of somatic variety. He has shown ideas of reference both regarding his sister and foreman, who "had it in for him" (delusions regarding the bearings of the trucks of the Hudson motor factory). The question of hallucination is brought up by the peculiar fears he had regarding the food served him at Battle Creek and regarding the brother being in his room and refusing to speak to him. Mental deterioration is shown by the patient not earning as much in 1918 as he did in 1917. He has no insight into his condition.

The case is presented in conference with the diagnosis: Dementia Praecox, paranoid type.

Heel Taps Off.

(Continued from January Issue.)

Dr. T. C. Morris.

The article entitled "Heel Taps Off," published in the January number of the WESTERN OSTEOPATH, was hurriedly written on account of the "flu" situation. On reading it as published it became evident

that the portion relating to the technique was incomplete and lacking in detail. In order to get it on a working basis, it has seemed best to rewrite that portion of the article.

I. (a) In correcting a left innominate which is downward and forward, which gives an apparent lengthening of the leg (I find more hip lesions of this description than any other), flex the leg upon the thigh and the thigh upon the abdomen. Rotate it outward sufficiently to avoid striking the abdomen or ribs in making the final correction. With the left hand hold the patient's right thigh firmly down on the table. With the right hand on the flexed knee, press downward and toward the axilla, until you have all the slack taken out—then with a quick sharp movement in the same direction make the final correction.

A still more forceful method of giving this movement, is to make the pressure and final thrust on the flexed knee with the body, while the right hand reaches over the patient and grasps the opposite edge of the table.

(b) After making this correction, even though the legs are apparently the same length, it is well in order to insure the best results to stand at the foot of the table and, grasping the ankle above the joint and raising the leg to an angle of thirty or thirty-five degrees to the table, adduct and abduct it until the point of least resistance is ascertained. In the direction thus indicated drop the weight of your body backward, making a steady traction to take up the slack, and terminate it with a short, sharp pull, not permitting any intervening relaxation. The preliminary traction insures the sudden pull taking effect at the hip only—not being felt at all at the knee.

II. (a) In correcting a left innominate which is upward and backward, producing an apparent shortening of the leg, let the patient lie on the back and drop the left leg off the table. Stand on the left side of the patient. Place the right hand on the anterior superior spine of the opposite side and the left hand on the left thigh, grasping it at the level of the external and internal condyles.

Make firm and continuous pressure with both hands, combined with traction with the left hand until all the slack is taken out. Then terminate it with a sharp, quick movement in the same direction, not permitting any intervening relaxation.

Another method of correcting this same lesion is to have the patient lie face downward, putting some object, as a rolled blanket, under the thigh. Then, placing the hand on the posterior superior spine, make a quick, sharp thrust downward.

(b) After correcting this lesion a pull should be given similar to the one described to follow the anterior innominate, with the exception that the leg is not held so high, making the angle much less.

III. After correction of any innominate lesion the sore muscles of the thigh and hip should be relaxed. The Glutens medius muscle is always involved and usually the adductor muscles near the knee, and sometimes extending the entire length of the thigh. In this work, slow stretching movements, gradually working more deeply, give quicker relief and are less painful.

On the same principle as one, wishing to turn around on one foot, rises on the heel or toe to diminish the area in contact with the floor—thereby greatly facilitating the movement—so, in correcting lesions involving the upper cervical vertebrae, we prepare for the gliding of the articular surfaces, one upon the other, by a combination of alternate flexion and rotation, the latter accompanied by gentle traction.

Gynecology.

Notes from Lectures of Dr. Jennie Spencer at State Convention.

Frequent Micturition.—Examine lower lumbar region for lesions. Give five to seven minutes deep kneading of abdomen. (Be sure bladder has been emptied previous to this treatment.) Give general treatment.

Pruritis Vulva.—Examine to ascertain if sphincter is tight. Use low rectal enemata of normal salt solution.

Amenorrhea and Irregular Menstruation.—Give thorough neck treatment to insure perfect circulation to thyroid gland. Abdominal massage.

Amenorrhea after Influenza.—Patient needs general treatment and good, nourishing food. Menstruation usually established in two months or less.

(Note: Menstruation often brought on at beginning of influenza, probably from increased temperature.)

Climacteric.—Do not give treatments continually. Loosening and stretching treatment for three months. No loosening or stretching after atrophy of organ. Patient is more comfortable if uterus is backward—after atrophy—than when it is forward in the pelvis. For dizziness, give treatment to hyoid, and see that all neck muscles are relaxed.

Infantile Type of Uterus.—Common as a sequel to measles in young girls. Give general treatment for several months following an attack of measles.

Dysmenorrhea in Young Girls.—Local examination not usually necessary. Dorsal-lumbar curve often a causative factor. Differentiation between Neuralgic and Membranous Dysmenorrhea.

Neuralgic type characterized by cramp-like pain coming on with regularity at each period, sometimes beginning the day of the flow, sometimes two days before menstruation. Occasionally noted two weeks before the period, or after the flow is established, and is more like a nervous headache.

Treatment for Neuralgic Type.—Counterstimulation. Dilation of rectum and stretching of coccyx often of benefit. Thorough abdominal massage. Lift hips and give counter pressure on spine. Ice bag over symphysis pubis gives more relief than hot water bottle. Ice bag should not be used for congestive dysmenorrhea.

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Membranous dysmenorrhea is characterized by pain preceding the flow and relieved by passage of the membrane. More like labor pains until membrane is discharged.

Important points to keep in mind for every case:

1. Study environment of patient and improve it, if possible.
2. Eliminate fear and the patient's idea that she is not normal.

Give all the encouragement you can.

3. Correct every lesion and keep patient away from unnecessary surgery.

How many people coming to you do you help?

Records show nearly 95 per cent of cases treated by students in the clinic materially benefitted, and many of these have tried medical help and every other kind first.

Do not remember your failures, but your comparison of failures.

Medical Literature

The Humbug in Modern Periodicals.

Dr. C. B. Rowlingson.

Under the above title *Pharmacial Advance* reprints an article from the *Western Medical Times* by Jos. van Becelaere, M. D., LL.B., and containing some delicious satire, of which the following is a sample:

"To tell the truth, modern medical writing has undoubtedly degenerated of late, and some of our leading publications are so replete with "forty letter" words and speculations on the problematic influence of amido-azo-benzene-azo-beta-naphthol-di-sulphonate of sodium on the posterior aspect of Spiegel's lobule; the katalytic effect of patriotic emotionalism on the preponderance of tarsoptosis, or the effect of luteosis striatogenica on psychropodia (vulgo: "ring-tailed yellow streak in the causation of cold feet"), that the average reader, awed into speechless wonderment, either collapses with mental adynamia or again—if decided to contribute in his feeble measure to choking off the "scientific (?) camouflage"—writes in to the editor and stops his subscription.

"Less than twenty years ago, before this plague of "pseudognosis" infested medical literature, one could, after a hard day's work, take up 'his journal,' seek the homely, comfortable armchair in the ingle-nook, light a plebeian pipe or eke a 'high-toned' cigar and plunge into professional reading with the positive assurance of meeting congenial minds on familiar subjects: the most approved method of coping with pneumonia; how to prevent or cure summer-complaint, or perhaps a technical wrinkle of use in reducing a dislocated shoulder.

"Nowadays all we are liable to find is a dozen pages of small-type statistics on the number of pseudo-eosinophylic leucocytes discovered at the 'Wonder Hospital' by Dr. Heavymind in three hundred cases of impacted clavus at the left middle toe, with fluctuations in said blood-count incident upon 'plus' variations of barometric pressure in presence of zirconium subacetate in the nascent state, the whole illustrated with isothermal curves, microphotographs of the 'bugs,' and a half tone of Case No. 47, a brother-in-law of the genial writer.

"Next comes a statistical study of surgical cases at the 'Short-Cut-to-Heaven Sanitarium,' by Dr. Baldpate, with electro-thermic tracings and sociologic diagrams, from which it appears that out of 157 cases of

tegumentary contusion at the middle of the tibia, 152 were complicated with periosteal congestion, as demonstrated by the X-ray (at \$10 per demonstration!), that three cases were doubtful, and two others died.

“Another four-page paper (illustrated!) goes to show that the indolatrix umpogenica Schwartzii is the determinant factor in Blumporium Batticus fever, as demonstrated by the writer in a Singhalese half-breed at the Timbuctoo Sanitarium, Timbuctoo, Nyanza.

“After this, a learned disquisition on the number of hydrocarbonous (or is it ‘hydrocarbonaceous’?) calories contained in a kilogram of alfalfa officinalis, with mathematical demonstration in extenso that—given the sinus urogenitalis and cosinus of materialization—seventeen centigrams of the ethereal extract will cause duplication of the sixth and eleventh auricular systole plus a positive expiratory fibrillation of the posterior medi-astinum if the patient is a miller by trade and the preponderating wind in the southeast.”

Would One Hundred Thousand Osteopaths Glut the Market?

Under the caption of “Wanted—The Old-Fashioned Doctor,” the following editorial has recently appeared in the Philadelphia *Public Ledger*:

“As the shortage of doctors continues to make itself manifest in civilian life, it is being made clear to the most thoughtless that what the medical schools should turn out in greater numbers and what the country needs is the good, old-fashioned, all-around general practitioner. In many ways the tendency of medical education of recent years toward concentration in the matter of schools and extreme specialization and standardization has not only reduced the number of doctors as a whole, but seriously cut down those who cared for or were trained for general practice. It is now seen that this practice was not altogether the wisest of courses. The highest of standards for admission to medical schools, it may be said, should be maintained in these days of advanced sanitation and advanced methods of preventive medicine; but with these high standards, which have had the effect of cutting down the supply of students, and, therefore, of doctors, it would seem as if something should have been done before the war to increase the attractiveness of the medical profession, and, what is more, instead of forcing the issue as to specialists, give the general practitioner a dignity and opportunity which for a number of years have been denied him.

“As a consequence, the depletion of the specialists, not only the surgical specialists, by the war, has left the medical profession available in civil life scant in numbers and with altogether too few who are indisputably general practitioners and truly understand the ‘art of healing.’ For healing is an art, and it depends more largely than many think on individual equation plus the science of medicine as it is obtained in the schools, the hospitals and the daily practice.

* * * *

The medical schools are in need of some genius who will plan for them a system which will turn out more old-fashioned doctors and leave the necessary specialization to be carried on by relatively small groups

of laboratory workers, while the doctors serve the community as a whole and along broad and general lines, applying the hospital and laboratory facts by the bedside, in the home and in the office as occasion calls for."

Dr. I. M. Rubinow, director of the New York City Bureau of Social Statistics, in a recent article in *The Medical Review of Reviews*, and given further publicity by *The Literary Digest*, draws attention to the fact that:

"Notwithstanding the ease of entering a medical college and obtaining a diploma in this country; notwithstanding the apparent increase in the number of medical shingles in every large and small city, and even in the smallest hamlets, the number of physicians in this country in proportion to population has not increased from 1850 and until 1910. On the contrary, it has decreased.

"In 1850 there was one physician for every 569 persons in the United States. In 1880 there was one for every 585, and in 1910 there was one for every 602. Evidently the supply has not overrun the distinctive American standard of demand.

"The situation is in reality even more startling than this would indicate. Take, for example, the forty-year period after the Civil War, 1870 to 1910. Population during those forty years has increased by 138 per cent, and the medical profession by 142 per cent., or in about the same ratio. But during the same forty years the number of lawyers has increased by 200 per cent, the number of clergymen by 205 per cent, the number of teachers by 396 per cent, of dentists by 410 per cent, and of music teachers by 770 per cent.

"Perhaps this curious conditions was, to some extent, due to the fact that it was harder for a physician to make a living. But that was not the only reason.

"The dominant reason probably was the constantly increasing difficulties attendant upon the achievement of a medical diploma as the State governments gradually began to recognize the importance of controlling the medical schools and the conditions of admission to medical practice.

"And now what has been happening in the profession since 1910? During the five years, 1910-1914, the number of graduates was 19,765, or less than 4000 per annum. At present it is scarcely over 3500 per annum. The American Medical Association collects and publishes annually statements of mortality among physicians. In 1914 it accounted for 2205 and in 1915 for 2450 deaths. Manifestly, the record is incomplete. Every year some old physicians must retire from practice.

"It is highly probable that the actual number of physicians in this country is declining. And it is quite certain that it is declining in proportion to population, which is increasing by some 2,000,000 a year in this country."

Elsewhere in the same article the statement is made that the present ratio is one physician to 700 persons. On a basis of 6000 practicing Osteopaths and a population of 110,000,000, there is one Osteopath to 18,333 persons. If there were 100,000 Osteopaths the ratio would be 1 to 1100 persons.

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EDITORIALS

From all reports the Chicago gathering was decidedly progressive, both as to men and measures elected. It could not be otherwise, if we are to measure to our enlarge responsibility and opportunities as physicians and surgeons.

It was a notable year for the A. O. A. Among the best things accomplished was the adoption of an entire new constitution said to be the most democratic ever attempted. That is sufficient achievement for any one president.

Dr. Hugh Conklin, the New President.

Dr. Conklin may be new to some of us, but the way he won out at Chicago demonstrated the high regard in which he is held by those who know him. Putting over the best scientific program to date was not his only expert work. He has done creditable research work on his own account, of which we hope to hear later. The A. O. A. expects a year of unequalled progress and the West is with our new President, Dr. Conklin.

The 1% Flu. Mortalities.

Let us forget for the time that we are D. O.'s and seek, as unprejudiced physicians, scientific students, to arrive at the facts. Here are findings of most trustworthy medical men, and we have also those of our Osteopathic profession from all parts of the country relative to the influenza.

Have we any reason to conclude that for honesty, intelligence or education one class of physicians is any less qualified to give reliable data than the other? Then must we not judge, and must not all fair-minded men conclude that Osteopathy has a potency in the treatment of this condition that warrants—not alone warrants, but in the interests of public health and safety, demands consideration. The regulars have had thirty years to study the flu. This was Osteopathy's first tryout in a great epidemic. And as reports continue to come in the exceptionally low mortality rate of the first few thousand reports are more than substantiated.

With the possibility of another siege of influenza are such records not of sufficient import to warrant the consideration of State and National Boards of Health?

The saving of thousands of lives is no small concern. Then why not an unprejudiced board of laymen investigate and report?

Our Surgeons Making Good.

Every year you will note our surgeons going East to the various clinics for P. G. work and operating experience. Like other surgeons, our D. O.'s used to go to Europe, but now there is no limit to the opportunities offered in this country. While our men take a like course in surgery with the M. D., yet no one—D. O. or M. D.—should offer himself to the public as a major surgeon without abundance of specializing and actual use of the knife under direction of the ablest men in hospitals until he feels that he could do these operations with his eyes shut. When he comes thus equipped, having majored in scores and hundreds of cases, then his fellow D. O.'s may consider calling for his services, but surgery is too serious a matter, and our responsibility too great, to turn a patient over to any one less equipped.

Specialists in Osteopathy.

While we have great reason to be proud of the exceptional work our D. O. surgeons are doing, and while we recognize the need of having these especially trained men in every center, yet by far the imperative call everywhere and always is for the men and women who are specialists in Osteopathy. If surgery is imminent and you do not find a D. O. surgeon, it is not difficult to secure the services of our M. D. friends, but when Osteopathic care is looked for and you do not find it in the D. O. office or in the D. O. fingers, then to whom shall we go?

A patient was referred to a D. O. office in a far city for Osteopathic treatment; instead, pills were offered. In another case a weak solution of Osteopathy was proffered. A recent layman's report to this office states that in one of the Eastern towns there is a D. O. who has turned some sort of specialist and writes to know if there is not some Osteopathic D. O. who would consider that location, as he has at least a dozen patients for him.

We know an M. D. specialist in eye, ear, nose, and throat who has built up an exceptional practice in a large city and gives credit to the fact that several years ago he took a course in Osteopathy and uses it in practically every case.

Specialize if you will, but those who are wise make Osteopathy a big part of that specialty.

How Long Do You Treat a Patient?

Many are coming to find that except in rare cases the 15 minute appointment book is most practical, especially if one has plenty of dressing rooms. And in some of your cases you will do all that is really needed in less time. Questions of examinations and diagnosis is a different matter.

One trouble is many patients have been trained to expect a half hour or more of work, and we are afraid we won't just please them with less, and so we "put in time." Have you ever considered that in the extra 10 or 15 minutes you may be undoing the work of the first 10 minutes? You may bring about a feeling of exhaustion. Too much stimulation, inhibition or adjustment is not well borne by the average patient.

How often do you treat your patients?

Have you considered that there is such a thing as producing an immunity to Osteopathic treatment? Frequent treatment and general treatment are just the procedure in many a case, but Osteopathy, like any other therapy, must be wisely and specifically administered if we are to act the part of scientific physicians. Anything less makes us cheap, brainless manipulators.

The W. O. invites your discussion.

Those Who Come Not Back to Us.

The war is over, the treaty signed and our soldier boys are coming back again, but not all, for some there are for whom we wait and listen with eager, longing hearts, and we are slow to comprehend all that's happened. But we know it was their good sword that cut down the mighty; it was their courageous shout in the furnace of bell that put to flight that demon Hun. It was their gift that made possible our life, our security and our future glory, and with their blood they did yet more—it sealed the brotherhood of the world and so made peace.

It is no small matter that men give their lives for their friends. And we, their friends, would be a blot on earth's fair face did we break faith with such as they.

What do they expect of us?

The United States is, perhaps, the only notable power that tries to manage its business with little consideration of the budget system. As a result we pass bills and spend lavishly, and about all that happens is a few glaring headlines of criticism.

Now with our new organization, why not every society, large and small, adopt and practice "the budget."

This must be a gem of wise economy.

The prohibition law doesn't seem to worry our D. O.'s. Either they have provided for the future or they are in harmony with the traditions and practice of our school, which at its conventions passes resolutions favoring a dry law and always dry banquets.

The amended poison act which prohibits pharmacists from selling narcotics to Osteopaths who have not the P. & S. license is held up from becoming operative until after next legislature.

Exhibitors Attending the Last Convention.

Antiphlogistine; Horlick's Malted Milk Co.; Borden's Malted Milk Co.; Boehm Instrument Co. (Elec. Rectal and Cystoscopic and Ear-Nose-Throat Equipment); Kress and Owen (Glycothymoline); Ground Gripper Shoe Co., Los Angeles, Cal.; Bristol-Myers Co. (Sal-Hepatica); Milk of Magnesia (Phillips); H. Jevne Co. (Rye Crisp agents), Los Angeles; Wolferth Electric Co., Los Angeles, Cal.

Do you all remember that our State president, Dr. Vanderburgh, was the founder and first editor and publisher of the Western Osteopath? Perhaps that was where he got his start. Turning the world upside down to discover a desirable ad and turning down others whose money tempts; trying to keep the leading scribes of the profession turning their stuff this way and trying to keep their articles hammered into less than two pages; spending your summer outings looking over copy when you want to play croquet or tiddly-de-winks and then be shocked when you see in the next issue an error that wasn't the printer's; to hear the beseeching cry of stenographers, printers and plumbers for more pay and yet try to keep your publication a financial asset: to have an ambition to make the W. O. the scientific journal of the profession and—and—HELP! No wonder Dr. Van prefers to spend his outings on his Napa County ranch.

Drs. Fenner of Sacramento and C. C. Rude of Fresno each called on their way home from several weeks' vacation.

Bay Meeting.

Dr. Dayton B. Holcomb of Chicago, who has done considerable research work on the heart-arterial and gastro-intestinal fields, is stopping at the Palace Hotel, San Francisco. He will lecture to the Bay Association at Dr. Vanderburgh's office August 1st.

WANTED: Place as assistant in some office in or near Los Angeles by a D. O. who wishes to put in part time studying surgery at the College. Has had much experience in giving anaesthetics at his local hospital. Address, A. F. S., Western Osteopath.

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Salvage of Manpower.

The principle of salvage extended to the vital assets of the nation would redound to our social, economic, and financial advantage in no uncertain way. Of the 2,500,000 men examined for the National Army in 1917, 33 per cent were rejected because of physical unfitness. It has been estimated that about 3 per cent of our population is constantly disabled by illness, though various sickness surveys suggest that this percentage is more nearly 2 per cent. Every man, woman, and child on the average loses about nine days per year as the result of illness. The annual wage loss as a result of illness to the workers of the country may be conservatively estimated at from \$500,000,000 to \$750,000,000. This large sum does not represent the loss to industry as a result of the interference with the normal working of the vast industrial machinery during the period represented by the illness of the workers.—*American Medicine.*

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Chicago Again in 1920.

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Chicago has been awarded the 1920 A. O. A. Convention on merit as to location and general ability to handle this important event. The Osteopaths here are to be praised for their wonderful progress in regard to their college and hospital. The future is bright for them and Osteopathy if things continue in their present trend.

Cause for Thanks.

"I met a real optimist the other day," said the physician, "a fellow to whom I certainly doff my hat. He had lost a leg in a railroad accident, and when they picked him up the first thing he said was: 'Thank God, it was the leg with the rheumatism!'" — *Harper's Magazine*.

His Enemies

"He has no enemies, you say;
My friend, your boast is poor:
He who hath mingled in the fray
Of duty, that the brave endure,
Must have made foes. If he has
none,
Small is the mark that he has done,
He has hit no traitor on the hip,
He has cast no cup from perjured
lip,
He has never turned the wrong to
right,
He has been a coward in the fight."

—*Joaquin Miller*.

Appointments.

Dr. S. L. Scothorn of Dallas recently appointed by the Mayor a member of the Dallas City Health Board.



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vigilance is the price of medical freedom, the same way that it is the price of commercial, religious and political freedom. Anyone who believes in keeping the medical profession isolated—wholly aloof from any participation in civic affairs—is evidently not aware of what is transpiring in this State and elsewhere in reference to the practice of the healing art. No physician and surgeon can say that he is intelligently interested in advancing or improving the medical profession or in maintaining the ethical practice of medicine or in promoting or protecting the public health who does not take an active interest in selecting those who pass the laws and also those who administer the laws. The ethical medical profession has no favors to ask and no special privileges to request. The interests of our profession and the public are identical. To whatever we advocate or whatever we oppose we shall apply the best test and touchstone

for all measures—the common good.

Reviewing the roll call of the Forty-third Session of the California Legislature and applying that test, we are able to divide the members of the Legislature into three groups. In the first group we have placed the names of those who voted to uphold standards and consistently opposed measures tending to remove safeguards vital to public health.

In the second group we have placed the names of those who at times were favorable, indifferent at other times, sometimes against standards and temporarily inclined to waver.

In the third and last group we have placed those who voted to lower standards. We are reserving for other occasions many comments on each of the groups and on the individuals that compose them.

GROUP ONE. Assemblymen: Anderson, Bennett, Broughton, Bruck, Calahan, Collins, Gebhart, Godsil, Gray,

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Post Graduate Work

The following are excerpts from communications sent to us by two doctors who attended our September 1919 clinics:

"This to let you know I never enjoyed a meeting more, nor have I any recollection of having had more solid instruction or inspiration along professional lines in so few days. I came, I saw, YOU conquered."

"I should like to express the appreciation I feel toward the School for the splendid work we received at the clinics arranged for us in Chicago. The abundance and variety of clinical material was very gratifying and the illuminative demonstrations of the work by your Director and his able assistants of the Faculty were intensely instructive and most helpful. The range of work was so great in both the hospital operations and the demonstrations of office technique that one felt he had actually seen almost everything he might be called on to do.

Write us for copies of letters from other doctors, and for an outline of our Course

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GROUP TWO. Assemblymen: Badaracco, Browne, M. B.; Easton, Eksward, Goetting, Locke, Martin, McKeen, Miller, D. W.; Wright, H. W. Senators: Harris, Otis, Slater.

GROUP THREE. Assemblymen: Allen, Ambrose, Argabrite, Baker, Bromley, Brooks, Brown, J. S.; Carter, Cleary, Cummins, Doran, Dorris, Eden, Fleming, Graves, Hughes, Hurley, Kline, Knight, Lynch, Madison, Mathew, Merriam, Miller, H. A.; Oakley, Pettit, Price, Roberts, Wendering, White, Wickham, Windrem. Senators: Boggs, Brown, Carr, Wm. J.; Chamberlin, Dennett, Duncan, Evans, Gates, Hart, Inman, Irwin, Kehoe, King, Lyon, Rominger, Sample, Shearer, Yonkin.

October 21, 1919.

Dr. A. C. Reed,
Butler Building,
San Francisco.

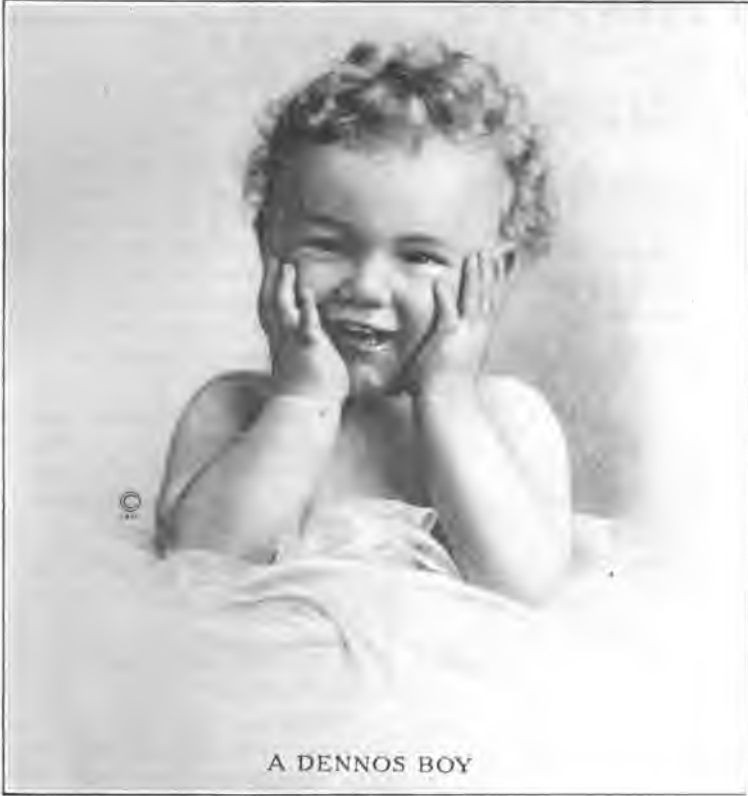
Dear Sir: Following the suggestion of your attorney, I am sending herewith statement for your November journal.

If you will look over your last issue I feel sure that you will not be quite so proud of your contribution commenting on my statement as you were when you assigned it to such prominence in your journal.

It occurs to me that the more manly thing for you to do would be to publish a retraction. I have no desire to continue a mud-slinging campaign. I find it impossible to discuss the mat-

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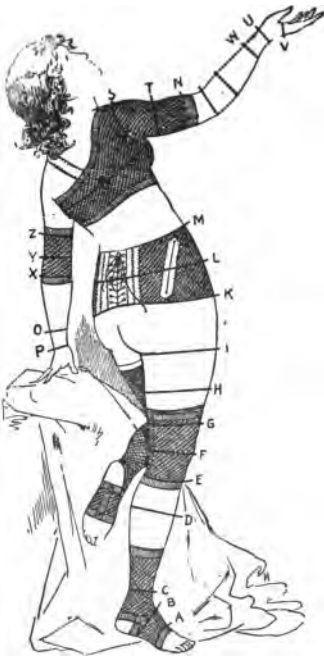
Modification as applied to milk is a term of very elastic meaning. It may include simple dilution with water, addition of cane sugar, lime water, and various other agents. Dennos Modification, however, produces changes in cow's milk that have important chemical and physiological significance in the feeding of infants and invalids. Physiologically considered, Dennos changes the milk from a hard curdling to a soft curdling food. The fine flocculent particles are bland, non-irritating and readily absorbed. For this reason it has met with unusual success in cases where vomiting or diarrhea are persistent symptoms.

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ter in an impersonal way. Your comment was purely personal, unjustified and insulting.

I should have no hesitancy in debating the matter on its merits, but since the discussion has taken an entirely personal turn the sooner it ends the better.

The Legislature heard this matter debated. Your side of the argument was presented by men more familiar with the subject than you are and your side lost. You can gain nothing by an honest discussion of the facts. They are against you. You certainly have nothing to gain by continuing your misrepresentation. I would, therefore, suggest that you make a plain statement admitting your mistakes.

If you do not wish to do this, I shall be satisfied with the publication of the enclosed. I think it is entitled to as much prominence as my last statement received.

Very truly yours,

(Signed) W. W. VANDERBURGH.

Editor California State Journal of
Medicine:

Following my personal interview with you and your counsel, Mr. Peart, I must request space to repeat several statements which it seems you did not properly interpret. I shall endeavor to make clear the position of the Osteopathic profession relative to the introduction of A. B. 933.

The law of 1907 provided that Osteopathic applicants take the identical examination given medical applicants. This examination included surgery.

Before this law was passed the Osteopathic representatives at Sacramento sought legal advice as to whether this bill gave Osteopathic physicians all the rights and privileges it gave others taking the same



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examination. We were advised that it did and we worked for its passage.

This law provided that "Any certificate issued by any previous board under the authority of any previous act should have the same value as though issued under this act."

We felt secure under this act and were greatly surprised when the attorney general ruled that we had been wrongly advised. We were not wholly convinced by this ruling, however, and our position was sustained by Superior Judge Ogden in the case of People vs. Lineker.

Under the authority of this decision the Osteopaths continued to practice major surgery and such specialties in medicine as suited their bent.

We contend that since their training qualified them for the work they were doing, and since the only court decision on the point upheld their position, your statement that they were willfully violating the law is unjustified.

The Osteopathic profession is law abiding. There have been but half a dozen Osteopaths arrested in California in twelve years for violating the law and they were mostly acquitted. It takes the time of three attorneys to prosecute the illegal medical practitioners.

I repeat that the State Board of Medical Examiners had knowledge that Osteopaths were practicing major surgery. Dr. Norman F. Sprague, an Osteopath, testified before this board, under oath, to having performed a major surgical operation. The board declined to prosecute. The medical board had knowledge of other Osteopaths practicing major surgery. This board was so uncertain as to the results of such prosecutions that they declined to prosecute until they could arrest an Osteopath who was an outlaw in his own profession. It took several years to find such an individual, but eventually a case arose.

Your statement that I find myself in "hostile attitude to the Superior Court" is characteristic of the unfairness of your position. Anyone reading your article would conclude that I was familiar with this decision when I prepared my statement. As a matter of fact, you had my statement two weeks before this decision was rendered.

Your demand that I furnish proof that the American Medical Association lobbied against our bill in Washington is a quibble. You are familiar with the names of the individuals (two past presidents of the American Medical Association and a former editor of the journal of the American Medical Association were among those) who appeared before the Congressional committee in opposition to our bill. If it affords you consolation to say that they did not officially represent the American Medical Association, I am willing to accept that statement.

Your statement, to me personally, that the State Medical Society was not officially represented in Sacramento in opposition to A. B. 933 is characteristic of your quibbling. The fact that the president, secretary and some sixty members of your society who appeared "in protest" but said nothing against this bill are also members of "The League for the Conservation of Public Health" (an organization composed of members of your society), you say justifies your statement that they did not appear as members of your organization and therefore were not officially present.

Your refusal, on advice of your attorney, to point out the erroneous statements which I am charged with making is quite in keeping with your general policy of misrepresentation.

(Signed) W. W. VANDERBURGH.



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Alfred J. Scott, M. D.
(For Physicians and Surgeons, Drugless Practitioners and Midwives)

1. Differentiate between—
Endemic,
Epidemic,
Pandemic.
Example of diseases causing same.
2. What is meant by natural and acquired immunity from disease? Example of each.
3. What are the principal means which you would employ for the prevention of the spread of infectious diseases?
4. Give the special hygiene of factories in which women and children are employed.
5. How may the presence of a typhoid carrier be detected?
6. Name four diseases, to which the human race is susceptible, that may be transmitted through cows' milk.
7. What interpretation can be placed on the relative amount of nitrates and nitrites in well water.
8. What conditions and diseases in animals render their flesh unfit for human food?
9. Name the filth diseases; give the prophylaxis of same.
10. How much fresh air is required for normal respiration during the twenty-four hours?
11. What precautions should a physician observe to avoid carrying a contagious disease?
12. What hygienic precautions should be observed by a pregnant woman?

CHEMISTRY AND TOXICOLOGY

(Physicians and Surgeons)

Harry V. Brown, M. D.

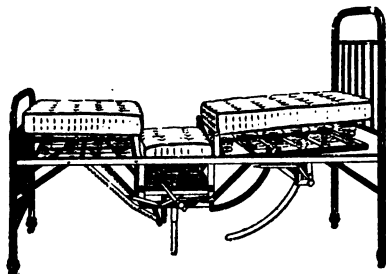
1. What are the metals of the arsenic group?
2. What two solutions of arsenic are official?
3. Silver Nitrate. Give its appearance; how prepared; symbol; synonyms. What per cent may be used in the eye and in the throat?
4. What do you understand by the term colloidal chemistry?
5. What is a calorie? Explain the caloric method of feeding.
6. Classify foods. Discuss one class.
7. What are enzymes? Discuss their characteristics.
8. (a) What constitutes metabolism?
(b) What is a nitrogenous equilibrium?
9. What is a lethal dose of
Tincture Aconito,
Tincture Belladonna,
Tincture Gelsemium.
10. What is the result of a tablespoonful of camphorated oil, if swallowed by a one-year-old child?
11. Give symptoms and treatment of poisoning by wood alcohol.
12. What is the chemical cause of death in inhaling illuminating gas? Give treatment.

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THE WESTERN OSTEOPATH

Published by the California Osteopathic Association

VOL. 14

FEBRUARY, 1920

No. 9

Contents

"Team Work" Official Bulletin of the W. O. A. Christening of the Circuit Clinic. A Ruddy Production.

Fatigue, Dr. W. Curtis Brigham

Treatment of the Liver, Dr. Carl P. McConnell

Research Department, Dr. Louisa Burns
Persistence of Bony Lesions

Why the Osteopath Gets Results, Dr. A. E. Johnson

Review and Comment, Dr. C. B. Rowlingson
Why does no Therapeutic System Cure 100% of its Cases?
Articles in Medical Journals of Interest to Osteopaths.

Don'ts and Do's, Uncle Peté, On Vegetation

Specialists, Dr. Frank J. Sloan

Editorials

Personals—Local Meetings—Clippings, etc.

With Malice toward none, with charity for all; with firmness in the right, as God gives us to see the right, let us strive on to finish the work we are in; to bind up the nation's wounds; to care for him who shall have borne the battle, and for his widow, and his orphan, to do all which may achieve and cherish a just and lasting peace among ourselves and with all nations.

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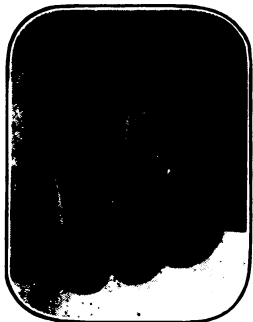
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The Western Osteopath

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No. 9

Team Work.

Official Bulletin Western Osteopathic Association

"CHRISTENING OF THE CIRCUIT CLINIC"

(A Ruddy Production in Ten Reels.
Scenario by Whitehouse.)

(A Dramatization of Spencer's Famous Works)

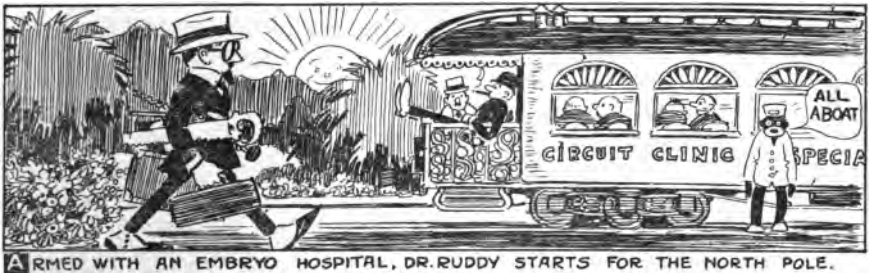
("The West for Osteopathy")

The scene of this new plot to "Osteopathize Osteopaths" lays in the productive Valley of Opportunity, encircled by the Mountains of Co-operation, under the sunset-tinted skies of Win, known as the Eight State Associations and the Twenty-three Osteopathic Societies of the Western Osteopathic Association.

who entertain him, and the moment of his departure besides numerous other details which only those who know "George" can fancy, were fully arranged.

Instructions having been given each Society how to "prepare," and a "roll of news items" having been sent for the "before" notices, armed with an embryo hospital equipment, a Corona, a clean pair of sox and an Iowa winter wardrobe, the Hero in this story took his departure.

San Joaquin Society (Fresno) had its representative, Dr. Wallace, at the station waiting at 7 a. m. Thursday,



ARMED WITH AN EMBRYO HOSPITAL, DR. RUDDY STARTS FOR THE NORTH POLE.

The first ten reels will depict the experiences of one T. J. Ruddy in a "path-finding" expedition through the north one-half of the Valley.

From President Chas. H. Spencer's office had flashed the message to all Societies that the time had come when greater than INDIFFERENCE would be with them, and, through the untiring efforts of George Whitehouse, Western Organizer, the exact day, hour and minute when the meetings should open, the time given to the "private," clinic, banquet and lecture sessions, the minute of the train arrivals, who was to meet the speaker,

December 10th, and while the flowers flower and the raisins raisin at Fresno, memories of warmer weather were awakened in me on that gray morning. But this did not chill the spirit of that live "group" of "Wawkeen." From four counties came the 100%, yes, some driving ninety miles. All day from 8 a. m. they brought cases for hospital and other attention. Drs. Elder of Hanford and Graham of Dinuba, Bruce of Lindsay, Nichols of Exeter, Wolf of Visalia, were among those who made the big sacrifice in distance and time, while the local boys and girls, especially Dr. Taylor



GET AN EARLY START AT FRESNO.

and Dr. Pugh, labored hard to make the "initial clinic" a winner and it certainly was. It was to be regretted that Dr. Wallace had contracted a bad cold while waiting for the speaker in the chilly hours of dawn and was prevented the pleasure of the day.

Sacramento Valley Society was reached after the following delightful experience. The Southern Pacific had everything arranged so that I could have access to my berth at the early hour of 12:15 midnight, and after allowing me three hours and fifteen minutes of sound () sleep instructed an

Me? These are questions that only "belated mail" can answer, however, the "K St." car escorted me safely to the city's leading hostelry, and after informing Dannie of my arrival, which out of justice to the "locals" I should say was ten hours "over time" or four hours "premature," we assembled and had one of the best meetings of the trip, and when I hied away at 4 a. m. from the only rival Frisco has, I firmly knew that the next number of the "Circuit Clinic" would be even a greater success.



AN UN-PALE FACED EMPLOYEE THREW ME OFF AT LATHROP.

unpale-faced member of the company to rudely purloin the linen from my couch and "throw me off" at Lathrop. Those of you who have had the pleasure of this avenue of entrance to the bergs of Seymour, Rule, Van Nuys, Clouse and the natives of the "Senators Sity," need no requiem to remind them of the cadaveric calm that comes over the wayfarer a la Lathrop.

Was Dr. Daniels lying in his den, and why did Dr. Will say he didn't, but he would, and why didn't Dr. Cary

The Bay Society needs no introduction to anyone or to anything, unless I should whisper something about the labor question, and really there are members of this, the "original" society, who are very familiar with this tiresome subject. On arrival, it became necessary to add fifteen cents to the bills of the W. O. A. to find somebody "up," it being very early—for San Francisco. In the course of human events, I had a B. V. D. phone-versation with the chairman of ar-

rangements, a longer chat being unnecessary as he thought Dr. Robie would be able to tell me all about it—and he was, as usual, Ever Ready Robie. Dr. Cassie Moreland, and "Syl" Wilcox, the fattest Osteopath in the world, had their offices most conveniently arranged for me to go to work, and in a short time the entire Bay, and San Francisco, were present with many good cases and intense interest,—the only question remaining unsettled was: Is the interest as big as the principle? While 100 per cent was not reached in attendance, at no place along the line was there any more effort put forth to get the Society lined up on a good business footing than here, and the president, Dr. Pierce, has much to be proud of, and the January meeting will be a hummer for the Edmiston Technique, because co-operation is the new motto.

The Moll is located a long way from here, and to that prince of entertainers of the Bay Society, Dr. "Clyde" Thompson, I owe a cozy ride in his Limo, at the usual 45 per, to the station, and away at a reasonable hour for the "frozen north."

ioned "tick," two underneath and one on top. It is now Sunday, 4:30 p. m., and am nearing the "City" of Ashland, Oregon, where the Medford Society has been in session one hour. Almost 100 per cent are in attendance, Dr. Goddard of Klamath Falls being "snowed in." It is only fourteen blocks from the station to the heart of the berg, the taxi service and street cars belong to the union, so assisted by Dr. Carlo of Medford, we trail a cowpath "cross lots" through three feet of aforesaid "blanket" to the whereabouts of the First National Bank. Owing to a thaw during the previous year, the erstwhile "aquathawalis" combined with the eight to fourteen degrees below of the past three days, I had some difficulty entering Dr. Bertha Sawyer's office.

The time (two hours) was too short to permit of a report on very many cases, however, three were present, two of the three deciding that Bertha should be the goat. The balance of the time was spent in a lecture and demonstration on the treatment of Nose, Throat and Ear diseases. Doctors Carlow, Carlow and Sawyer ac-



AT THE BAY CITY THE RECEPTION COMMITTEE WAS LATE, BUT I WAS RECEIVED WITH MUCH GUST.

The trip over the Siskiyou is deserving of more than passing notice in so much as I had a cheerful corner in "iower seven" away from the embraces of the somber blasts without. Gradually the warnings of the southern press were making themselves felt and the "blanket of white" was rapidly developing into an old fash-

compared me to the train in all of nature's appearance of purity, and, again the railroad company exercised discretion by incarcerating me in a choice Pullman, which had not been interred or blown away during the recent slight inclemency, and in which heat, light and water would have been considered among the "ten wonders"



EUGENE HAS A SHORTAGE OF BEDS.

on managing a business you knew nothing about. After doing an Arizona giggle for a reasonable length of time, the cab driver, who is simply working for the company, asked me if I was warm enough—said that the pipes were frozen and it would be several hours before heat would be up to requirements, and I might sit in the drawing room of the car ahead until the Porter had gotten used to the Zeroism and would call me. He didn't, but the Con advanced and did it for him—said he needed the rest. The night's ride half over and the train now nearly two hours late I awoke in a still cooler barn in Eugene, the home of the—

Willamette Valley Osteopathic Society. Here the snow was only two feet deep, and the temperature a little higher, but too stiff to reach above zero. Eugene is a beautiful little place and every one there knows it, and

to see all that one's heart might desire, in the mile jaunt to the civic center.

However frigid might appear the preliminaries, Doctors Waller and Waller more than warmed the traveler's heart, and hands, during the eighteen hours of intense stay, including six which I granted the S. P. for former courtesies. Yes, Roberts and Howell (Mary), Eye, Ear, Nose and Throat representatives were there and proved their worth to the profession—and I will gamble that the profession knows them better now and will not hesitate calling on them for advice and surgery in their line. It did me good to meet all, but especially Doctors Frost and Frost, who, these many years, had been getting rich in isolation, but like all who live "alone" for a time awakened to a larger conception of usefulness to their fellowmen, as well as to themselves. The day



THOUGH DR. SAWYER WAS WARM HEARTED - I RECEIVED A VERY COLD RECEPTION.

they are perfectly satisfied under the above conditions to permit a stranger to view the scenery "a foot," and with one hundred pounds of luggage there is ample time on a slippery morning

was spent most profitably to all with the exception of Dr. DeLapp, who was compelled to limit his menu to "aqua ———" owing to the frozen state of his gastric juice. The State of Oregon

may do well to keep its eyes on Willamette Society for examples of enthusiasm and co-operation.

To mention Portland Society suggests at once the memory of one of the most successful national conventions the A. O. A. ever held. This, the home of one of its illustrious presidents, Dr. "Fred" Moore, the "Milk Man" of the North, turned out in grand style. Your "speaker" was met in the wee hours of the morning by a delegation of "live ones," in Doctors Leonard and Virgil, who added much mirth to the travesty by presenting a bouquet of Oregon roses in an attempt to raise the mercury to a southern California level. Failing in this they lost no time in escorting me through many feet of snow, slush and sleet to a cozy room at Benson's Best, with the admonition that cases were lined up waiting, and that further, the idea of a bath was dangerous. All day long examinations and operations were made before a packed house, the Society having rented a large hall to accommodate the members, and truly, I must say that outside of Los Angeles the spirit of Osteopathy, the interest in the "Circuit Clinic," the equipment of offices, and the demand for efficiency are nowhere better demonstrated than in Portland and the city of the far north, together with the city of the far south might alone insure the success of our profession in the West.

In keeping with the schedule I was next to appear at the Walla Walla

Society, but out of deference to the "ice king," it being now twenty-eight degrees lower than zero, the members of this Society, under the leadership of Dr. "Johnny" Heath, met at his office, each one having brought one or more clinic patients, and, with the assistance of the Bell System the day was passed with some regrets, but a renewed interest to take part in the W. O. A. traveling post-graduate school on the occasion of Dr. Edmiston's visit in January, when we hope the weather man will be more kind.

After going through an experience of forty-two degrees "below" at Meacham, and doing a "North Pole Shimmy" at LeGrande, where I said "hello" to "Buddy" and "Zim" at 11:00 p. m., I was next greeted by the Boise Society through the kindness of Dr. Meredith at Nampa, who hurried me away some forty miles, with very little breakfast, in his "Booick Iceberg Buster" over a road of ice and snow that would have made Peary or Cook feel that the North Pole was an Argentine in comparison. With frozen ears and everything, I arrived. The Boise bunch, with open arms, were awaiting my arrival at their clinic rooms and in connection with Dr. Bodle's offices a land office business was carried on all day, the only reason for stopping being that we were two hours late to the banquet. Dr. Wittenberger did himself proud in general anesthesia. Having "given thousands" during his services in France, it was not difficult for him to





AT WALLA WALLA, DECEMBER DIAGNOSES ARE DIFFICULT.

give a dozen or more, three at a time, for the clinic on this occasion, and they were given right. Dr. Carrie Freeman and Dr. Handy, as well as others, had secured so many cases that although we had at least three in preparation all day, many had to be turned away. If any have doubts as to the benefits of a little "work," not only in behalf of Osteopathy, and the individual "working," but as well the public who clamor for what Osteopathy has to offer in thorough and conservative therapy, just write Dr. Freeman, or Boise's President, Dr. Meredith, or in fact any one of the "100 per cent group" in this Society, and you will have a grander conception of our science, the position it should occupy, and your place in it as a practical, working, integral part.

Society's clinic fund a greater percent than that reached by any other society in the Circuit. Dr. Young of Ashton, as well as many others contributed to a lesser extent, and proved that if each one did his or her part by bringing one case, a great good would be done, not only for the cause, but for the individual. The boys and girls of this Society deserve much praise for their interest at such times when Zero weather hampered all efforts. Dr. Sawyer, the new, but old, president, travelled three hundred miles to attend, and others came a proportionate distance from all parts of the eastern half of the State and further, nearly every paper in this part of the State has a good write-up through the efforts of the "individual" in the par-



DR WITTENBERG. DID SOME ARTISTIC ANESTHETISING AT BOISE.

Eastern Idaho Society met at Pocatello, at the offices of Dr. Bodmer and though we were late as usual, Dr. McCauley of Idaho Falls, Osteopathy's Eye, Ear, Nose and Throat specialist in this community, had arrived with several good cases which netted the

titular community. All eyes on "Boise" and "Eastern Idaho" Societies.

Utah Society had a narrow escape. Although the temperature is a trifle warmer, the snow is deeper and the train service slower, and, anyhow, this is Utah, so our arrival at noon and de-

parture at "five-fifteen" permitted little that might be said to be spectacular. It was Saturday too, and shopping had to be done. Notwithstanding all of these handicaps, Dr. Airy, our genial "Senator," and Dr. Mary Gamble, the Osteopathic Eye, Ear, Nose and Throat specialist of Salt Lake City, as well as Dr. Vincent, were waiting with Nurse, Hospital and numerous cases for diagnosis and treatment. The last thing we did left the greatest impression. Girl, eighteen years old, with infected tonsils, and a tonsotoxemia had come several miles just to "have 'em taken out." It was five o'clock. Fifteen minutes to inject "Nodolor," "elevate" the tonsils without pain, blood or gag. We did it, and, knowing Dr. Mary's ability to care for any complications (and we never have them), Dr. George Whitehouse grabbed my besmeared instruments, grips, collar and tie, and I with the balance, excepting rubbers, tongue depressor, rubber aprons, which I didn't "grab," caught the Denver train less than one block "out of town." Here's hoping the next speaker for the Circuit will be able to do more for Osteopathy's faithful few in Salt Lake.

It is necessary on this Circuit to buy a ticket to Denver in order to secure round trip rates so it was just as cheap to accept Denver's invitation and incidentally deliver our invitation in person, as it was to turn back home, with the exception that your humble

servant had the "homey" experience of spending Xmas Eve and Day in a Pullman castle with all of its beautiful surroundings. One is never surprised by the Denver Society. Yes, they had TWO DAYS' program arranged, and clinics beginning Sunday at 3 P. M. and lasting almost day and night until 3:30 P. M. Tuesday. Everything imaginable in the form of cases, including goiters and cleft-palate, and in Dr. C. C. Reid's wonderful "hospital suite," rented for the session by the Society, where it is always a satisfaction to work. I had spent a most delightful and profitable week during the summer with them at the Rocky Mountain Conference, but I must admit this was even more intense, and the attendance was fully as large. They have a wonderful clinic under headway, each member giving a certain number of hours per week to the work and incidentally doing a world of good for Osteopathy, the public, and widening his or her acquaintance (creating a larger market for Jones) not to speak of the wonderful opportunity he has to study a large number of cases (increasing his stock-in-trade.) A great deal of credit is certainly due Dr. Nettie Bolles and her co-workers for the welfare work they are doing. The Secretary of the State Child Welfare work was her guest for the evening. She unhesitatingly proclaimed her faith in Osteopathy, and offered the profession an open door to take part in the State's



DR. NETTIE BOLLES AND DR. CHARLIE REID DO NOT LIVE IN UTAH BUT THEY LOVE CHILDREN.

work in this line. Denver Society is to be congratulated as well as envied in this wonderful opportunity. The "Circuit Clinic" as well as the W. O. A. welcomes Denver and all Osteopaths who desire to increase their knowledge of Diagnosis and Treatment

(stock) and who will co-operate to means for doing the greatest possible good for humanity and incidentally reaping the biggest reward (market) for themselves. Bon Voyage "Circuit Clinic" of the W. O. A.

Fatigue

Dr. W. Curtis Brigham

To be most effective a machine must be well balanced. Perfect balance reduces vibration and makes for smoothness and economy. Perfect balance is as essential for an easy running body as it is for machinery. Perfect balance in the human machine depends upon physical, mental and moral development. Without any one of these the human body will be deprived of a part of the satisfaction of living. With any one of these deficient all must suffer. No individual can attain the greatest heights in mental or moral development without a good body. Again, to have a good body one must have a well-balanced body machine.

The fluid contained in the vessels of the body is very slightly alkaline. The bright red blood of the arteries is slightly more alkaline than the dark blood of the veins or the limpid fluid of the lymph vessels. This is due to the fact that production of energy is accompanied by the production of acid, and as the waste materials of the body are carried largely in the veins and in the lymph stream, the alkalies are somewhat reduced in the effort to neutralize this acid. When a boy runs, plays ball or rides the bicycle, he produces acid much more rapidly than while at rest. That this acid may be properly neutralized, the blood is carried more rapidly and he breathes more rapidly than while at rest. Nature has not supplied a sufficient alkaline reserve to neutralize all the possible acid production in the body. Therefore, periods of rest are neces-

sary in order to allow an accumulation of the alkali, so that the activities may be resumed without injury to the body organs.

Getting tired simply means that acid has been produced more rapidly than it has been neutralized. The body slows down this activity, and the demand for rest is made known. If, however, rest is not taken, acids continue to accumulate without complete neutralization and the result is fatigue. If one becomes fatigued, his activities in life will be greatly hindered, and the time necessary to return to normal will be greatly lengthened. Nature has provided mechanism by which people are warned of these dangers. These warnings too often go unheeded.

Children are not all the same. Some have greater alkaline reserve than others, and thus have greater physical endurance than others. If one does not heed the warnings given by his body, in time his total efficiency will be greatly reduced. He will not only have to make up for the activities of the present, but will have to supply something for the purpose of overcoming the injuries that have been done at previous times.

Tired people become dull mentally as well as physically. People in a state of fatigue have various mental abnormalities as well as body abnormalities, and are likely to think and say things that are just a little "queer."

The average boy or girl in school, in order to maintain most nearly perfect bodies, and therefore in order to enjoy life most, must have periods of rest and relaxation. Sleep is a most important factor in accumulating reserve of energy for the ordinary activities of life. How often have we heard it said: "I am too sleepy to think," which really means too tired or too fatigued to think. How often have we heard it said: "I am too tired to eat." How often after excess in work or play have we heard it said: "I am so tired I cannot sleep." Activities either in play or work carried to this extreme are detrimental to the health and happiness of the individual. Very young children require more sleep than older people because of their energy being used in growth as well as in accomplishing their tasks, while older people, who have attained their growth use their energy only for their activities. Boys and girls attending school

must have play and recreation as well as study in order to maintain the balance. In addition to these, they must have rest. Average boys and girls of grammar school age should have about ten hours' sleep in twenty-four. There are exceptions to this rule. Some will get along nicely on nine, others will require eleven, if they maintain the highest degree of individual efficiency.

Social organizations which deprive boys and girls of this amount of rest are a decided menace to society. No party, no entertainment, no show, no amount of pleasure, is worth sacrificing the health of a child. Is it any wonder our orphan asylums, charitable institutions, poor houses, insane asylums, and jails are so populous? Pleasure parties which keep children of grammar school age out later than nine o'clock in the evening sacrifice health to some extent, and should not be tolerated by either parents or school boards.

Treatment of the Liver.

By Carl P. McConnell, D. O., Chicago.

The following is additional treatment of the liver, that I have found effective, to what is commonly given, namely, middle and lower dorsal adjustments, kneading of the organ directly and careful manipulation along the bile ducts. First a word or two relative to the spinal work: many chronic ailments of the liver of the type of deficient function are within all probability due to defective innervation, more or less blockage of stimuli, caused by marked fibrotic anchorage of the malalignment. The difficulty of the treatment rests with securing precise relaxation of soft tissues and definite leverages of the osseous mal-apposition. Correct alignment must be secured or else the results will not be particularly effective. Occasionally the key of the dorsal interosseous lesions will be found in

derangement of the apposition of the lumbar articular facets. Then kneading of the liver directly will be helpful in restoring a greater circulatory influence and overcoming the various pathological gradations that are so readily palpated by the educated tactual sense.

In Osteopathically treating any organ or tissue the first essential is some appreciation of applied anatomy. Herein lies the test of Osteopathic efficiency. Application, development, and progress of Osteopathic principles always starts from this bedrock. This basic fact, supported by the attribute of self-repair, constitutes the essence of Osteopathy. Keeping this in view we will attempt further applications.

First the liver lies just beneath the diaphragm. This great muscle is in-

valuable from the standpoints of support, respiration, circulation and source of certain nervous stimuli. An atonic diaphragm is a very common condition. A slumped posture with its concomitant train of symptoms is certain to include a more or less functionally incapacitated diaphragm. This specially means that the doming of the muscle is incomplete at the end of expiration, with an associated atonic state of other muscle muscles such as the abdominal parietes and quadratus lumborum. It is readily seen that we have to consider the reconstructing or readjusting, in order to restore health, of not only a fibrotic spinal kyphosis of varying degrees, a flattened chest and impaired respiration, a changed line of gravity that disturbs normal equilibrium with pathological tenseness of certain muscles and atony of others, but also a very definite shifting of liver position, as well as other abdominal organs, which readily affects circulation and chemism of the parts. Probably in these cases the central tendon of the diaphragm is somewhat shortened; this will have considerable effect upon the upper spine and upper chest.

The above emphasizes a cardinal point of Osteopathic etiology that I am inclined to think is often overlooked. Health from the Osteopathic viewpoint often first of all depends upon thorough correlation of mechanisms. The organic whole is a complex of mechanisms. The starting point of many disorders is an upset of some mechanism of the correlation. This may be one of innervation, circulation or chemism. Of these the sympathetic and endocrine systems may be easily overlooked. Disturbance of one of these factors is certain to be followed by perversion of function. Some disrupting force is the initiation; and if this is not at once corrected or some compensatory measure supervene the road toward the abnormal is blazed.

One of the most important liver treatments, in my experience, is to place the patient flat upon the back on a level surface with a small solid pillow beneath the upper dorsal so that its upper surface is even with the shoulders. The head should drop back upon the level table or bed. This hyper-extends the spine, which tends to stretch the tense spinal muscles, assists in correcting the kyphosis, increases the size of the spinal foramina, and extends the chest and raises the ribs. (This is supplementary treatment to specific spinal adjustment.) Have the patient thoroughly relax. Then by using the arms alternately as levers with one hand the other is placed over the anterior ends of the ribs, beginning with the upper ribs, the chest immobility, through coordination of this leverage with slight inspiration on the part of the patient, is definitely overcome. Time the leverage of the arms with that of the moment of beginning inspiration. After this raise the floating ribs, and then get beneath the diaphragm and through the assistance of forced expiration on the part of the patient elevate and dome the diaphragm. Next place the patient in the knee-chest position or in the Tendelenburg and raise all of the abdominal organs en masse. While the patient is still in this position crowd the liver upward, and carefully manipulate it if pathology does not forbid. Then as a final step get beneath the duodenum at about the second lumbar and where it lies along side of the ascending colon and elevate and release this organ. If the treatment is skillfully given with due regard to anatomy and pathology results are almost certain to follow.

The effect upon abdominal circulation with its consequent organic functioning is notable. Even the heart and pelvic organs will definitely respond to the treatment. Herein

is the source, relative abdominal sluggishness through slumped posture, congenital tendencies and disturbed reciprocal innervation and axone reflexes, I am convinced, of many liver disorders. If the duodenal part of the treatment is correctly given the effect upon the duodeno-hepatic ligament which contains the portal vein, hepatic artery and bile-duct, is of great value. This ligament helps support the duodenum, and, I believe, that in many cases congestions arise here due to the gravitated condition of the organs as the above treatment implies. Bile-duct disorders and infections, as well as pancreatic, may originate from such injuries which first derange circulation and lower resistance.

In suitable cases follow the above treatment with direct work over the bile-duct, which will stimulate the flow of bile, remove mucus plugs and debris, and through reciprocal relationship of these parts relax the muscular fibers of the duct in the duodenum and contract the gall-bladder. A little assistance here is frequently necessary as the normal flow is under very low pressure. The above treatments I have outlined elsewhere, but I am so certain that it is of such value it will bear reiteration.

Now it is just as important after the above treatments have been given to interest the patient in correct exercising, particularly forced expiration and at the same time drawing abdomen up and in, as it is to correct the deleterious habits and unhygiene environment that embody the forces leading to ill health.

There is no doubt that if careful attention, as a routine measure, is given the liver, important digestive and eliminative functions will remain functionally active. It will materially assist in overcoming the effects of a sedentary life, a slumped posture and dietetic errors. Definite prevention of gallstones may be almost assured, for the bile salts, sodium salts of glycocholic and taurocholic acids, which act as a solvent of cholesterol may be kept up to the norm through direct treatment of the liver and bile-ducts. Then this treatment will also be of special value in preventing infection of the ducts and gallbladder. There is no treatment that I know of that really gets at the bile-ducts as the one outlined where the patient is in the knee-chest position. Precise restoration of the related parts, almost direct manipulation, if pathology warrants, and complete control of the field of operation are assured.

Of course the correct diet and plenty of drinking water are not to be neglected, as well as sufficient outdoor exercise. It is well to remember that many supposed liver disorders have their origin in constipated states.

“Manipulative work is especially efficacious in giving freedom to muscles, thus aiding the child in gaining co-ordination without strain and therefore preventing lesions leading to disease.”—Chandler Team Work.

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LOUISA BURNS, D.O., Dean

The Persistence of Bony Lesions.

The bony lesion, however produced, tends, at first, to become corrected by the normal agencies of the body mechanism. The bones fit together better in their normal than in any abnormal relations; the ligaments, articular capsule, and other neighboring connective tissues are so constructed as to retain and to secure the normal bony relations; the muscular pull is fairly equable; and the circulating fluids themselves are fairly well balanced around the joints. In the case of the spinal column, the structure of the intervertebral discs facilitates recovery and maintenance of correct relations. No doubt very many bony lesions, especially vertebral lesions, are produced and corrected by these agencies, and others, less obvious. In other cases, perhaps comparatively few, the lesion persists until it has been corrected, either through the efforts of an Osteopathic physician, or through other agencies which are more or less accidental. In a certain number of cases the lesion persists or recurs in spite of the most strenuous and thoughtful efforts for its correction.

The nature of the bony-lesion pathology, and especially of the vertebral-lesion pathology, suggests the reasons for these unfortunate conditions, especially for the recurrence and persistence of vertebral lesions despite the most careful and thorough treatment.

When a vertebral lesion is suddenly produced, as in the experimental lesion, or in the lesion produced by any one of the jars, falls, etc., whose effects are so often seen, the articular surfaces are somewhat bruised, and the usual series of inflammatory reactions is initiated. The surface is

slightly swollen, painful, reddened, and, probably, the local temperature is slightly raised, though this cannot be demonstrated. These reactions are characteristic of inflammatory changes anywhere in the body. If the injury is very severe, small hemorrhagic areas may be seen upon the articular surfaces.

At the same time, a series of similar events affected the peri-articular tissues. The connective tissues around the joint are also swollen, painful, and occasionally, reddened. The circulation is slightly impeded by the swelling which, in turn, increases the local edema and the local acidosis. These also increase the pain. The effect of all these changes is to limit motion in the affected joint.

The local edema and acidosis is associated with loss of elasticity. The tissues are not resilient, as are normal tissues; changes of pressure produce logy, slow, or no reaction. Hence effects of any pressure change tend to persist. The local edema which permits the loginess of the tissues interferes also with normal circulation which, in turn, increases the pathological conditions. These logy, swollen, painful areas are shown in X-ray plates and are indicated by the findings on palpation.

The structure of the intervertebral disk is peculiar, and this gives the normal spinal column its peculiar elasticity and resiliency, with its great strength and its marked flexibility in practically all directions.

The central mass (substantia gelatinosa or nucleus pulposus) is composed of cells remaining from the notochord. These are enclosed in gelatinous substance, and this central mass is, in turn, surrounded by a very close, dense, firm network of ex-

tremely strong connective tissue fibers (substantia fibrosa). These fibers are so arranged as to limit the central mass in every direction, except above and below, where the nucleus pulposus is limited by the bodies of the vertebrae. The nucleus pulposus is therefore under considerable pressure, so that when the surrounding fibers have been cut it bursts out, and cannot again be made to occupy so small a space. This pulpy central mass, under this strong pressure, gives the effect of a ball-bearing, and the spinal column is thus as flexible as if it were composed of a series of ball-bearings, while yet as strong as if it had no joints at all.

When lesions are produced suddenly the tendency is, usually, for the factors mentioned to lead to correction of the lesion. But if this does not occur, if the lesion persists for a few hours, in small animals, or a few days, in the human subject, localized edema of the disk occurs, together with the other inflammatory reactions already mentioned.

The swelling of the disk includes its entire structure. The peripheral fibers become logy and inelastic and more extensible than normal. The nucleus pulposus swells slightly, exerting pressure upon the peripheral fibers of the disk, whose increased extensibility permits this swelling. The affected articulation becomes less freely movable, and the disk fails to give the ball-bearing action. There is a tendency for the affected bones to remain in whatever position they may chance to occupy, for the resilience disappears with the loss of the pressure relations of the central and the peripheral portions of the disk.

In the same way, the connective tissues around the joint lose their elasticity and become more extensible. This permits the ligaments to lose their tone and become stretched on one side, and swollen and shorter than

normal upon the other side. Without this loss of elasticity and resiliency, no reasonable amount of tension would result; with the edema, acidosis and disturbed circulation, the persistence of the lesion is to be expected.

The muscles are also affected. The edema and circulatory changes affect them also; and their inelastic, logy, hyper-sensitive state is characteristic of the lesion-neighborhood.

The nerves which pass through the swollen connective tissues are affected; the swelling causes pressure upon the nerve trunks, which may be sufficient to interfere with the functions of the viscera and muscles innervated by them; thus, the muscles are further adversely affected, and the disturbed viscera send their abnormal sensory impulses into the spinal centers, adding to the effects of the disaster. The disturbed circulation, with its resulting diminished nutrition and oxygen supply, probably add to the disturbances of the muscles and the nerves of the affected region.

After a lesion has been present for many days or a few weeks, according to the size of the animal and the nature of the lesion, the edema is succeeded by over-growth of the connective tissue fibres around the affected area. These fibers may exert considerable pressure upon nerve trunks passing through them, and may be factors in holding the affected joints in abnormal positions. This appears to be most conspicuously present in the case of rib lesions. In vertebral lesions also some effects may be due to the overgrowth. (E. R. Hoskins has shown this overgrowth in X-ray plates.)

The intervertebral disks show most conspicuous changes. The nucleus pulposus becomes shriveled, and occupies even less space than the fibrous periphery permits. It does not burst out, when the disk is cut, but lies inert, a small mass of dry and appar-

ently lifeless tissue. The peripheral connective tissue fibers of such a disk are logy, non-elastic, and dry in appearance. Such a disk permits movement in any direction with some difficulty, and after the completion of such a movement there is only slow return to the original position,—no resiliency, no elasticity, no ball-bearing action and no sensation of energetic upright-ness, given to examining fingers.

These are the factors which are chiefly concerned in the perpetuation of vertebral lesions. Others are concerned in special cases; perhaps some others are concerned in all cases.

A consideration of the underlying pathology suggests the treatment. If there is any indication of disturbed metabolism, of deficient oxygen supply, or of acidosis in any of its manifestations, these things must be corrected. Mal-nutrition is especially to be guarded against in children and young people.

The corrective treatments must be repeated often enough to maintain for nearly or quite all of the time a normal structural relation of the affected area. The corrective manipulations, with their increased mobility facilitate better circulatory conditions and permit a more nearly normal metabolism on the part of the living tissues of the disks. The ligaments are subjected to tension also, and, if the treatment is properly given, they are

encouraged to the normal structure. (It need not be said that incorrect treatments may lead to stretched and weakened ligaments, increased edema, further pathology, and, more rarely, to the occurrence of fresh lesions.) Unquestionably, many lesions are corrected as the result of increasing the mobility and the general nutrition of the tissues concerned, without any skillful or specific adjustments of the affected articulations.

If repeated treatments result in weakened tissues, as shown on palpation, or if for any reason frequent treatments are considered unwise, then some one of the strap methods or the use of some artificial support should be considered. In any case, the treatments are not to be discontinued, but occasional examinations and such treatment as may be indicated thereby are essential to recovery.

In a few cases animals which had presented all symptoms of bony lesions have been given corrective treatments with apparent recovery and correction of the lesions. The examination of these spinal columns, after death, showed disks which varied from slight pathological changes to none at all. It appears, then, that the disk which has become dry, inelastic and apparently permanently injured, may yet be brought to its normal, or nearly normal structure by persistent attempts at correction.

Why the Osteopath Gets Results

A. E. Johnson, D. O., Rupert, Idaho.

(Paper read at Convention of Idaho Osteopathic Association at Boise, Idaho, Sept. 5, 1919.)

Immunity Introduced

When "Daddy" Still turned away from treating disease with drugs he substituted a new therapy based on the principle that the body contained its own cure for disease. For years he toiled on this principle, and when by actual results from his work he found he was right he began teaching his

principles and theories to the world. Thus we, his students, and many other people have found his principles to be true. But one question we asked before we became students of Osteopathy, and a question that is asked us almost daily in our practice is: How can the Osteopath cure infectious diseases simply by manipulating the spine and

adjacent tissues? I fear we have been content with the answer that freeing the circulation and nerve supply to the diseased parts does the trick. While this is true I hope to bring out one or two thoughts that may be new to some who have not had the privilege of Professor M. A. Lane's work. He has set out to answer the above question from a scientific standpoint, and my paper is largely taken from the instruction received from him.

Let us review briefly the work done by different scientists as it leads up to our point.

Discovery of Antibodies

The first work we will consider is that of Pfeiffer. It was known at his time that the serum of a person or an animal would kill a few germs injected into it. Therefore, working on this principle, he took virulent cholera bacteria and injected a very few into a guinea pig. This made the pig sick but it got well in a few days. Then he injected a larger dose, repeating this every four or five days for five or more times. At the end he found the guinea pig could stand a dose of germs that would kill at least ten other guinea pigs. He carried his experiment further by taking some of the serum of this guinea pig and placing it in a test tube with some cholera bacteria. He found the bacteria were soon dissolved. But when he put in bacteria other than cholera they were NOT dissolved, showing the serum was specific. Next he injected some of the serum into another guinea pig and then found that it could stand a dose of germs which ordinarily would have killed it. Thus Pfeiffer has shown that bacteria excites the formation of a substance in the blood that acts against that particular germ. Therefore this substance is called an antibody.

Antitoxins

Von Behring in his work with diphtheria, discovered that by growing the bacteria in a culture and removing the

bodies by filtration he could inject the filtrate, which contained the toxin of the germ into an animal and it produced symptoms of the disease and it also produced immunity. This antitoxin was used in the early stages of diphtheria and in most cases aborted the disease. The antitoxin neutralizes the toxin of the germ but it does not kill the germ, as live germs have been recovered from the membrane after the disease has been aborted by the antitoxin. Just what becomes of the germs is not known but it is likely they are ingested by phagocytes or dissolved by lysins.

Phagocytes

Phagocytes were discovered by Metchnikoff about 1883. He found when bacteria were injected into an animal there were certain white cells in the blood that ingested these bacteria. These cells he called phagocytes. Metchnikoff believed he had found the only method by which germs were destroyed in the body. He could see no value whatever in the serum or vaccine method of immunity. As Professor Lane says, "The phagocyte became IT and he (Metchnikoff) only the period.

Opsonins and Opsonic Index

Today both theories have their place and stand side by side in rank. This was accomplished by A. E. Wright in 1902, when he discovered opsonins. An opsonin is a substance in serum that affects bacteria so that they are ingested by the phagocytes. And without this substance the phagocytes have no power to ingest the germs at all. Each germ has its separate opsonin. In his experiment Wright used leucocytes with the serum all washed out. To this he added pure staphylococci in 85 per cent NaCl. The germs were not ingested. Next he put some pure staphylococci in some serum and let it stand over night. In the morning he washed off all the serum and put these germs in some serum-free leucocytes.

Now this time the germs were ingested, showing there was a substance in the serum that affected the germs so they could be ingested. Incidentally he proved that Metchnikoff's own phagocytes were dependent on an antibody.

From the discovery of the opsonin was developed the Opsonic Index. This is a method by which one can determine the power of an individual to resist certain bacteria. By this method one can also determine whether a patient is getting better or worse during an infection. The Opsonic Index is indicated by the number of germs a certain number of leucocytes is able to ingest. To Wright is also due the development of autogenous vaccination. In connection with this I wish to draw attention to his experiment. As he injected the autogenous vaccine of a boil in a patient the opsonic index dropped, then after a time it began to rise. The vaccine was again injected and rose as before. This was repeated several times with the same results and again the opsonic index dropped with the exception that the index would not drop so low as it did the previous time and would rise higher. Meanwhile the boils vanished as if by magic. The dropping of the opsonic index was called the negative phase and the rising the positive. The point I wish to make is this: That we probably get the negative and positive phases in our treatments. A negative phase is a good sign for a positive is sure to follow.

The length and severity of each treatment and the time that should elapse before the next one is administered are questions which demand the Osteopath's attention. I have often wondered if some of our laboratory men could not use the opsonic index in aiding us to answer these questions. Of course, I realize there is a great difference in treating different individuals and different diseases. However,

the study might reveal some interesting facts. I realize also that each physician learns by experience the answer to these questions—at least to a certain extent. But even if we have come to certain conclusions from experience we like to have these conclusions verified by laboratory methods if it is possible to do so. Just as I have attempted to show in the case of our founder. He said the body contained its own cure for disease. Along came Pfeiffer with his laboratory methods and proved that there was a substance in the blood which acted against germs. Then came Von Behring and found there was a substance which acted against the toxin of germs. Metchnikoff followed and said both were wrong; that there were certain cells in the blood that ate up the germs. Then Wright came along to straighten out the tangle, and incidentally added another kind of antibody. There are other antibodies we have not considered and need only mention. These are lysins, agglutinins and precipitins. A lysin is a substance in the blood that acts on germs causing them to be dissolved. Agglutinins and precipitins are substances that cause the germs to gather in bunches. Thus we have come to see that the scientists, through years of experimental work, have proved the statement of our founder that the body does contain its own cure for disease.

Erlich's Theory

There have been many attempts to explain just how the antibodies are excited and how they work in the body. But the theory most commonly accepted at this time is that of Erlich, which briefly is as follows: The living cell is composed of many molecules which are in a constant changing attitude. Food molecules attach themselves to the living cell, are drawn in and become a part of the cell. The metabolic product is thrown off and is carried to the liver and kidneys and ex-

creted. Now Erlich calls the molecule in the cell a receptor because it receives. The food molecule had two parts, an affinity group and a food group. The affinity group attaches to the receptor and is neutralized. The food group is then free to nourish the cell. A bacterium molecule has two groups, an affinity group and a toxic group. The affinity group attaches to the receptor molecule of the cell. But the toxic molecule destroys the receptor but does not affect the adjacent molecules unless there is another toxin molecule present.

Now according to Weigert's "Law of Regeneration," when a cell or tissue is injured the adjacent cells tend to replace it and do so over and above the amount required. Thus when a toxin molecule destroys one receptor its neighbors regenerate it and many more which float around in the blood stream and unite with the toxin molecules, neutralizing them.

Complements

The antibodies, such as lysins and agglutinins, require a complement, a chemical substance in the blood that unites with the receptor at the same time the germ does, and causes the dissolving or agglutination of the germ. Thus, according to Erlich, the body cell produces the antibody against the germ.

Keys' Theory

Professor Keys of Chicago says that the antibodies are ferments instead of molecules from the cells, and the liver and spleen are the principal organs that make these ferments. These organs contain one hundred times as many anti-bodies as any other part of the body. In working with pneumonia he has found the germs in certain hemophagic cells in the liver and where

they undergo dissolution. Professor Keys has not finished his experiments yet but if his theory is right it is important for us to know for we will want to stimulate the organs that make these ferments, namely the liver and the spleen.

Cause of Failure of Vaccine, Etc.

Theoretically, antitoxin, vaccine and serum therapy should be the ideal method of combating bacterial disease. But in practice it has not proven efficacious, except in a limited measure. Diphtheria antitoxin is perhaps the only one that will affect the disease after infection. The others of any value are good only as a prophylaxis, as for smallpox, typhoid, tetanus and hydrophobia. Perhaps the chief cause of their failure lies in the fact that it is almost impossible to get a specific antigen for each disease—by antigen I mean a bacteria that excites the formation of an antibody. There may be a great difference in the same kind of germ in different individuals.

Reason for Our Success

We are taking what should be the medical man's strongest point, but which in his hands is almost a failure, but in our hands is a success, for we can stimulate the formation of antibodies from a specific antigen—the germ that is in the body causing the disease. We know we can stimulate the action of various organs and also free obstructions. Therefore, if the antibodies are ferments, we can stimulate their production and hasten their passage to the site of the infection. If Erlich's theory still holds true, then merely freeing the passage of blood with its opsonins, agglutinins, lysins, etc., to the scene of battle will quickly turn the tide against the invaders.

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REVIEW AND COMMENT

Department Edited by

C. B. ROWLINGSON, D.O.

Why Does No Therapeutic System Cure 100% of Its Cases?

Because all the sick do not recover, therefore medicine is not an art.—CICERO.

Every form of treatment cures. Run the gamut of the alphabet: allopathy, balneotherapy, chemotherapy, divine science, eclecticism, faith-cure, and on through metaphysics, nestotherapy, osteopathy, psychotherapy, and quackery to zone-therapy: they all cure. But no one of them cures 100 per cent of its cases.

Why? There's the rub. In attempting to answer this question, it must be remembered that the beginning of any abnormality in the physical body is a signal which sets in operation natural forces of recovery, repair, or regeneration. It is safe to say that in the majority of cases healing would take place in the absence of outside treatment of any kind. "A physician is nothing but a consoler of the mind," wrote Petronius, nearly 1900 years ago; and to Voltaire is attributed the statement that "The physician amuses the patient while nature cures the disease."

In a certain number of cases, however, the odds are overwhelmingly against nature, and it is then that treatment is put to the test. For the sake of convenience we may divide all therapeutic measures into two classes: those directed at the symptoms or effects of disease, and those directed at the cause. Generally speaking, those directed at the effects are palliative, while those directed at the cause are curative. It is admitted, of course, that when the etiology of a disease is not known, as well as in some other instances, it is not practicable to treat the cause; in such cases, palliative

measures may be regarded as rational therapy. Granting that truly curative measures must be directed at the cause of disease, we must assign to etiology a position of paramount importance.

Man is a threefold being: body, mind, and spirit. Other terms may be used, but the essential point is that this trinity composes the individual. Aside from the followers of Mrs. Eddy, who insist that "all is mind," there probably are not many who deny that we have a body as well as a mind; but when it comes to the existence of the spirit, soul, or ego—call it what you will—there are a considerable number who are not convinced. Skeptics and unbelievers on this point are found in all walks of life. There are no figures to show whether the proportion among doctors is greater than elsewhere, but certain it is that the education and training of the physician have a strong tendency to make him a materialist; and it is this fact which causes him to ignore the spiritual factor in disease.

We know something of the relationship of mind and body in health and disease, and the influence of each on the other; but what do we know of the soul in its effect on health and the part it plays as an etiologic factor in disease? Practically nothing. Knowing that both mind and body are subject to derangement, what right have we to assume that the spirit is always in a state of perfection? Why isn't it possible that certain diseases of obscure or unknown etiology are physical manifestations of a troubled soul? Such a thought must have been in the mind of Shakespeare when he said of Lady Macbeth:

"More needs she the divine than the physician."

And Hawthorne, in *The Scarlet Letter*, wrote: "A bodily disease which we

look upon as whole and entire within itself, may, after all, be but a symptom of some ailment in the spiritual part." Considering the baffling etiology of cancer when approached on a materialistic basis, and in view of the incontrovertible evidence that many cases of it have been cured by spiritual or divine healing methods, may it not eventually prove to be merely a symptom of spiritual disorder?

Beginnings have already been made in this field of research, and the future will undoubtedly bring answers to these questions. Freud has shown the influence of suppressed sex instinct, placing, in fact, as many think, too much emphasis on sex. Another has enlarged Freud's theories, and has shown that the suppression of any one of several other instincts has a deleterious effect. The same investigator has shown that a suppressed feeling of moral uncleanness will almost invariably express itself in a skin disease: a startling statement surely, but one which, in view of the obscure etiology of skin diseases as heretofore understood (or not understood), will not be easily disproved.

The following classification of the more prominent branches of the healing art is taken from a synopsis of a lecture recently delivered in Los Angeles by Dr. Frederick Finch Strong, former lecturer at Tufts Medical College:

- A. Healing systems which act mainly upon the physical body:
1. Mechanical methods, as surgery, massage, osteopathy.
 2. "Nature Cure" methods, as sun baths, hydrotherapy, dietetics.
 3. Medical treatment, including allopathy and homeopathy.
 4. Radiotherapy, including the various treatments by radiant energy or electromagnetic waves, such as light treatment, ultra-violet rays, high-frequency currents, color therapy, electrotherapy, and X-ray therapy.

B. Those which treat mainly through the emotional body, such as:

1. Magnetic and mesmeric healing (not hypnotic).
2. Musicotherapy.
3. New Thought healing (especially those forms which use suggestions of joy, cheerfulness, happiness, etc.)
4. Artistic healing, by the use of beautiful surroundings, flowers, etc.
5. Spiritualistic healing, or healing mediumship.

C. Treatment directed to the mental body of man, including:

1. Christian Science, which regards all disease as "error of mortal mind."
2. Metaphysical and spiritual healing; also healing by prayer.
3. Suggestive therapeutics (with and without hypnosis).

There is little doubt that a liberal attitude of mind toward all these healing systems—an attitude that throws prejudice and preconceived notions to the winds, and selects the good in each system while discarding the harmful and dangerous—will result in the development of a pan-therapy which will come nearer to curing 100 per cent of the cases it undertakes to treat than any system now known.

Articles in Medical Journals of Interest to Osteopaths

The Old Humanities and the New Science, by Sir William Osler, in British Medical Journal, July 5, 1919.

Differential Diagnosis of Mental Diseases, by M. L. Perry, in Journal of the Kansas Medical Society, September, 1919.

Muscular Tonus in Relation to Fatigue, by Ryan and Jordan, in Chicago Medical Recorder, August, 1919.

Prenatal Care Propaganda, by J. H. Larson, in American Journal of Obstetrics, September, 1919.

Educating the Laity in Matters Medical, editorial in *Alienist and Neurologist* (St. Louis), July, 1919.

How the Army Controlled Disease, by G. A. Soper, in *American Journal of Public Health*, September, 1919.

Review of the Influenza Epidemic, editorial in *Boston Medical and Surgical Journal*, September 11, 1919.

Value of the Clinical Laboratory in Diagnosis, by R. E. Yates, in *Journal of the Tennessee State Medical Society* (Nashville), August, 1919.

Aims and Methods of Medical Education, editorial in *British Medical Journal*, August 16, 1919.

The Future of the Medical Profession, editorial in *Lancet* (London), August 30, 1919.

New Books

Shell-Shock and Other Neuro-Psychiatric Problems. By E. E. Southard.

The Feeding of Nations. By E. H. Starling.

Physical Basis of Heredity. By T. H. Morgan.

DON'TS AND DO'S

A column for the D.O. whose experience is principally in the future.

UNCLE PETE

On Vegetation

Don't belittle, in your own mind, the "Old Man," your competitor who has been manipulating every articulation, every tissue, almost, of the human machine for the past fifteen to twenty-odd years.

Don't hesitate to consult, nor make the mistake of not calling into consultation the "Old Man," in your case that has a baffling bony lesion. There is sometimes a difference in practice and theory.

Don't presume to know it all with your youth and your fine up-to-the-last-minute scientific education—cultivate the "Old Man"—there are many and varied good things you will absorb from him.

Don't miss a local Osteopathic meeting—you can *give* and you can *receive*.

Don't miss a State convention. It is

the place to renew the red corpuscles needed for your Osteopathic vigor.

Don't abuse the use of drugs.

Don't lose the least little bit of your confidence in straight Osteopathy because you do not succeed in some given case according to original plans and specifications. You know or *should* know that Osteopathy is all right if the Osteopath is all right. See what the "Old Man" thinks about that case.

Don't forget that Osteopathy is Common Sense—that often the lesion is in the mind; that often the cause of your patient's structural changes is in his habits.

Don't forget to learn by Observation.

Don't forget to learn and keep on learning. The D. O. who is brilliant today in five years will be a dusty boob if he does no learning as time goes by.

Don't fail to take these "Don't's" in the right spirit. We'll have some "Don't's" for the "Old Man" soon.

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Specialists

Not so very many years ago when an Osteopath had occasion to refer a patient for special treatment it was necessary that he call on a medical specialist for the reason that we had no specially trained men within our own ranks. But we are getting rather tired of subsidizing Osteopathic thought in return for medical condescension. We are beginning to hear gifted voices of our own. Are we true to our Osteopathic specialists? If we send our cases to medical specialists when Osteopathic specialists are available, whose is the fault if our Osteopathic specialists desert us and enter the medical fold? When we refer all specialty cases to Osteopathic specialists we will have gone a long way toward counteracting the popular notion that Osteopathy is in itself a specialty, and that serious or complicated cases requiring special treatment must go to an M. D.

An Osteopathic specialist of my acquaintance who has been in his present location for three years has had one tonsil case and two eye cases referred to him by members of his own profession during that time—an average of one case a year. During the past four months the M. D.'s in the same field have referred six cases to this same man. This specialist is a thoroughly competent man in his line, else the M. D.'s would not refer their cases to him, and he is too firmly grounded in Osteopathic principles to desert Osteopathy. But, should he, as a matter of professional expediency, desert the Osteopaths, could you blame him? Let's practice the ancient golden rule in the matter of referring cases and thus encourage the development of real Osteopathic specialists.

FRANK J. SLOAN

Hospitals Needed

If the Osteopathic profession will make Osteopathic hospitals as numerous as five and ten cent stores, keep uniform records and give real Osteopathic service therein, Osteopathy would be as well known in five years as the Ford automobile. We have a good article and the public wants it. However, our equipment is poor. We need to co-operate and build larger workshops. The demand already exists. The supply is faulty. Think it over.—P. A. Hubbell, D. O., Detroit, Mich.

An intelligent interpretation and diagnosis of each case, with a thoroughly well-kept record, will do more to advance Osteopathy and firmly fix it in the minds of the people than anything else. Well equipped and scientifically run hospitals will take the second place in advancing Osteopathy.—Harold Glascock, M. D., Raleigh, N. C.

As yet there is a great lack of Osteopathic hospitals. Most cities have none. As a rule, the wide land over, the Osteopath wishing to call in the aid of the surgeon's knife must knock with diffidence (and perhaps with downcast look!) at a door which, if opened to him at all—and I am told that for the most part it is not so opened—must be by the hand of a stranger. Only the consciousness that his patient's life depended upon it could have brought the Osteopath to that door at all, or having once gone, could have dragged his leaden feet there a second time.

What hospitals we do have, though few in number, need not fear comparison with any the world over. But the building and operation of a well-equipped hospital entails vast expense. Young and poor as we are as a profession, we must nevertheless essay it in every city in this land until the world knows Osteopathy as much for its hospitals as for its private practitioners.—Roy Bernard, B. S., M. D., D. O., Chicago.

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EDITORIALS

Call for a Great Leadership

No cause gathers force and forges forward without leadership. That leadership is usually a single man or at most a very few men. A Lincoln, a Lloyd George, a Gompers, a Gandier, must head every issue—without, there is no point, purpose or penetration.

Osteopathy's crying need at this hour is for a great leadership. While Dr. Still lived there was ever that sense of leadership. It mattered not that his later years were less active. He had done enough, spoken enough, written and inspired enough so that every D. O. worthy of the title reverently recognized in the old Doctor the embodiment of the principles of our science. Without such an embodiment ever before us we soon begin to lose vision and become uncertain of our bearings.

In the heart of most D. O.'s we may believe the old understanding of Osteopathy and loyalty to its principles are vital as ever. The fires of enthusiasm that come from an enlarged experience burn undimmed. These blaze up on occasion with rich radiance, but who has caught up the great torch with a readiness to carry it on through all the sacrifice a leadership demands? Too often such leadership means "poverty, heart hunger and misunderstanding." Few sons of men seek that route, and when they have been drafted, support and co-operation have often been lacking. Our big men are

too busy to tell us of their thought and work. We should somehow make it easier for them to lead us; and they should somehow feel "woe is me if I do not."

To elevate one for a twelve-month, discover his specific power and then let him settle back to his four walls and a ceiling is little profit.

If Osteopathy is the greatest life giving, life saving measure yet worked out for humanity and if you have any power to demonstrate, to organize, to write, to inspire, then as you value your own soul fail us not. Most of us are short men, our feet press the good brown earth but our heads too seldom rise above the fog.

If the call for Osteopathy is now a hundred fold, if our opportunity was never so sure, if our opponents were never so organized, and if the task of leading us as a united body was never more difficult, then the challenge must be worthy some leader's steel. We promise him no reward for that could not tempt him, but before the light of the fallen torch has dimmed let him step forth, catch it up and pay out his very life to lead us on, that Osteopathy as a science shall not perish from the earth.

Sue or Build?

When patients of wealth and influence say to our D. O.'s, "Why don't you sue these hospitals who refuse your patients admission, or why don't you build your own hospitals and sani-

tariums?" you would think someone would prick up his ears and get busy. Is it all because we are so busy anyway and so self-satisfied that we let the matter pass with simply a smile of appreciation? It must be disappointing to these big minded men and women who joyously revel in the glory of big jobs to note our inane, timid, listless attitude. They know what Osteopathy has done for them after years of disappointment with old methods; they see, as perhaps we do not, the bigness of Osteopathy, the standing it should have in the community and what it should mean to a world. They would like to see it line up with other splendid front door interests which they have helped to build. But you and I, visionless, cropful D. O.'s, seem too ready to let Dr. Still's *gift to the world* die in our hands rather than awake to the appeal of these, Osteopathy's real friends.

Room in the West

Plenty of room in California and the West Land for men and women who wish to practice Osteopathy—a score of good locations where any D. O. could soon get a paying practice or a P. & S. man do a general practice, including the ordinary surgical cases. Several county seats with good country about and no D. O. In the larger cities you may need a little coin of the realm and patience, but you will win if it's in you. We prefer able, Osteopathic D. O.'s, but come just as you are and we will make you over to suit. The day is past when we fear a competitor, for we know he will but increase our own practice while he is building up his own. (We heard a different story the other day from an old timer, but he is evidently still living in the nineteenth century and little knew whereof he spoke.)

There may be plenty of D. O.'s in L. A., but we doubt it, and the only

ones we have heard of who were trying to get away were those who wished to practice some specialty. D. O.'s here do not all make \$50,000 a year, but the day is past when the five figure Osteopath creates any wonder or curiosity.

We should not discourage our D. O. specialist, for when we have our hospitals in every center we shall need him more than ever.

But we have little use for any specialist who does not first know his Osteopathy and believe in it.

Our chief asset as a profession is that we have a better way, that we save most of our patients from knives and drugs.

Nearly every center could easily double its quota of D. O.'s to the profit of all. But if you must have quick action, choose the smaller cities.

So come to California and these West States, all of you who have the energy and vision of youth still in your veins, and help us build in this ideal clime your ideals and ours.

Next Legislation

Eighty members of the Assembly and twenty members of the Senate will be elected this year.

Do you know how the candidates in your community stand? The Medical League in this State is already organized with money, men and plans and these plans are not all to our notion, you may guess. Ours is always the advantage in that we appeal for a square deal and usually get it from our legislators. But we often have to make a wild scramble to get by when, as we learned last year, our friends could have done much more for us had they known our wishes in time.

The kiros have secured names enough to place their measure on the ballot at the next general election which, if it passed, would mean a kiro board and the licensing of all now in practice.

Will every society take up these matters and send in your suggestions? We may count on the 1921 legislature offering medical matters the keenest fight in its history.

Is there anything fair in our State laws that make it impossible for graduates of other schools of Osteopathy to secure the P. & S. license?

Do we want Dr. Gen. Wood for President?

Three hospitals refused admittance to a D. O.'s patient because the Medical League had directed these managers that it would not place them on the desired list if they did. There is a concerted action in all centers. What are you D. O.'s going to do about it?

Of course we have our differences; they keep us awake and growing and they are all amicably adjustable. But just now we would better begin getting our forces lined up for a real attack which is already on.

In the December issue of *Federation*, a Women's Club publication, the leading article is by Dr. Gwladys Morgan, on Parental Responsibility.

Dr. Morgan has been appointed chairman of the Child Hygiene Department for the ensuing year. We are proud of our D. O.'S who so capably take up such social work.

Dr. James H. Bell has recently taken over the practice of the late Dr. Browne, with offices at 3504 E. 14th St., East Oakland.

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Dr. Snyder Endorsed in New Jersey

Dr. Snyder spoke at length on the significance and legal aspects of the recent Daily case in Philadelphia, Pa., and deplored the misunderstandings and unjust criticism abroad regarding it. As a result of Dr. Snyder's statement it develops that there is a great deal involved in the case for the advancement of Osteopathy and that the profession should suspend judgment and criticism until such time as the whole story is told, when they will be able to read between the lines of the testimony and make a proper interpretation.

The meeting was so impressed by the discussion of the case that a resolution was passed endorsing the stand taken by Drs. Snyder, Flack, Balbirney and other witnesses for the defense of Daily.

Dr. Rowlingson's Department Appreciated

"January 14, 1920.

I have just received the December Western Osteopath containing in your department the list of medical articles of interest to Osteopaths, and I want to commend you on your progressiveness and encourage you in a continuation of this work which is sure to be of benefit to the profession as a whole.

I find here in Worcester that few of the Osteopaths ever consult journals outside their own specialty, and some do not know that they have access to these other journals.

H. P. FROST."



DR. C. B. ROWLINGSON

magazines are delivered for the full period of the subscription. He is always glad to answer inquiries and quote prices, by mail or telephone; or will send price-list on request.

Meet Dr. Rowlingson

ALTHO disabled since 1916, confined to bed and unable to practice his profession, Dr. Rowlingson refuses to be discouraged. He is doing a general magazine subscription business by mail and telephone. He takes both new and renewal subscriptions for all magazines, singly and in clubs, at prices that are the lowest any responsible agency is authorized to quote. He will give your order his personal attention, will forward it to the publishers promptly, and will see that the

Telephone Broadway 1022

796 Kensington Road, Los Angeles

Dr. Ferguson will take two months for a trip to Japan as physician to the Wallace M. Alexander family.

Mr. Alexander recently showed his interest in Osteopathy by a generous contribution to our Oakland Clinic, while Mrs. Alexander in conjunction with Mrs. F. M. Smith and Mr. W. H. Spaulding is a member of the Clinic board of directors.

We congratulate Dr. Ferguson on the opportunity for a much deserved outing in the blossom land, and Osteopathy is to be congratulated on its growing numbers of eminent friends.

The Pomona, Upland and Ontario Osteopathic Association met at the office of Dr. L. V. Howey, Upland, Wednesday evening, February 4th; eight members present.

Dr. Edythe Ashmore gave a very interesting talk on her technique in correcting rib lesions, upper dorsal, and sub-occipital lesions.

HARRIET M. DOOLITTLE,
Secretary and Treasurer.

London Letter

Dr. Foote Writes Our Dean of Clinic Plans

As President of the British Osteopath Association I have made it my policy to inaugurate a League for the Prevention of Spinal Curvature and I hope to have it affiliated with the National League for the Prevention of Spinal Curvature in America. The plan has been under consideration for several years past, but owing to the war it could not be made operative.

The League for the Prevention of Spinal Curvature will be incorporated under British law and the Articles of Association will give the right to have a clinic under the auspices of the League where and when required.

The first clinic will be started in London. We have the support of many influential people and the cash in the bank to guarantee the working costs and expenses for the first year.

Suitable premises will be secured in London in which to carry on the clinic

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The pioneer Osteopathic Institution of its kind on earth created for the sole purpose of treating mental and nervous diseases, an institution that has already proven the value of osteopathic treatment for insanity.

and be the headquarters for the League. A competent nurse will be in charge and a secretary will be appointed to look after the interests of the League.

The majority of the Osteopaths practicing in London will attend the clinic at stated times. In addition to the professional assistance we are able to give it is our plan to invite an Osteopath to come over from the States or Canada to be in attendance at the clinic

during the usual office hours. Under his contract he will have the privilege of starting a practice for himself at the end of twelve months or two years; the support given him during this time should be of inestimable value. After the expiration of his contract should he desire to practice in London he would be required to continue supporting the League by giving up a couple of hours per week treating at the clinic the same as other practitioners here in

THE DENVER POLYCLINIC AND POST GRADUATE COLLEGE

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No. 1 The Osteopathic Efficiency Course, intensified review over the most essential subjects with a view to greatest efficiency. The business side of practice. Personality in practice; a health program; all hard problems reviewed. Next course begins August 2, 1920.

No. 2 Cadaver and Clinical Course on Ear, Nose and Throat All operations reviewed; showed on clinics as far as possible; the student handles the instruments and does the operations on the cadaver. Next course November 1, 1919.

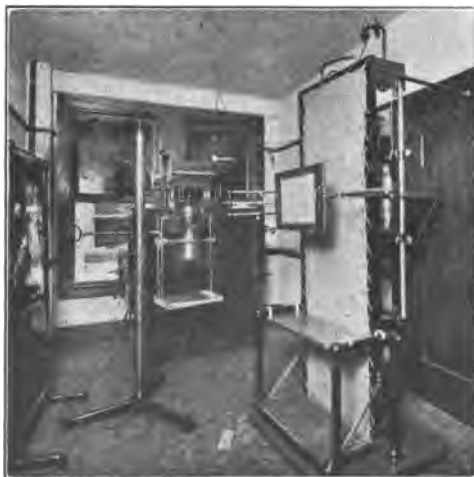
No. 3 Didactic and Surgical Eye Course. All the diseases of the eye are taught with treatment. Eye surgery is done by the student on the cadaver. Refraction is given so you may do the work in your own office. Next course April 1, 1920.

Time. Each course lasts one month, six hours a day.

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LOS ANGELES, CAL.

London are doing, or pay in cash what would be equivalent to the two hours' work if he so preferred.

I am prepared to receive applications from Osteopaths who may desire to come over under this scheme. A fair living wage will be paid and the privilege of having a few private patients.

The applicant chosen by the League of Directors must be a good operator and possess a spirit of enthusiasm for

his work which will give confidence and gain additional support for the League and the clinic.

Doctor, would you be good enough to give this matter your attention and the publicity it deserves and assist us over here in whatever way you can in securing the right man for this position?

A Sane, Thoughtful, Scientific Presentation of Osteopathy Osteopathy as a Science

BY JOHN COMSTOCK, D. O.

Scientific Director, Southwest Museum, Los Angeles, California

This excellent article by Dr. Comstock is put out in attractive brochure style supplemented with a number of brief "popularized" case reports telling of Osteopathic treatment and success in typical common complaints. Conditions covered are: Gastralgia, Appendicitis, Facial Paralysis, Brachial Neuritis, Headaches, Acidosis, Piano Player's Cramp, Influenza-Deafness, etc.

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1. *Lessened labor.*
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6. *More money in the bank.*

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In his answer, Dr. Bowling says:

Permit me to thank you for acquainting me with your project for advancing Osteopathy and the health interests of your land. It has long been my belief that Osteopathy has no more important opportunity than that of early inspection and adjustment of the human ma-

chine. Were this done carefully and painstakingly, there would be fewer wrecks along life's highway to be corrected by the Osteopathic physician. I genuinely hope your plan may grow into one including this important child welfare work and hope your scheme for human betterment will be emulated successfully by our people.



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What we need now more than anything else, is the active continuance of our education of the public and the legitimate extension of ethical propaganda, until the time shall come when the mere mention of Osteopathy at once develops an understanding and appreciation of certain fundamentals of biology as applied to the human body.

The hearer will know that, to whatever extent facts have been ascertained, regarding the nature of the body and of its functions, the usefulness of surgery, either general or special, the importance of manipulation and adjustment in restoring disordered tissues and functions, and the comprehensive consideration of every other means which has been discovered during the history of the world for the alleviation of human ills, all of the truths from these researches are included in the science of Osteopathy and will be intelligently applied under the Osteopathic caption for curing sick people.

R. D. E.

"Splitting Fees"

Q. What is your business?

A. General practitioner.

Q. Whom do you serve?

A. The public.

Q. What are your duties?

A. To prevent and cure disease.

Q. Do you succeed?

A. Yes, so far as I am capable.

Q. When you fail, what then?

A. I call assistance—co-operation.

Q. Who compensates you?

A. The patient.

Q. Who pays the other physician or surgeon?

A. The patient.

Q. Do you "split" your fee for "previous services" with the "new doctor"?

A. No, why should I? Didn't I do all the work?

Q. Did you ask the physician or surgeon to whom you referred the case to "split" his fees with you, for work he did?

A. Well, I must admit I did, but I never realized the inconsistency before.

Q. What are you going to do about it from now on?

A. Well, I do think if I "drum" up the case at the expense of my time the "other guy" should "divvy."

Q. Is it your business to "drum" cases or to "doctor" them?

A. I consider myself a physician.

Q. Then you owe the patient your best advice as well as skill, do you not?

A. Y-e-e-s, but—

Q. Why make exception?

A. Because there is not a surgeon in the cities and also here in town, even in the medical societies, who doesn't "split" 50—50 with us fellows if we send him a case.

Q. Then you are "grabbing" simply because "grabbing" is good?

A. What harm is there in it?

Q. I suppose, then, that you would "steal" because "stealing" was good, that is, because "others" were "stealing"?

A. I don't see why "splitting" is "stealing."

Q. Would you consider it fair for the surgeon to whom you referred the case to come back on you for a "split" of your hard-earned fees just because all surgeons agreed to do it, wouldn't that be "stealing"?

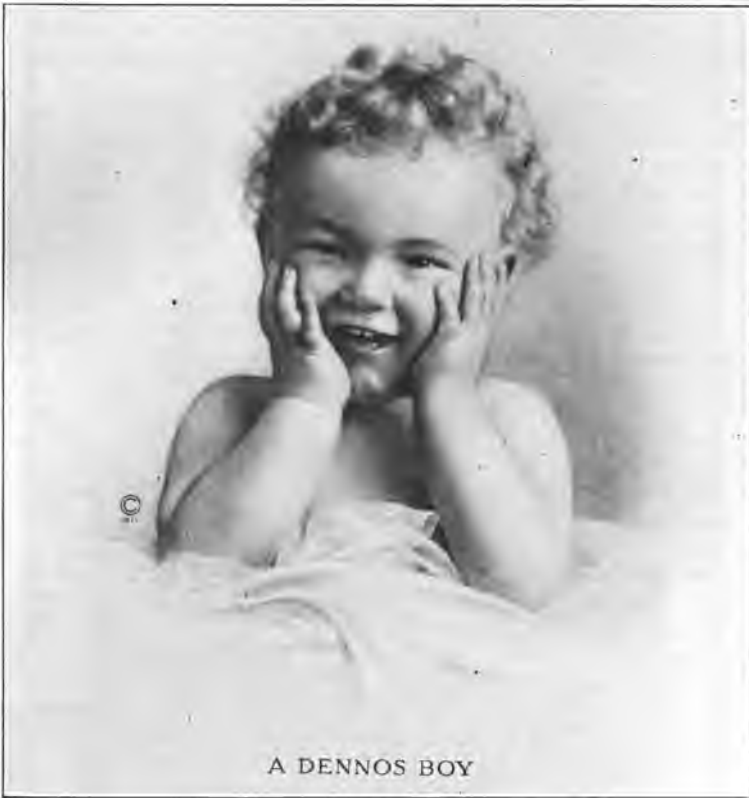
A. You don't understand me. The surgeon wouldn't have the case unless I had sent it and therefore—

Q. I suppose, then, that he should "split" on every case sent him, for seventy-five to ninety per cent of a specialist's cases are referred by the general practitioner?

A. Yes, I do.

Q. Do you mean to say that he should give you half of every examination and half of every treatment?

A. No! That is different, and yet I don't know but what he should "split" on everything.



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Generous samples, descriptive literature and feeding formulas sent on your request.

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operation that was not necessary, and was harmful.

Following is from the *Herald of Health*:

"From present indications the Osteopathic profession is headed for the rocks. It is a safe prediction that when the present generation of Osteopathic practitioners die out Osteopathy will be a branch of medicine. The teachers in Osteopathic colleges are either medical practitioners, or have aspirations in that direction. It is becoming increasingly difficult to find a simon-pure Osteopath, except among the older graduates. The present-day Osteopathic student is nothing short of a medical ape.

"Gradually the Osteopathic colleges are falling into the trap set for them by the A. M. A. One college in California has already been forced to close its doors. In Illinois the Osteopaths are asking the Legislature to grant them the right to use narcotics, anaes-

thetics and to perform major surgery. When the Osteopath takes up medicine as a side line, what excuse is there for the existence of Osteopathy as a separate, distinct system of healing?

"The trouble with Osteopathy lies in the fact that it was founded on a partial truth. Ever since the practitioners discovered that the 'bony lesion' theory of disease was inadequate and that a shift of foundation was necessary, there has been a steady drift toward the old-school practice of medicine. Had Osteopathy continued to progress instead of backsliding it would be the bulwark of natural therapeutics. A few years more at the present rate and we shall be obliged to sing a sad requiem over its emaciated form."

The healing method of the future is the Nature Cure, or Naturopathy, which includes all rational methods of removing obstacles to the never-ceasing effort of nature to restore normal conditions.

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Personals

Dr. Roland F. Robbie and Miss Clyda Russell were united in marriage Sunday, the 28th of March, at Gilroy, Calif. They will make their home in Oakland. Miss Russell comes from one of the old families of Berkeley and spent a few years in educational work. The doctor received his A. B. degree at Beloit College and took his professional work at Chicago and Los Angeles. He has made good in this community and his hosts of friends wish them great joy.

Dr. Hildegarge Schreiber and Dr. Errol R. King were married during the past year and are located at 204-6 Pennsylvania Building, Riverside.

Dr. H. Burns Currie of 19 Royal Crescent, Glasgow, Scotland, was married on the 20th of December, 1919, to Dr. Robert G. Lawson, C. O. P. S. He came to Glasgow to practice when he was demobilized from the British Red

Cross (Quaker Unit). They practice together at the above address.

Dr. Edward T. Abbott announces the opening of his office, suite 514-15-16-17 Markwell Building, Long Beach, Calif.

Dr. Mae L. Dowling announces her removal April 1st to suite 608-09 Central Building, North Raymond Avenue, Pasadena, Calif. Tel. Fair Oaks 598.

Word just comes of the recent death of Dr. Mary O. Greenwell of Santa Cruz after a short illness from pneumonia.

Dr. and Mrs. McManis will arrive in Los Angeles on or before the 15th of May. They will spend several weeks in that part of the State. Will have McManis Table De Luxe with them and will demonstrate McManis Table Technic at the College. They will attend the California State Convention and will place the McManis table on exhibition.

A Standard Diet for Infants, Invalids and Convalescents



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DIGESTIBLE
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- - RACINE, WIS.

Denver Polyclinic and Post-Graduate College Gives Winter Efficiency Course.

On February 29th one of the most successful Efficiency Courses ever given by the Denver Polyclinic and Post-Graduate College closed. Dr. C. C. Reid, President of the College, assisted by some of the ablest men in profession, gave many splendid lectures, clinics and demonstrations along nearly every branch of practice. Among those assisting with the teaching was Dr. Frank L. Bigsby of Kirksville, Missouri, who gave much splendid work to the doctors. The Course was well attended and all went away expressing their satisfaction with the Post-Graduate College. The College will give its next Efficiency Course in the month of August.

Denver Osteopaths Buy Hospital

The Rocky Mountain Hospital and Polytechnic Association consisting of the leading Osteopaths of Denver, has bought property for the first Osteopathic hospital in Colorado. The building is located at 2221 Downing St. The institution will accommodate twenty-four beds and will have a completely equipped modern operating room for nose and throat and general surgery, diet kitchens, nurses' quarters, bath-rooms and offices.

The hospital is to be operated on a non-profit basis, the rooms and wards being equipped and maintained by subscriptions.

Thirteen trustees will control the management of the new hospital. The officers elected for the first year are: Dr. Geo. W. Perrin, president; Dr. R. R. Daniels, vice-president; Dr. C. C. Reid, secretary; Dr. M. Morrison, assistant secretary, and Dr. W. L. Holcomb, treasurer and general manager.

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LOS ANGELES, CAL.

Quotations from Doctors: No. 1

"To mention the hygroscopic action of glycerine to any one who has the slightest knowledge of chemistry, is unnecessary. But to be able 'to harness' this action and utilize it as a therapeutic agent of great potency, is worthy of note.

In *Antiphlogistine*

we have such a combination; and it has stood the test of many years. It has shown that, in proper mixture with a suitable base, the acknowledged osmotic power of glycerine may be greatly intensified; that through this action congestion in all tissues may be reduced, thus relieving pain from distension . . . and acting as a stimulant to normal circulation, and hastening resolution."

THE DENVER CHEMICAL M'F'G. COMPANY, NEW YORK

The March Circuit

After two leaders had prepared the way it was not difficult to follow the trail—Dr. Ruddy, always popular and practical; Dr. Edmiston, a technician of no mean skill. Many were the testimonials to the value of their visits and demonstrations. We had hoped to write up the whole long, interesting story but this is our great annual surgical number and already some excellent things have been cut out. It would take just ten pages and fourteen cartoons to do the circuit trip justice. Fresno gave us a running start, Oakland bumped the high mark financially through help of bay specialists and so on through Stockton, Ashland, Eugene, Portland, Walla Walla, Boise, Pocatello, Longmount, Denver, Colorado Springs, Pueblo, Grand Junction and Salt Lake City, which for the final scene staged a wonderful driving snow storm a foot deep and a mile high. It would be a story of courtesy, co-operation, loyalty, sacrifice and enthusiasm manifest everywhere and by everyone for the circuit clinic and those who promoted it. Thank you. C. J. G.

San Francisco, June, 1920

Save the Date

June will be a great month in San Francisco. Bryan and the Democratic Convention plan to be there, but that is but a small matter. In spite of the fact that more than a score of other conventions will convene that month San Francisco has saved out one whole week to give the Osteopaths possession of the Civic Center and the freedom of the city.

June 14th to 19th, inclusive, four to six hours for the Post Graduate Course alone, the balance of the time devoted to the California State gathering and the W. O. A. sessions.

The College, faculty and all, will be moved up from Los Angeles that week and then some. Exhibitors, many you have never seen before, will interest you.

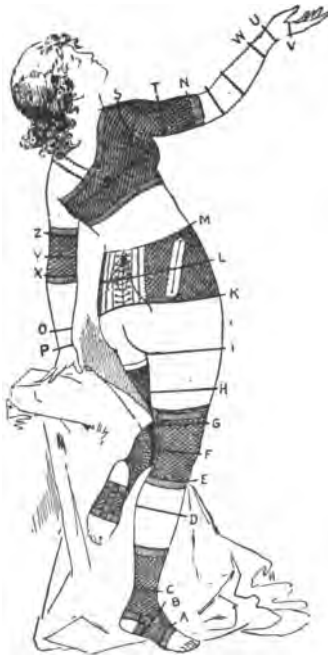
The Program Committee, Chairmanned by Dr. Ivie, is preparing a strictly Osteopathic program, together with the latest developments in various branches of medical knowledge.

Leaders from the North, leaders from the East, together with delegates from every Western State, are coming. Technique will be stressed throughout the whole week. Among the new features will be Dr. C. C. Reid, with his popular Efficiency Course. Dr. Tasker will be pressed into service with his marvelous color photography, a side specialty which he has developed that is attracting the attention of students and artists all over the country.

Receptions, dinners, banquets and auto rides will add to the general festivities. These and many others will be among the entertaining features that will enrich your visit. Some of you have never seen the wonders of California and the West. This is your opportunity. Come.

Elastic Hosiery Abdominal Supporters

made to order from fresh, live rubber, by competent workmen, giving you a perfect fit and fresh durable goods.



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DR. LILLIAN G. BARKER
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DR. ERNEST G. BASHOR
OBSTETRICS

DR. J. E. WATSON
ASSOCIATE EAR, NOSE
AND THROAT

DR. LOUIS C. CHANDLER
HEART, LUNG AND
NUTRITIONAL DISEASES

DR. HORACE A. BASHOR
ACUTE PRACTICE

DR. FERD GOODFELLOW
DEPARTMENT OF
ADMINISTRATION

LOS ANGELES CLINICAL GROUP
OF
PHYSICIANS & SURGEONS

EIGHTH FLOOR FERGUSON BUILDING

We take pleasure in announcing the return of Dr. Edward B. Jones from Eastern clinics where he devoted especial attention to the study of renal functional tests and prostatic surgery.

In the future Dr. Jones will restrict his practice to the treatment and surgery of the genito-urinary organs.

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STACKS

1, 3-5, 7-8

GIFT
MAY 28 1920

Cortex Edition

of

The Western Osteopath



Edited by
Student Body
of the
College of Osteopathic
Physicians and Surgeons
Los Angeles, Cal.

Vol. 14

May, 1920

No. 12

PREFACE

OFTEN written, though seldom read, the preface of this book may help you to a better comprehension of the spirit which was manifested in its composition.

The official year book of the Los Angeles College of Osteopathy was called the "Nucleolus" in the year 1909. This title was changed in 1913 to "Reflexes." Then again in 1915 it was changed to "Cortex," which title is held by the Student Body of The College of Osteopathic Physicians and Surgeons as official for their annual publication.

The spirit of the College at the beginning of the fall semester of 1919 was to publish as their year book a "CORTEX" Edition of the WESTERN OSTEOPATH.

In this Edition we hope to recall to those who are out in the field of practice memories of their College Days, and to impress upon the profession that the Student Body of the College of Osteopathic Physicians and Surgeons has "The Spirit of Osteopathy."

THE EDITOR.



INTRODUCTION

THE editors stand in the entrance of this book and extend the warm hand of friendship and good fellowship to all who enter.

We wish to express our full appreciation of the loyal support and hearty co-operation of our faculty, alumni and fellow students.

The pleasant task assigned to us has been completed to the best of our ability, and we have endeavored to cull from the various sources at our command items which would prove interesting to you in all of the various moods to which mankind is heir.

We believe the "Cortex Edition of the WESTERN OSTEOPATH will find favor in your sight, and we respectfully request you to allow your expressions of commendation to be all inclusive, justly embracing our loyal contributors who have unselfishly devoted their best thoughts and service to this work.

Our guiding axiom has been "Justice to All," and same has been meted out to the best of our judgment. We did not have sufficient space at our command to publish all of the good things we received.

In trying to voice our impression of our faculty we found we were surrounded by such a maelstrom of greatness it was indeed a herculean task to do "justice to all." If you cannot see yourselves as we see you, or if in the glamour of brilliancy we have confused your virtues, kindly forbear to pass harsh criticism, but realize that we are all integral parts of the one great College, welded together in an atmosphere of mutual love and helpfulness; thus commendation to one is commendation to all, and only the best is good enough for one with a heritage so royal as ours.

We assure you there is a spirit of kindness and good will back of every word in this book, and if it is not plainly manifest, kindly think of us as we wish to be, rather than as we seem.

THE EDITOR.





**We, the Student Body
of the
College of Osteopathic Physicians and Surgeons
dedicate this 1920 Cortex Edition
of the
Western Osteopath
to the Spirit of a Greater Osteopathy
and to
Dr. Charles Hughes Spencer
the man who embodies this spirit of the future,**





THE SPIRIT OF OSTEOPATHY

TELL me, O Spirit! for of thy wisdom all the world is now aware:
What is the secret of thy rapid growth, and whence the strength by
which yon sharp and many taloned vulture of pain—whose monu-
ment is dead men's bones—now stands subdued, securely fastened to thy pedes-
tal? What mean the books and manuscript piled on thy right, the instruments?
While at thy back a chart I see, by mystic figures almost hid from view. Why
holdest thou a grinning head, whose empty orbits seem to stare forever forward,
as tho' 'twere all some foolish farce, and he the chief and only actor?

"Answer me, O Spirit! for I, too, would learn to use the wisdom which hath
come to you."

"Listen, then, and listening, learn that thy responsibility is greater for thy
listening:

"My growth—which like light on a foggy night, first but a speck, grows
luminous with startling suddenness—is, as you have rightly guessed, the prod-
uct of the things by which you see me here surrounded:

"This vile,* froulsome, rapacious bird of prey,
Hath hooked the hated hood on his own head.
I've followed him relentless night and day,
Learning his secrets from the living and the dead.
The books, the manuscript record his crime,
The instruments, the eyes, by which are seen,
From ancient, down to the most modern time,
How weak, how puny man's defence hath been.

No mystic signs you see upon the chart;
But truths of light, in outlines clear and bold.
Each sign a cell, each cell a vital part
Of evidence, wherewith 'King Pain' we'll hold.
'A foolish farce' you say—No! Tragedy!
Revealed by study of this empty head
Dame Nature's laws obeyed, Life's smile you'd see:
Thru' ignorance, Death grins at you instead.

Wisdom is won by work, and work wants Will;
Improve your little span; come, work with me.
I've foes, 'tis true, but 'Truth they cannot kill.'
'Live on! Spirit of Osteopathy.' "

W. C.

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YOUR COLLEGE—THE INDEX OF PROFESSIONAL VITALITY

By LOUIS C. CHANDLER, B. Sc., M. D., D. O.

AMONG the outstanding characteristics of every successful contributor to the progress of human knowledge and understanding have been the virility of his conviction and his persistence in teaching to others the things he has discovered. In fact, this insistence on the privilege of teaching has been but the normal expression of the virility, the desire for intellectual offspring. The religious leaders, the philosophers, the scientists, the educators of all ages have stamped their conception of truth in human minds in proportion to their earnestness as teachers. There is danger ahead for the future of those who depend entirely upon faith and forget to work. The comfortable philosophy, that what is true will live, is a good bulwark against discouragement.

ment; but truthfulness to nature is not a guaranty of survival for systems of thought. Premature birth, or being "Ahead of its time," and timidity on the part of its progenitor have been responsible for the demise of many a promising contribution to human understanding. Many a truth has lived into the ages only upon its rebirth under a sturdier parentage.

All of us who have thrown in our lot with that of Osteopathy as a distinct system, realizing in so doing, that we were courting the opposition of one of the most powerful groups in our civilization—the organized medical profession, believe that our philosophy and system of practice should live and grow. The times, shedding superstition regarding health and disease, are catching up with the spirit of Osteopathy. The rugged vitality of our original progenitor, Dr. Still, endowed the earliest of our professional family with the vigor needed to live through the early period when popular superstition and conservatism were strong against us. As a profession we have reached the age when it is no longer befitting to suffer from growing pains nor to allow the impetuous intolerance of an adolescent state to interfere with our harmonious co-operation. On the West Coast, at least, the profession has shown the wisdom of maturity in its action of making the College a part of its association activities, in assuming a proper function, the education of its coming members. The College has passed through the period of readjustment needed to synthesize the slightly differing ideals of the groups of the Pacific and Los Angeles Colleges. The trying difficulties of the war situation have been surmounted. A student body earnestly Osteopathic in its convictions and adequately trained to receive instruction is already filling the college quarters. The time for an expansion of our College facilities is here.

At the beginning of the present semester, a great step was taken in amplifying our physical equipment for instruction. Space was secured, readily accessible to the present college location, for the installation of commodious laboratories. The ten thousand square feet of floor space thus made available has been divided into six large laboratories, with one central storeroom. Already the laboratories of Chemistry, Zoology, Bacteriology, Physiology and the combined laboratory for Histology, Embryology and Histopathology, are equipped and are in active operation. There now remains for completion only the Physics laboratory for the pre-professional course. The material side of our equipment is truly adequate for a high-grade course of instruction in all of the Medical Sciences as well as for practical instruction in the Clinical Departments.

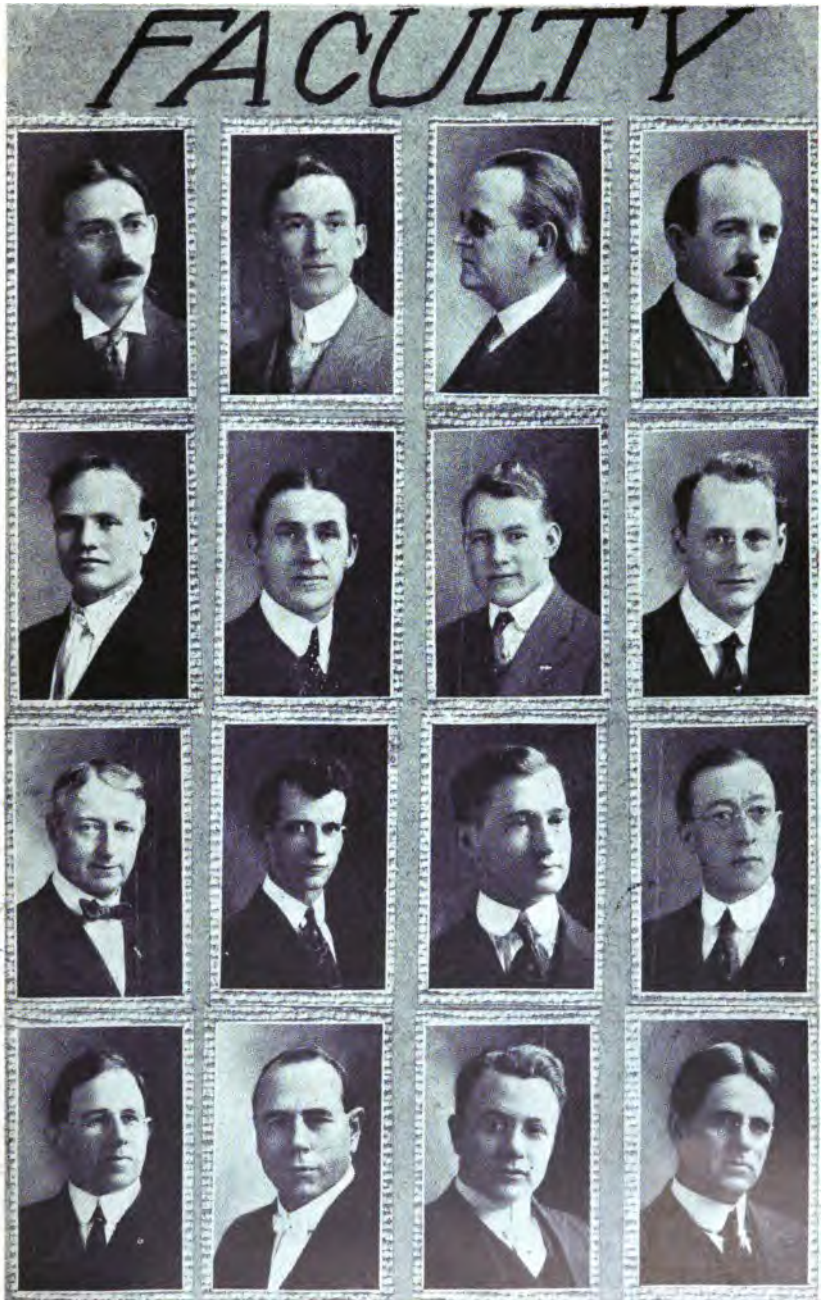
Our next step must be to augment the personnel of the teaching staff. It is no longer a time for the teachings of the college to be given by the few who happen in the past to have been affiliated with it. The College represents the West Coast profession, and in its clinical teachings it should present to the students the experiences of the largest number possible of the profession's successful men and women. But there is another vital reason for this augmentation of the Faculty. To properly learn the solution of clinical problems, the student needs close personal association with the clinical instructor such as can be supplied only with a large staff. The plans for the colleges next year provide for this increase, and for the organization of the Faculty, so that it will function smoothly in spite of its greater size.

The one urgent need for a great success is the proper attitude of the profession and the College toward their common problem. The College exists for the sake of the profession. It is not the only, but nevertheless one of the most

important functions of the profession. Without it the profession would die a natural death in one generation. This is why it is desired to have driven home to every Osteopath and to every student who is preparing to become an Osteopath: insofar as the members of the Osteopathic profession become earnest teachers we give evidence of our professional vitality and we insure the survival of our system. For the perpetuation of Osteopathy we need students, but we need teachers just as much; not only from among the older members of the profession who contribute of their clinical experiences, but from among the younger members who can contribute assistance in the handling of the scientific subjects which had not been developed in the course at the time our clinicians took their College training. The student even before graduation should commence to look forward to the possibility of his, at some later day, joining the group which now is endeavoring to prepare him to enter practice, and to bring with him the viewpoint of the student to assist in the solution of the ever-changing problems of a growing institution.

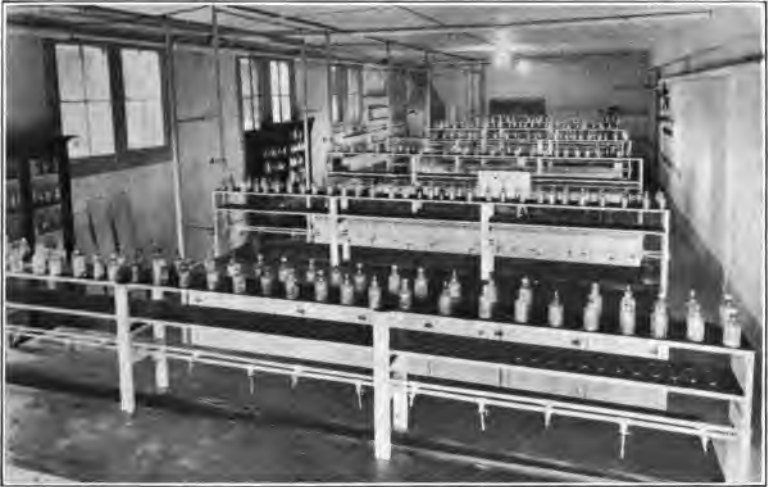
May the College's next year reflect the vitalizing effects of the professional organization campaign that has recently so thoroughly unified the profession.







The College



THE College of Osteopathic Physicians and Surgeons is operated by and for the benefit of the Osteopathic profession through a Board of Control composed of members of the profession, together with laymen who have subscribed to the Endowment Fund of the College. The management of the College affairs is vested in a Board of Trustees, elected largely from the Board of Control. It is the aim of this Board of Trustees to so conduct the affairs of the College that it will merit the approval of and be worthy of the united support of the entire profession.

The College Endowment is now well on its way to success, there being subscribed to this fund more than sixty-five thousand dollars. The student body has very generously shown its loyalty by practically a 100 per cent. subscription. It is the hope of the college management that with the aid of the entire profession this fund may be increased many times over the present figure, and through it build an institution which will be the equal of any of the educational institutions of the present day.

Long known as a tourist center, Los Angeles, now the metropolis of the Pacific Coast, is rapidly becoming the commercial and manufacturing center of the entire southwest. These conditions offer to the student many sources of employment from which he may obtain a fair compensation if he finds it necessary to earn a part of his living while pursuing the college course. Situated as it is in a very beautiful valley, half-way between the mountains and the sea, it offers every opportunity that one might desire in the way of recreation.

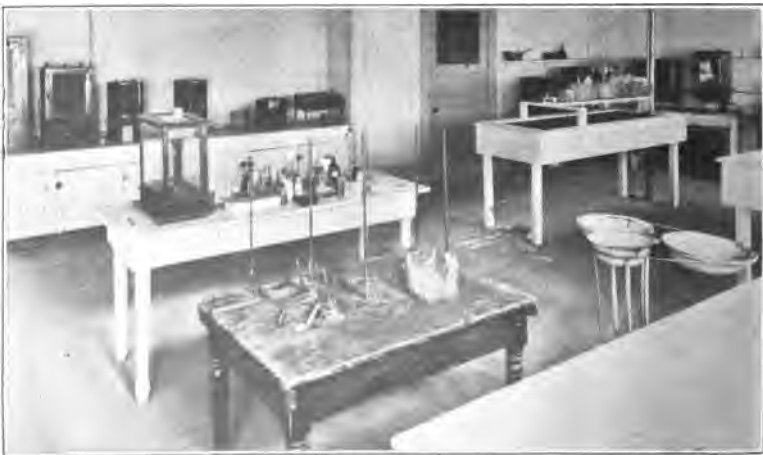
The college occupies the entire third floor of the San Fernando office building, located at Fourth and Main streets. This building is absolutely fire-proof and modern in every respect. In addition to this we are just completing the installation of our various laboratories in a building adjacent to the one we now occupy, which will more than double our floor space. These laboratories are being furnished with the very latest in laboratory equipment and when completed will be equal to that of any similar teaching institution. As is the case with the laboratories, every department of the institution is thoroughly equipped, being supplied with the very latest apparatus that is to be obtained.

In connection with the business office the college maintains an extensive library, on the shelves of which are to be found most of the up-to-date medical text-books and magazines. This library is well patronized by the student body and is also open to any of the profession who desire to make use of it, and it is not only hoped but urged that they avail themselves of this opportunity.

The clinics of the college are well patronized; every department having all or more than it can do. All clinical departments are supervised by members of the local profession who are specialists in their particular line. The fact that we are in a down-town location makes these clinics available not only to the entire city of Los Angeles, but also to the outlying districts and suburban towns.

Through the student body organization, college social affairs are well and carefully planned and the newcomer is made to feel at home as soon as he has entered the institution. The semi-annual Field Days are arranged and conducted by the officials of this organization. These events are very much enjoyed, not only by the student body, who always attend in goodly numbers, but also by quite a number of the profession in Los Angeles and near-by towns. Officers of the student body also have charge of athletic affairs which are conducted by the students of the college.

On account of the problems brought on by the ever-increasing cost of living, we have been working on a plan whereby students attending the college will be able to materially reduce their living expenses. We hope to have this completed and in operation by September. It is, however, a well known fact that



climatic and other conditions surrounding Los Angeles, enable those who desire to live much more economically than possible in any of the cities which are not so fortunately situated.

The College at the present time has a loyal student body, of which it is justly proud, but these students will soon be graduating, and as they do, if we are to continue to conduct a college, we must not only fill their places but increase their number. To do this we must necessarily depend in a great measure upon those already in the profession. With your co-operation and support we might easily expect to enter upon the coming school year with the largest enrollment the college has ever had.

OUR COLLEGE

STRANGE feelings are awakened within us by the mention of your name. Of course, we know you're far from perfect; yet you are ours, you belong to us, and, like our Mothers, though you have your faults, who of us would change ours for another.

You are alive and constantly changing. Who wouldn't with all you have to contend with? Unruly children have grown, who are sure they know more than their elders; wanting this and that, complaining and half-ashamed of some of your old-fashioned ways. Think many of your beliefs and teachings not quite scientific, still proud of your accomplishments and willing to challenge another Alma Mater, who dares to criticize you.

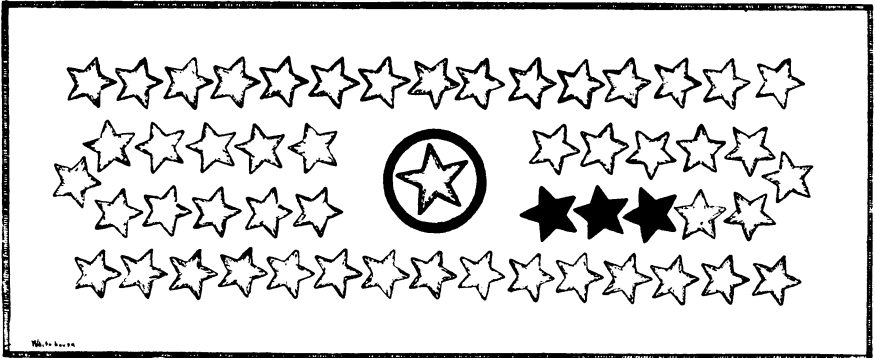
You have stood patient, progressing through the years, holding fast to the sterling principles upon which you have established your own life, and given life to those you have sent into the Profession.

Your strength is that which comes from the blending of many minds and purposes, strengthened by differences, difficulties within and opposition from without. The bulwark of your character comes not alone because it is founded and centered on truth, but because that truth has been tried, tested and proved sufficient.

We are not satisfied with your abode. It is much easier to impress and attract in this world if all the outward surroundings are fitting in architectural harmony and classic suitability. But, the really great of the past have been barren of outward show and what they gave to the world was something from within themselves, that was greater than material accomplishments or outward surroundings.

So though to you, as to all the great, time offers reward in a material way, we doubt if your real Spirit, Vision or Purpose will be any greater than in the years in which we have called you Alma Mater.

What of our love and loyalty to you? It must be shown by our work in the field and our efforts to interest others in our beloved Profession.



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 SECORD, R. L.
 WESTON, ALBERT W.
 BIGELOW (deceased).
 EPPERSON, U. M. (de-
 ceased).
 FRATELLO, A. (deceased).

TO THE MEN WHO DID THEIR "BIT"

Here's to the men who answered the call,
 Who joined Uncle Sam without a squall;
 Who worked faithful with all their might,
 To do their "Bit" in that big fight.
 Who went overseas and fought hand in hand
 'Gainst Fritz, who was conquering the land;
 Who stayed over here awaiting their call,
 To go "over there" and give their all;
 Who lived in the trench, who flew in the air,
 Who traveled the sea, and everywhere;
 Who fell on the front, in his last stride,
 Who gave his life with God as his guide;
 Here's to the men who answered the call,
 Who did their bit—one and all!

W. T. HURT.



THE CITY MATERNITY SERVICE

MAINTAINING the first degree of public health is uppermost in the minds of all. Every medical teaching institution has a serious duty in this respect. "The proper education of medical students is a public health measure." There is probably no problem confronting medical teaching institutions that presents more difficulties than securing ample and satisfactory clinical obstetrical work. Some of the causes of this are evident, viz: regulation of date and time of labor, getting patients to submit to clinic for delivery where large classes are present, handling the expense necessary in a well-organized and equipped obstetrical service.

However, in every city there are scores of patients in need of competent obstetrical service, not only for labor, but anti-partum and post-partum care. It is estimated that over twenty thousand women in the United States die annually from conditions which are the direct result of pregnancy. Los Angeles realized her responsibility to needy mothers some twenty-five years ago and started to meet this duty by commencing a systematic Maternity work. From this beginning evolved the establishment of the Division of Obstetrics of the Los Angeles Health Department. This in reality is the Maternity Dispensary and is to provide competent attendants including a licensed physician and nurse for needy mothers during pregnancy, labor and the lying-in period.

This department of the health work in Los Angeles has grown from a non-entity to an institution caring for hundreds of cases every year. The summary for the year ending December 31st, 1919, shows the following:

	Cases
Deliveries (7 pairs of twins).....	558
Pre-natal visits made.....	3,186
Post-natal visits made.....	4,535
Clinic patients (women).....	2,298
Clinic patients (children).....	365
Patients sent to County Hospital.....	50
Operations—	
Circumcisions.....	76
Perineorrhaphies.....	14
Versions.....	3
Caesarian Sections.....	4
Forceps.....	2

There has been consistently over sixty deliveries per month for the last several months. This gives a wealth of material, both normal and abnormal.

Very fortunately, the students of the College of Osteopathic Physicians and Surgeons were permitted to share in the privileges and responsibilities of this great and useful organization. During the Junior year the students are placed on the service for a period of one week, living at the clinic quarters. At this time, they make anti-partum calls, attend clinics, and may witness deliveries. In their Senior year they serve as Junior and Senior Externes. The Junior extern witnesses and assists in deliveries, attends clinics and makes post-partum calls. The Senior Externe does the actual delivery work under the direction of the resident physician or one of the supervisors, attends clinics, assists in operations, gives anaesthetics, etc. The service is most practical and places the student in the field as a real physician. The work is outlined and prescribed under the direction of a resident physician or a member of the staff. It is not merely the wonderful experience of actual delivery of from six to fifteen cases, but the privilege of learning in the necessarily associated subjects of Gynecology, Pediatrics, Minor Surgery, Anaesthetics, General Medicine and Diagnosis. The supplies are ample in every respect and there is no charge to the students; living quarters are furnished.

We must not pass the City Obstetrical Service without paying due respect to the Chief Supervising Obstetrician, Dr. Lyle McNeile, who has shown us such great courtesy in our relation to this work. Also, let it not be forgotten that Dr. G. D. Caylor has rendered untiring and invaluable assistance to this Department, and that its interests have been uppermost in his mind at all times.

It is evident that no such service can be rendered without certain sacrifices on the part of the student and those in charge of the work. However, these are of only momentary importance, whereas the benefits realized and service rendered are of life standing.

The Department wishes to express gratitude to the students for their efforts and co-operation in making this service the success it has been.

ERNEST G. BASHOR, D. O.



THE OLD
MAID THAT
ADVISES
YOUNG
MOTHEAZ.

Miss Conception



To charm the fish he never spoke,
 Altho' his voice was fine;
 He found the most convenient way
 Was just to drop a line.

“THE COLLEGE CLINICS”

THE clinics of our college are now in a position to offer an opportunity for observation and actual practice in the treatment of disease that is much greater than that offered by any clinic west of the Rockies. That we may grasp an idea of the volume of work accomplished in a College year, here are some otherwise dry calculations:

In the general Clinic there are something over 16,000 treatments given each year. In the Eye-Ear-Nose and Throat Department some 9000. In the Gynecological Department something over 2700 treatments are given. In the Obstetrical there are some 225 deliveries made and about 2700 calls made before and after delivery. Therefore the actual total for the year will be close to 30,400 cases which receive individual attention by the Student Physicians. This work with the vast amount of work done at the City Receiving and County Hospitals amply equip a graduate, to meet any case he may find in his field work, with an air of assurance that only can come by actual experience.

The hearty co-operation between the Students and Faculty is responsible for this wonderful growth and the future holds for our college Clinics opportunity for growth limited only by the extent with which we avail ourselves of the opening.

"WHAT WE DO IN THE EYE, EAR, NOSE AND THROAT DEPARTMENT"

- 554 patients treated in a month of 22 Clinic days.
- 90 operations for Tonsils and Adenoids, General Anaesthetic.
- 93 operations for Tonsils, Local Anaesthetic.
- 40 operations for Submucous, Local Anaesthetic.
- 2 operations for submucous, General Anaesthetic.
- 9 operations for Turbinate, Local Anaesthetic.
- 3 operations for Pterigia, Local Anaesthetic.
- 7 operations for Cataract, Local Anaesthetic.

C. V. CUNNINGHAM, Head Nurse.

"REPORTS FROM THE MINOR SURGICAL DEPARTMENT"

The almost unlimited class of operations that are done in this department offers the student the necessary equipment for every-day acute practice. Some of the most interesting cases handled in this department during this term's work are as follows:

- Two cases Carcinoma of Tongue.
- One case un-united fracture of Humerous.
- Three cases scarless removal of old scars.
- Phimosis with completely adhered prepuse.
- Tendon transplantation of flexor to extensor.

The students' hands are carefully guided through the steps of each operation, he learns the advantage and disadvantage by actual experience of the different kinds of suture material, and antiseptic dressings and bandages. He gets the experience necessary to determine the kind of anaesthetic and whether local or general. Here he also learns the many different types of bandages and their special advantages, a treatment of fractures, dislocations and sprains.

Among the special lectures given are: Vaccinations, complications and after care, methods of giving serums and vaccines, plastic surgery, so-called scarless surgery, Carroll-Dakin Treatment. The student here becomes familiar with all surgical instruments, anaesthetics and asepsis.

P. T. HOEFFER, D. O.



**REPORT OF THE GYNECOLOGICAL CLINIC FROM
SEPTEMBER, 1919, TO APRIL, 1920**

	Cases Examined
Climacteric with complications.....	11
Cervicitis (Chronic)	9
Metritis with Subinvolution.....	23
Endometritis (Chronic).....	3
Fibroid Tumors of the Uterus	8
Venereal Warts.....	1
Salpingitis.....	1
Malformations	1
Pruritis Ani.....	1
Cervicitis (Acute).....	4
Colpocele with Rectcele.....	4
Infantile type of Uterus (Dysmenorrhea).....	18
Vaginitis	2
Malpositions (without inflammatory changes).....	6
Cystitis (Chronic).....	3
Vulvitis	1
Carcinoma	1
Pregnancy	5
Pelvic Congestion.....	7
Lacerated Perineum.....	5
Urethritis (Chronic).....	10
Ovaritis (including cysts).....	15
Lacerated Cervix.....	5
Surgical Adhesions.....	15
Para Metritis.....	9
Peri Metritis.....	12
Congestive Dysmenorrhea.....	1
Hernia.....	1
Hemorrhoids	5
Stitches left in Cervix following surgery.....	1
Suspected Pelvic cases.....	24
Total number of cases.....	209

The larger number of these cases were treated in the Clinic for at least one month. One-third of the cases were dismissed from the Clinic as improved or cured, the remainder not reporting for final examination after having a month's course of treatments.

Twenty-six cases had been treated in the Clinic at a previous date.

Clinicians: JENNIE C. SPENCER, D. O.

INEZ S. SMITH, D. O.



FACULTY RHYMES

Here's to Forbes of this wonderful show.
 He says but for money away we would go;
 And on a green lawn would we pitch our tent;
 Of the trustees he's the president.

Here's to Bowling, to whom love is due,
 He teaches us bones, and philosophy, too;
 Of more wonderful memory you never heard—
 For he knows every text-book word for word.

Here's to Spencer of baseball fame,
 Fixing joints has got him a name.
 He says he knows (he has evidence enough),
 "Good old general treatment" sure is the stuff.

Here's to Turney, of smiling mien;
 He smiles and smiles and smiles serene.
 His eyes are nightmares and he sure will flunk
 All who don't know his d—d old junk.

Here is to Copeland, who teaches in slang,
 He loves all freshmen, the rest can go hang.
 He quizzes and quizzes and quizzes, by jinks!
 Till we know it backward and forward—he thinks.

Here's to Comstock, who keeps pickled hides
 For us to cut open and see the insides.
 We are not artistic, nobody shakes!
 But we take off our hats to the drawings he makes.

Here's to Ruddy, an occultist wise,
 Who mends quite wonderfully very bad eyes.
 Inventor he is of three-finger technique,
 To gag you and choke you till you think you are sick.

Here is to Chandler—conscientious man,
 Who expects you to learn more than you possibly can.
 He will figure and talk, and lecture, and work,
 While the student grows lost in the maze and the murk.

Here is to Clark, who thinks he can tell
 What's in all animals and humans as well.
 He says he is sure—he has proofs by the dozen
 That chickens and horses and apes are our cousins.

Here is to Weston, a lecturer mild,
 At the pranks of his students he always smiles???
 He talks about bugs until they crawl
 All through our scalps and our clothes and all.

Here's to Whiting, assistant to Stork,
 Life for her is work, work, work!
 Enthusiastic and cheerful and kind—
 A better obstetrician you never can find.

Here is to Spencer.—Dr. Jenny, you know—
 With vim and with vigor she makes things go.
 Her talks and her lectures we certainly love
 On gynecology and the problems we have.

Here's to Phinney, of humorous bent,
His eyes they twinkle, as on mischief intent.
A most accommodating, versatile man—
He teaches and fits in wherever he can.

Here's to Merrill, Psychiatrist,
Who takes himself seriously. Hist!
Noise while he's lecturing bothers the man,
And he takes excuses as hard as he can.

Here's to Biddle, red-headed one,
Duty and work he never did shun.
You may stumble and falter and be marked low,
But he cannot bear to flunk you—you know.

Here's to Basher, full of vim—
"City Service," we think, at mention of him.
That's where you walk miles with aching back
And sit all night in some old shack.

Here is to Miles, whom no one would spurn,
Who teaches us infections and all about worms.
He has been in this practice a good many years
And can treat any trouble from the toes to the ears.

Here's to Morris, though young in his looks,
Who teaches us technique better than books.
He delights in one thing and knows it—well,
It's a left-handed game, so I dare not tell.

Here's to Crist, a musical man,
Who teaches us how to be clean as we can.
Who has all of his lectures down to that spot
Where nothing is lacking—not even a dot.

Here's to Dresser of Ether fame,
Also of C-h-l-o-r-o-f-o-r-m.
With X-ray keen, it is his aim,
To show our bony form.

Here's to Smith, our Gyn Assist,
She tries to show us how
To demonstrate another cyst
In some poor "Sickly Frau."

Here's to Volkman of gorry fame,
He tries to teach us every name
That twists the tongue and cracks the jaw—
A sample is "P-o-l-y-c-y-t-h-e-m-i-a."

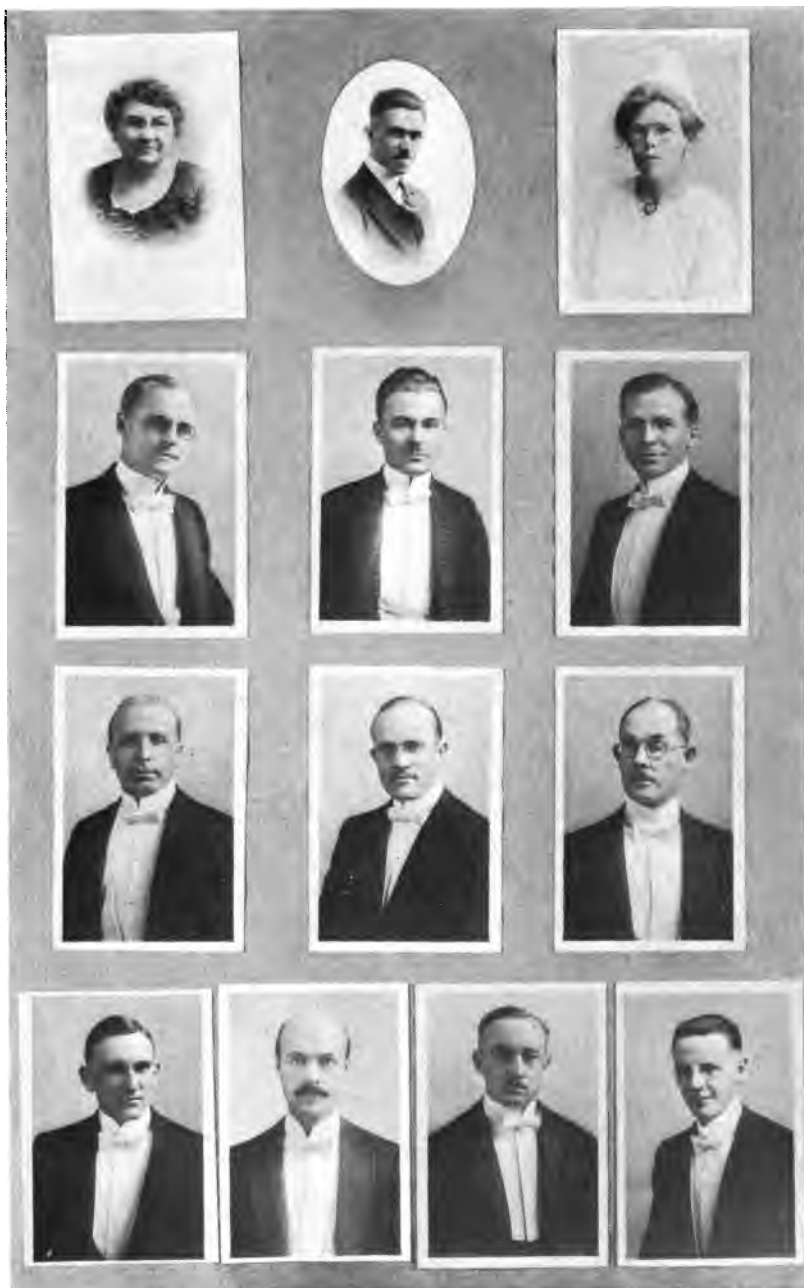




CLAYTON GRUBÉ STADFIELD, M. D.

Clayton Grubé Stadfield, M. D., Chief Surgeon of the Receiving Hospital, to whom the students of the College of Osteopathic Physicians and Surgeons and the rising generation of Osteopaths in the West owe much. The institution which Dr. Stadfield directs gives our students invaluable experience in emergency practice. Dr. Stadfield gives us the example of a generous spirit free from bigotry and intolerance, which we may well remember and emulate. He has not always given us all we have asked of him. He has given more. He has given us a square deal.





Classes

THE POST GRADUATE CLASS OF THE C. O. P. & S., JUNE, 1920

THE EAR, EYE, NOSE AND THROAT DEPARTMENT

THE president of the class is Chas. C. Taliaferro, Jr., L. L. B., B. S., D. O. Married, and has seven children, three boys and four "Galbabies." I would like to have "you all" know that this is some record for so young a man as Tally. He graduated from Princton in 1907; from the University of Virginia 1909; from A. S. O. in 1918, and has since taken one year's work with Dr. Geo. Laughlin; three months with Dr. John Deason of Chicago, and is now finishing one more year with Dr. Ruddy. He is moreover contemplating spending two additional years as student assistant to one of our noted specialists in his chosen line. Can "you all" tell when Tally will be ready to practice? When ready to do this he will return to Pittsburg, Penn.

The Secretary and Treasurer, and, in fact, the whole remaining official "Cheese" of this exalted body is your humble scribe, Lyon E. Hewitt, D. O.; very much married, and the father of a scientific family; a boy, and thereafter a daughter. We (editorially) graduated from the L. A. C. O. June, 1909, and located in the College center, O. A. C., of Corvallis, Ore.

Our not late, but recent president, W. W. Howard, D. O., graduated from A. S. O., June, 1912. For the past seven years he has practiced in Medford, Oregon, as a care free bachelor, until last summer, when charming Mrs. Howard "Beat the rest of them to it."

W. A. Andrews, M. D., D. O., graduated from the L. A. C. O. January, 1914. He is married and has two little daughters. Dr. Andrews is building up a successful practice in Pasadena, Cal. No wonder we find him so dignified!

H. E. Harris, D. O. "He of the Charlie Chaplin Mustache" bore off his honors from the Chicago College in June, 1917. And has practiced with Dr. E. R. Proctor, also of Chicago! He hails from Churubusco, Ind., and we have it on good authority that our "Churub" is anxiously awaited by a certain person who takes a mighty pretty picture, and who objects "To life on a farm." We owe the pleasure of his company in our class.

SPRING TERM ADDITIONS TO OUR CLASS

E. C. Brann, D. O., A. S. O., 1911: "Hero of the fistic encounter." Has a million dollar practice in Coffeerville, Kansas, we understand, according to his modest claims! We envy, but do not doubt. He is married and has a son.

Mary Gamble, D. O., A. S. O., June, 1906: Though she has practiced for some time successfully in the land of Opportunity for the fair sex, Salt Lake City, Utah, she has refused to accept consolation, and remains an interesting widow, despite her "Fairy" charms, and jolly disposition. We understand from a late bulletin that there is an opportunity here for a widower with about four children.

C. M. Graham, D. O., A. S. O., January, 1901: Is practicing in Inglewood, Cal. Dr. Graham is entitled to further lettering, which he modestly renounces. In fact, modesty seems to be the Doctor's chief characteristic and Ye Scribe finds this refreshing. Dr. Graham is married.

D. S. Dickinson, D. O., Chicago College, 1919: Child of fortune, is unmarried, as yet. He has, however, wonderful prospects. He shines with a diversity of talents, among these being not only his chosen profession, but that of music, bowling and dish-washing.

W. S. Kingsbury, D. O., L. A. C. O., February, 1909. Has been practicing in the wild and woolly city of Boise, Idaho. He is very much married, and has a long future before him.

This history would be incomplete without mention of the Boss, namely, Mrs. C. D. Cunningham, graduate trained nurse of Galt, Ontario, Canada, 1905, and chief nurse in our department of the College for one and one-half years. Her efficiency alone keeps things running smoothly. Mr. Cunningham is a student in our College. They have no little ones, though Mrs. Cunningham declares that she "Has Opes."

GENERAL SURGICAL DEPARTMENT

P. A. Anderson, D. O., A. S. O., 1918: Dr. Anderson's home is in Moscow, Idaho. Despite the name of his home town he wears no flowing beard, and so far neither have we discovered any Bolshevik tendencies in our good-looking friend. He is still unmarried, though this cannot last.

L. B. Faires, D. O., A. S. O., June, 1917: Took a year's post-graduate course in Kansas City College, graduating in 1918. His address is given as Halifax, Wash. He makes an unfair majority of unmarried men in class of three. He's making a commendable reputation for himself in his surgical work.

J. P. Murphy, D. O., A. S. O., 1917: Practices in Bremerton, Wash., where he is well established. Dr. Murphy is married. After taking in Dr. Pratt's orfical Clinics last summer at Chicago and finishing his year's work here, the Doctor will return to Bremerton.



THE R.G.
LIZ THAT USES
OUR LECTURE
HOURS TO CROSS-
EXAMINE THE
PROFS.
OOH!

Ima Quizzer

SENIOR CLASS ROSTER

ORILLA EVANS BIGELOW, Delta Omega.

"Little I and Big You." Too modest for her own good, but lavish in her praise of her friends.

ELMER S. CLARK, A. B., Atlas Club.

"Doctor, will you please recapitulate that statement?" A most conscientious doctor, popular with his patients and a genuine Osteopath.

JACK CRANDALL, Phi Sigma Gamma.

The honored president of the student body. Jack broke all records by entering the army, learning to fly and getting back in time to go on with his class.

VERA GEORGE, A. B., Kappa Psi Delta.

"Her bark is worse than her bite." Big-hearted "Georgie" is never too tired nor too busy to "rub" out our aches and pains.

MARY L. LECLERE, A. B., Delta Omega.

"Still waters run deep." She takes dandy notes, even though you can't read them. Smart people never write legibly.

MARIE MASON LORD, Delta Omega.

She may be little and cute, but she is a very determined young lady for all that. She will be *the doctor* on her cases, never fear.

ZELDA H. SHELDON, Delta Omega.

"A merry heart does good like a medicine." Frivolity is often only skin deep and a cover for much deep thinking.

IN MEMORIAM

LILLIAN WHITING, Delta Omega.

Deserted us to graduate in June. The sunshine of the class. What would we have done without her.

MISTAKES OF THE CLASS OF FEBRUARY, 1920

One day Doc Orilla
Had a patient tie a pillow
'Round her waist.
Rilla nearly threw a spasm
Diagnosed it "Neoplasm."
Is disgraced.

Dr. Elmer Wise-Boy Clark
Saw a patient in the dark
Slightly sway.
Elmer called it "Romberg's Sign,"
But the patient said 'twas Wine.
And wouldn't pay.

Dr. Crandall saw a lad
Who to him looked very bad,
Cyanotic.
Lips and finger-tips were blue
So as all good doctors do.
Gave Digitalis.
When the poor lad came to die
He murmured "Huckleberry Pie."
Scene chaotic.



Dr. Vera stuck a pin
 Deep into a patient's shin.
 Very Good!
 When she tried to pull some hair,
 Lo! There wasn't any there. •
 It was Wood!

Dr. Sheldon tried to count
 Dick Schaub's pulse and the amount
 Ran most high.
 When Dr. Bowling looked him over
 Not a thing could be discovered.
 Wonder Why!

Dr. Mary had a case
 With a rash upon her face.
 "Indigestion."
 Later, Mary, sick and sad,
 Knew 'twas measles that she had.
 Not a question.

Dr. Lil gave a pill
 To a woman who was ill.
 It was just the thing she needed, she
 assured her.
 "I can't help it," Lillie said,
 When they told her she was dead.
 "Had it been the pill I thought it
 would have cured her."

Dr. Lord had a case
 With a callous in a place
 Most obscure.
 With a wise shake of the head
 "We must remove the cause," she said,
 "To make a cure."

The patient went away
 To come back the following day,
 Slightly bored.
 "I've removed the cause," said she,
 And her voice rang bitterly—
 "I've sold my Ford."

Pittsburg Post—For Sale—A fine old-fashioned bed by an elderly lady with
 four solid mahogany legs.

Dr. Turney—What is stomatitis?

Kelly—Inflammation of the stomach.





THE CLASS OF JUNE, 1920

PERSONNEL OF THE CLASS

ANDERSON, GLADYS	MILNES, THELMA
ANDERSON, MABEL	MUNRO, PAULINE
BLAKE, ELIZABETH	PAINTER, (MRS.) RUBY
FULLER, ANNA MAY	PAINTER, ZORA
HAMPTON, GEORGE	PERCIVAL, (MRS.) E. N.
HIX, RALPH	STEINBERGER, EDITH
HOPKINS, CLARENCE	TILBURY, LLOYD
JENNEY, (MRS.) WINNIFRED	WHITING, LILLIAN
KAMPHEFNER, ELLA	SCHAGGER, HERBERT
MANSFIELD, DOLCE	ZIEGLER, (MRS.) AMY

OFFICERS

<i>Sept. to Jan.</i>	President	<i>Jan. to June.</i>
C. E. HOPKINS.....	President	GEORGE HAMPTON
GLADYS ANDERSON.....	Vice President	EVANGELINE N. PERCIVAL
ELIZABETH BLAKE.....	Secretary and Treasurer	ELIZABETH BLAKE
WINNIFRED JENNEY.....	Councilman	WINNIFRED JENNEY
RALPH HIX.....	Alternate Councilman	MABEL ANDERSON

History—This class entered the C. O. P. S. four years ago, with forty-two members, equally divided; twenty-one men and twenty women—being the second class to be entered on the four-year basis with two years pre-medical work.

During the first year we lost some four or five members.

The second year the war claimed all the men of the class but one, and we gained one more man from a previous class.

The Junior year saw a few more additions to the masculine ranks, from other classes, who had returned from the Service.

The class now numbers twenty members, all of whom came into Osteopathy because they believed in it, and are going into the work with that belief strengthened a hundredfold.

We came into College thinking our class a mighty fine one, and after four years we are sure of it.

We will have to admit, as Freshmen we were somewhat noisy and bothersome and like all Freshman classes, we were sure we knew how to run the College much better than the upper class-men or even the Faculty! Fortunately we have learned better.

As a class we have certainly appreciated the Faculty and the type of instruction we have received. We have complained often and petitioned also, but in that way we are not different from many other classes that have gone before us, and in the end we have nearly always gotten what we wanted!

We have tried to do good work and we are proud to say that we have eight members who have made an average of 90 per cent or above in the four years' work. Of course marks are not everything and yet they show some material ability plus much application, and if the people who have made this record put as much effort and thoroughness into the practice of their profession they should not only make a success for themselves but a record of which the College may be justly proud.

Clinic Work—Our work in the college clinics has been varied and good. We have greatly appreciated the three morning clinics under Drs. Spencer, Tasker and Forbes, and feel that they have been the means of correlating much of our previous instruction.

The general clinic has had a good supply of interesting material, which has been added to by our work in Eye, Ear, Nose and Throat clinic and surgery, under our own surgeons, and our mornings at the County Hospital.

Plans of the Class—The plans of the Seniors are very different and the choice of locations widely separated. One of our members is going to Shanghai, China. Another is going home to Glasgow to help put Osteopathy on the map of Scotland, while another is going to Washington, D. C.

Many other States will also be chosen as fields for the promising young physicians, among them Washington, Idaho and Utah, not to mention California.

LIGHTS AND SHADOWS ON THE SENIOR CLASS

- GLADYS ANDERSON.....Why couldn't Gladys be a successful gambler? Because no matter how good her hand, Jack would take it.
- MABEL ANDERSON.....Mabel is a Scotch lass from 'way across the C, Mabel came to L. A. for a D. O. degree. The U. S. A. needs fixing, we'll grant that's very true, But here's a bet that some day she'll come back here—P. D. Q.
- ELIZABETH BLAKE.....Why is Blakie like a Posterior Innominate?—She is always a little behind, is liable to slip out at any time and is hard to reduce.
- ANNA MAE FULLER.....Why is Mrs. Fuller the most important person in school? Because she is always nice to each "Interne."
- WILBUR HURT.....Why should the Seniors feel pretty safe? Because from all indications no one is going to get—Hurt.
- ZORA PAINTER.....Zora can go to a land of ice and snow,
Of snowdrifts she is not afraid,
With a shovel she is "Andy,"
Which makes it fine and dandy,
And if worse comes to worst,
Why she can "Wade."
- RUBY PAINTER.....Ruby, Ruby, I've been thinking
What a sad world this would be
If some day you will be sailing
Far across the eastern sea.
Englishmen are fine, we grant you,
Courteous and exceeding kind,
But we're sure, if you'll but tarry,
Someone nicer here you'll find.
- RALPH HIX.....He crossed the pond and back again,
We're glad it wasn't the Styx,
For somehow or other, believe me, my brother,
We're all very fond of Ralph Hix.
- THELMA MILNES.....Oh! tell me, pretty maiden, are there any more at home like you?
There are a few, kind sir, very pretty ones and clever.
(To be sung in chorus.)
- LLOYD TILBURY.....Tilbury, Tilbury! How do you dare
To be so rough in combing your hair?

- Now mark this down and heed what I say,
It's all going to leave you some fine day.
- AMY ZIEGLER.....If there's anything you need
In any old line,
Amy can supply you at any old time.
- GEORGE HAMPTON.....Neat as a pin from top to toe,
You'll always see him wherever you go;
His voice is soft, his manners mild,
He wouldn't take candy from a child—
That's Hampton.
- DOLCE MANSFIELD.....Dolce would have you all believe
Her mind to be a regular sieve;
Don't let her fool you for a minute,
She has a lot of knowledge in it.
- ELLA KAMPHEFNER.....To far away China our dear Ella goes,
With a heart full of hope—and a trunk full of clothes.
Will she eat with chop-sticks—wear her hair in a
queue,
And do all the other queer things that they do?
- EDITH STEINBERGER.....Edith is our O. B. fiend,
From the Service she cannot be weaned;
Sleep she abhors,
Owl car she adores,
A bunch of mixed babies she surely has gleaned.
- HERBERT SCHAFER.....Schaffer slides round in his languid way,
His manner so painfully bored.
The whole world looks like a joke to him,
There's nothing he can't afford.
His patients all think he's a wonderful guy,
He gives them a slap and a punch,
Sits them up in a chair, runs a comb through his hair
And then ambles off to his lunch.
- WINNIFRED JENNEY.....Win, you know, is wondrous clever,
Her ready wit is lacking never,
Her patients think her skill unbounded,
We know her knowledge is well grounded.
- EVANGELINE N. PERCIVAL.....When 'Evangeline acquires a national fame
And even the medics her skill proclaim,
May she ever remember, her class beseeches,
Her humble beginning, deliverin' "Breeches."
- PAULINE MUNRO....."How'd you like to be the Ice Man?"
Was a slang phrase long ago.
We heard it since I was a little kid;
I'd rather be the "Waterman" when it comes to Miss
Munro;
Winning her's the best thing Meredith ever did.
- CLARENCE HOPKINS.....Hoppie will practice right here at home,
No chance that he'll go away;
For if you've seen what I've seen
You'll have seen that he's keen on L. A. (Ella).

THE CLASS OF FEBRUARY, 1921

THE CLASS ROLL

FLOYD HAYNES
WILBUR HURT

RAYMOND IRELAND
LORENZO WHITING

THEODORE N. TRIPP

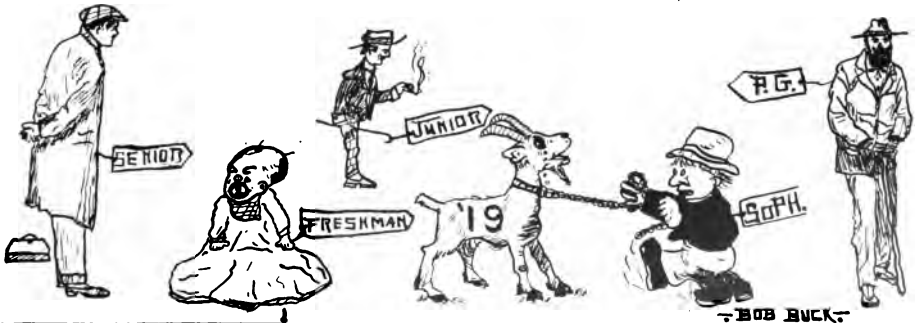
OFFICERS

FLOYD HAYNES	President Imperfecto
LORENZO WHITING	Vice President Imperfecto
RAYMOND IRELAND	Secretary and Treasurer Inferno
THEODORE TRIPP	Councilman Inefecto
W. T. HURT	Editor Incapio

THE PRELUDIO

Not like other classes, but having a class all of our own, we feel that we should at least let the *Perusios* of this class history know why we are still here, and what we think of things.

We are the remains of many classes before, and those that went before us are out in the field of practice, or at least about to start. We are not sorry for ourselves, but feel that "All comes to them who wait." We also feel quite disappointed that there are no girls with us to at least set off the page, and make some one observe our diluted *physiogramios*, but as that could not be our fate, we have decided to call ourselves the Mongrel Class, because we are such a mixture of other classes. We also feel quite honored, for the fact that each one of the class was a member of Uncle Sam's big army, and that is the reason *why* we are a mongrel class.









Zo Whiting says he has many fast friends, among the fastest are Schaffer and Schaub.

JUNIOR CLASS TEN YEARS HENCE

- DR. LULU MALONE—Professor of Hydrotherapy in the Los Angeles College of Osteopathic Physicians and Surgeons. Owns a wonderful sanitarium in the Hollywood hills, known as "Rest Haven."
- DR. GEORGIA MILLER CLARK—Practices in Long Beach; busy doing social stunts with Dr. Elmer, who looks frail, has a bad heart and is well insured.
- DR. "BILLY" NELSON—So popular that he takes his patients in bunches and cures them collectively with his psychotherapy, plus his personal magnetism.
- DR. CLAUDE OLEWILER—The husband of Dr. Hester Tripp Olewiler of Santa Ana.
- DR. "DICK" SCHAUB—Chief surgeon of the Pasadena General Hospital. Operated not long ago on a neurasthenic for appendicitis. When he found some one had beaten him to it, he sent the patient back tagged "Opened by mistake."
- DR. CHESTER FOSTER—Associate of Dr. Spencer; specialists in innominate lesions.
- DR. EVERETT CUNNINGHAM—Has a most lucrative practice. Divides his spare moments between playground work and a chicken ranch. He also gives a great deal of time to the Y. M. C. A.
- DR. WILLIAM OSTROWSKI—Physician in chief to the Russian Government. He has given invaluable aid in restoring peace to that war-torn country.
- DR. CURTIS E. DECKER—Dr. Decker's wonderful laboratory in Portland rivals that of the Mayo Bros. He has invented an osteopathic measuring contrivance calculated to bring patients up to a certain standard.
- DR. WALTER ELERATH—Holds the chair of Gynecology in the University of Seattle. He uses his own textbook, which is in six huge volumes.
- DR. CARL LIND—Heart and lung specialist at Visalia. Remodels any kind of a heart, except a fluttering one.
- DR. "PAT" IRELAND—Surgeon with Mayo Bros. His income is \$50,000 a year. Is as good looking as ever.
- DR. CHARLES IRVING—Married and practicing in Eagle Rock; a dangerous rival to Dr. Phinney. Wears a toupe and dyes his few remaining hairs to match it.
- BEATRICE KELLY—Preferred matrimony to a diploma. Once in a while she longs for Jack and Horace, but in the main she is fairly well satisfied.
- DRS. HALL AND STEELE—Specialists in bugology somewhere in the South, with Bert Weston as laboratory assistant.
- ESTHER FOX—Has not had time yet to take the State Board. Divides her time between Alaska and Arizona, being a very successful instructor in fancy dancing.
- DR. JACK GOODFELLOW—Has a large suite of rooms in the Skinner Building, in spite of which his patients swear by him. Most of his patients are women, for his office girls are too homely to attract the men.
- DR. OTTO GRUA and DR. MAUD MASON—They conduct a decidedly exclusive milk diet sanitarium. Dr. Grua is the surgeon and operates for whatever the patient has, be it ten dollars or ten thousand.

- ELSIE HAVEMAN—Wife of Dr. John Doe, widower with four children. The main part of her Osteopathic practice is "shingle therapy." She drives her quartette around in a Packard limousine, when she is not trying out her latest model airplane on them.
- DR. T. F. MAY—Has sumptuous offices in Hollywood, where he has phenomenal success in treating fractures, according to the latest and most approved methods of Drs. Twistem and Turnem.
- DR. BION WARNER—A very clever physician, being the chief surgeon for the Gougem Railway, for which he receives a fat salary. He is quite distinguished through having married a famous motion picture actress.
- DR. T. N. TRIPP—Back in New Hampshire, trying to convert the natives of the Granite State to Osteopathy. He has to "work like the devil" to do it.
- DR. EDITH WALKER—In spite of passing the State Board brilliantly and with honors, has married and settled down in Riverside with no greater ambition than that of knitting small sweaters.
- DR. EDITH WITZEL, of Oregon, rivals in fame Dr. Lillian Whiting. She already has seventy-seven babies named after her and will probably have twice as many more.
- DR. LORENZO WHITING—A howling success as editor of the latest edition of Gray's Anatomy. He has an honorary position with the Government, lectures at U. S. C. Medical and prepares Seniors for the Board examinations. He has managed to keep the fact from Dr. Jennie Spencer that he is still a bachelor.

TO THE "BUNCH"

(In appreciation of the flowers sent by the class during her illness.)

Nothing to do,
Just lay in my bed;
Fierce ache in my back
An' a pain in my head.

Lights hurt my eyes,
Sharp pain in my ear;
For breakfast and dinner
I gulped down a tear.

Lungs hurt when I breathed,
Chills made my teeth chatter;
Outside of that
There was nothing the matter.

But I wanted the bunch,
Pre Medics and all;
And Gee! How I wanted
The noise in the hall.

'Stead of the graveyard quiet
That prevails in this flat;
And I wanted Dissection
An' "Lab" an' all that.

Oh Gee! It's hard luck,
But I guess I'm forgot;
—Just then the door opened
And in came a pot

Of wonderful posies,
Blooms deep red and velvet,
With rich dark green leaves,
And oh, but the smell of it.

I feel better already,
Um-va-da-dah;
The bunch has remembered me,
Uh-la-la-la!

—AMANDA WHITEHOUSE.



SCENE 1. Act 1. Small boy and mother in clinic, waiting for Doctor. Burst of speed along the hall.

Small Boy—"Mama, what was that?"

Mother—"Why, son, that was the Sophomore Class."



THE INITIAL
LESION THAT
LEAVES ALL CLASSES
TO GLUM OUR
SMIPEZ.

I. Seczum

OUR NOTABLES

G. W. WOODBURY.....	President
MRS. BROWN.....	Vice President
MISS FLINT	Secretary
CLYDE GOCKLEY	Treasurer
M. WATERMAN	Councilman
BEN HAYWARD	Alternate Councilman

Well, folks, here we are again, and mighty glad to be here. We started the fall as strangers mostly, for some of us entered in the fall of '16, some in '17 and still others in '18. But now, with one semester back of us and on our way in the second, we like our class very well. In fact we think it is the best class around College. Not only that, we know it.

In spite of an 8-6 schedule, we have managed to come out of Bowling's Nervous attack, Chandler's Artillery fire, and Copeland's Gas barrage alive. After a week's holiday spent in court, and a month's rearrangement of schedule, we hope to prove true this spring. As it is we play along each day, optimistic in our belief that the next will be better, and dreaming of our new school, where we can smoke and loiter in the halls without bringing down about our heads the wrath of (Dusty) Miller.

DOGGEREL ROLL CALL OF "22"

BROWN	Richly endowed with figure, form and face, Equally rich with friendship's saving grace; Ready of speech, though lacking reason sure, To know her is but to wish to know her more.
FLINT	Frothy as foam, and variable as the tide, Shifting like sand, no sorrows long abide; Flitting from friend to friend, like bee from flower to flower, Youth in its heyday, and careless of its dower.
<i>Watt's Chronicle</i> —Wanted: A nice gentle cow, by a lady that will give at least a gallon of milk a day.	
MORGAN	Brilliant and keen, knowing much that others cannot see, Brief of sight yet fighting on to victory, A bear on quizzes, exes hard, and any recitation He breezes through where others fail or do the hesitation.
OLEWILER	Steady and slow, yet sure as fate, a little late in starting, He's with us now and here to stay until the day of parting; Excitement doesn't phase him, although it seems to please, It may be even yet he'll startle us, by kicking up a breeze.
SCHOEN	Beefy, bold and blustering, and yet withal a scholar, He's bound to be an Osteopath, and catch the slippery dollar; He knows no fear of friend or foe in any State or nation, And if by chance our Prexy fails, he'd try to fill the station.
STAIRS	Long, slim and slender and chary of his words, A married man and therefore apt to dodge the wary birds; He's there with bells on when it comes to taking all the exes, In fact he leads a class, well, that's small in either sexes.

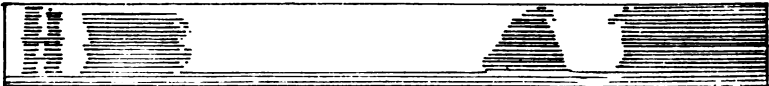
- TOLEDO A dusky hero from the South, a soft toned Mexicano,
There's music in his manly voice, like to a grand piano;
His English oft gets tangled up, in fact it makes him blunder,
But he should worry, he's no slouch, we think he's quite a wonder.
- WATERMAN Rosy cheeked and musical and leader of our sports,
He's O.K.'d in the classroom and first upon the courts;
Full of pep and ginger and always on the summit,
Just watch his dust and you will note he's somewhat like a comet.
- GOCKLEY Sturdy as the oak and constant as the sun,
A mixture rare, knowledge, wit and fun;
Skilled in the art of tubing tests, you see,
A laboratory shark from Uncle Sam's Armeel!
- HARVEY Short as to stature, long in wisdom's claim,
A devil of a printer and yet devoid of blame;
Skilled in debate and flushed with conscious power,
Scattering his verbiage like raindrops in a shower.
- HAYWARD Straight from the old school, a gentleman for fair,
Like any old cosmopolite, at home just anywhere;
A sure fire, bona-fide, delightful friend to meet,
A devotee in classroom of the old front seat.
- HAZELTINE Flighty and erratic and a terror to the pros,
A little bit irregular but classing with the Sophs;
He hits the pipe and rarely sleeps but never shows the yellow,
With all his faults we love him still and count him a good fellow.
- HOARD A mighty nimrod, death on ducks, a hunter pure and simple,
Yet prone to look on pretty things and not forget the dimple;
He is tall and thin and never lacks an old or brand new story,
Eternal youth will be his pride when other heads are hoary.
- KNOWLTON Of stocky build and full of prunes, but every bit a plugger.
He comes of straight New England breed, which means that he
is no slugger;
He lives among his books et al and never goes a-mooning,
He's married, otherwise, of course, he's right in line for spooning.
- WOODBURY Fair, fat and forty-odd and rather shy of hair,
A veteran of bygone days and rather worse for wear;
Still hoping to achieve success, but not as an M. D.,
Here's hoping that he makes the grade the same as you and me.
—G. W. WOODBURY.



Mist A. Carr



FRESHMEN



"THE CLASS OF '23"

JANET ANDERSON	Cal.	P. JAMESON	Utah
E. T. ANDERSON	Cal.	MRS. M. KENAN.....	Cal.
C. L. ARCHER	Wash.	R. KOLTS	Cal.
B. ASHTON	Canada	W. LORD	Cal.
MARY BECKER	Idaho	H. MCGILLIS	Cal.
L. W. BERLIER	Cal.	P. MILDREN	Cal.
ELLA MAY CALLISON	Kansas	MRS. MILLIE MOORE	Cal.
M. ELSIE CARLSEN	Iowa	L. OSTRUM	Cal.
MYRTLE CODDINGTON	Ohio	J. G. PAINTER	Mo.
E. W. DAVIDSON	S. D.	K. PALMER	Cal.
R. DAVIS	Cal.	ANNA QUINT	N. J.
W. DALY	Cal.	A. ROSENBERG	Cal.
W. FLEMING	Minn.	R. A. RUSSELL	Utah
H. M. GROW	Ind.	MRS. A. RODGERING	Russia
W. HALLECK	N. Y.	LIDA SCOTT	Cal.
MRS. L. HARRIS	Colo.	R. SCHAFFLE	Cal.
MRS. B. HARTER	Cal.	R. SECOND	Colo.
L. H. HEACOCK	Cal.	AMANDA WHITEHOUSE	Ill.
HELEN HOYT	Ohio	MRS. JEAN WILL	Cal.
R. J. HUFF	Cal.	D. M. ZELLAKOWSKY	Warsaw, Poland
F. M. HILDRETH	Ore.		

She—I hear Walter is engaged again. Do you think she really means it this time?

He—He should have her engagement ring made of cheese.

She—Why?

He—It's so binding.

"THE WHY OF THE '23's"

ONE day, noticing a sign which read, "Zelda, Past, Present and Future, Revealed," I entered, anxious to learn, if possible, my grade in the last chemistry test. When the Psychic found out that I was a member of the Freshman class of C. O. P. & S., she exclaimed, "Oh, that wonderful class! I have heard of it. In fact, one member, Miss Lida Scott, consults me on all occasions. You know what a shrewd girl she is. I saw her future in Osteopathy, and that is the way she came to your school."

"Can you tell me why the others entered the school?" I asked. "We are such a mixture of youth and beauty, age and wisdom, slide and push, gas and solids, that one ultimate goal seems almost impossible."

"Certainly, with the help of the Ouija Board," she replied, a far-away expression coming into her eyes, and she began:

"A number were drawn to Osteopathy because members of the family were already in the field. Miss Fleming's sister, Miss Whitehouse's brother, Archie's father, and Grow's brother are Osteopaths. The ladies choose this school, largely because spending one's winter in California sounds well when writing to friends in the Middle West, where the thermometer registers twenty below. It's the style to go west, and Winifred and Amanda would rather be dead than out of (a) date. Mr. Archer was doubtless drawn here by some positive otropism and hopes of joining the C. O. B's.

Corporal Grow inspected all of the Osteopathic institutions in the United States after his discharge, beginning in the East. Finding food essential even in California, he sold his return ticket and stayed.

Miss Quint was a school marm, originally, and decided that a healthy mind must have a healthy body to live and grow in; hence her decision.

Someone told Secord that he looked like a doctor. Immensely flattered, he sent for a catalogue. He and Shaffle (his tortoise twin) examined the Faculty's photos and decided that the fatherly looking men in charge would doubtlessly deal gently with them. They said, 'Let's go for a year, and see what it is like. We may learn something.'

Janet Anderson had been a conductorette and thought Osteopathy would help her keep unruly passengers in order.

Mr. Hildreth had been much impressed with Osteopathic cures, and chose it as a life of opportunities.

Miss Coddington came in search of some art through which she would be able to help sick and crippled children.

E. T. Anderson was much upset during his last year at the Watt's High School. He was told repeatedly that in June he would sail out on a new and untried sea. After three months' uncertainty, he cast anchor in the harbor of Osteopathy.

Several Chiropractic Schools were after Jack Painter, but he weighed their arguments carefully and found them wanting. 'The dope mapped out for the third floor of the San Fernando Building looks good to me,' he said.

E. W. Davidson knows the laws of physics and understands goats. Who could have a better foundation for the correction of human ills?

Mrs. Harris, Mary Becker, Mrs. Moore and Elise Carlson have all had experience nursing; but found it unsatisfactory. They prefer to know, to do, and to dictate, in an active rather than a passive way.

That keen eyed man, Mildren, has a great thirst for deeper knowledge. The guinea pigs and test tubes provided gripped him in a non-relenting grasp.

Huff had memories of infantile croup and membranaceous tonsillitis. Osteopathy has closed the door on any further experiences of that sort for him. The great desire 'to do others as you are done' made him a student of this College.

Clever, dark-eyed Mrs. Will beheld in Osteopathy a field for bewilling workers.

Russel has for years been soothing the aching heart; add to this power the ability to smooth a furrowed brow and express the fourth vertebral extension, and the wherewithal and whereforth of life, for him, shall be answered.

Ostrum was looking for an opportunity to get square with the world, and heard that in the College at Fourth and Main streets, real men and women were devoting valuable time teaching others 'how to rub it in.'

Mrs. Keenan's theropeutic education gave her an appreciation of the value of elimination of waste through the pores. She came in search of more information about body functions, and nerve habitats.

Zellakowsky thought seriously of becoming a dentist, but decided that the world had a 'corner on pain'; that he would rather reduce than produce pain.

Mrs. Rodgering almost entered a medical school, but after comparing the various arts of healing, she concluded that Osteopathy is the therapeutics of the future.

The laboratories and scientific experiments of the school appealed to Mr. Palmer.

While still another academy student busy with sculptures clay, Mr. Rosenberg, concluded that deft fingers, properly educated, could doubtless punch, poke, pinch, twist and squeeze human clay into symmetry and harmony. So here he is getting ready to do remodeling.

Miss Hoyt was lured to Southern California by promise of better health, and an opportunity to study one of the most interesting sciences of the day.

Messrs. Kolts, Berlier, and McGillis, were speeding along Main street, when their car ran down Jameson, who was not used to the crowded streets of Los Angeles. The boys rushed Jameson up to the third floor of the San Fernando Building, where he was quickly revived. All four boys were so impressed with the beauty, charms and didacity of some of the upper class women that they entered the College at once."

Just here the Medium fell into a trance. "I see," she said, "I see a smiling young lady with auburn hair riding across the desert of Arizona, helping her cousins and thinking more seriously every day of taking up their work of Osteopathy."

"That must be Miss Callison," I exclaimed. The woman nodded and continued: "The scene changes. I see a boy hurriedly traveling between Santa Barbara and Los Angeles. He is arranging credits, interviewing the powers that 'be at school.' His sister anxiously awaits word at home. Now they are both entering the school."

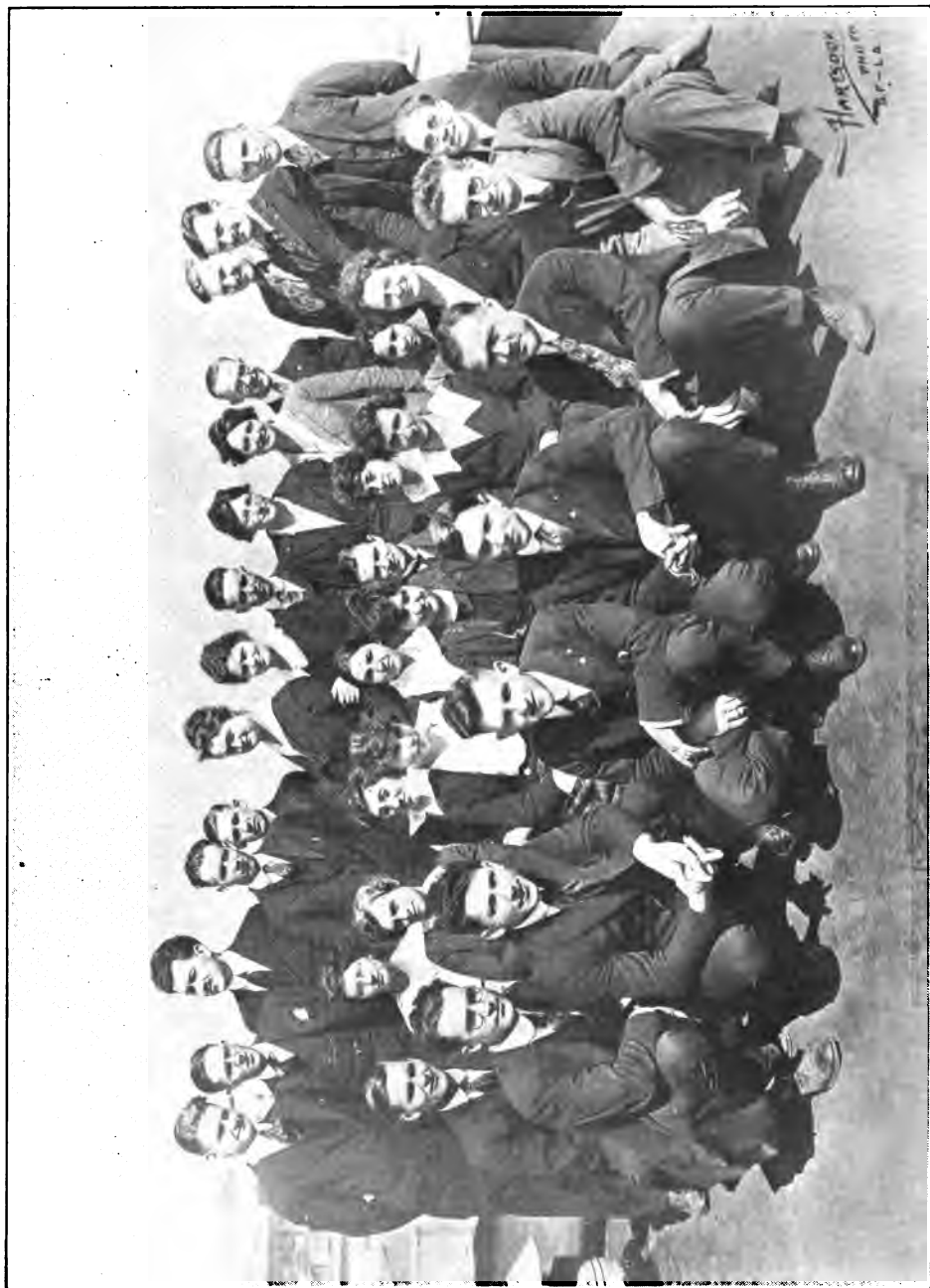
"Who is the boy?" I asked. "Alas! he is moving with so much speed that I can see only a blur."

"Oh! Young Mr. Haycock and his sister, Mrs. Harter," I said, laughing aloud.

The medium looked at me reproachfully. "Now you have broken the spell, and just when I was about to tell you why some of your Freshmen have left school, which would have been very interesting."



Sergeant at Arms will report smoking in the halls.



“WAYS AND MEANS OF FRESHMEN”

ANY look with envy upon the college man as the happy, care-free rah-rah man who receives a handsome allowance from his father which enables him to join the ranks of the fortunate few. This conception has probably been handed down from “Ye Goode Olde Days,” when educational institutions were few, and the opportunities for attending school represented no inconsiderable financial backing. But today “pep” or surplus health are the only requirements necessary. The Freshmen contribute considerable pep to the College, but still have some to market, the proceeds being intellectual development and cold cash.

The formidable J. G. Painter evidently tries not to let his studies interfere with his other activities. He has assumed the responsible position as coach and physical director at the El Monte High School, which keeps him in restraint afternoons excepting Sundays. This alone is a man-sized job, but he chooses to spend his evenings as clerk in the Y. M. C. A. principally because he has access to the cafeteria. This accounts for his newly acquired avoirdupois.

Davidson is bitterly opposed to procrastination and maintains a small ranch, where he applies his scientific information of agriculture and animal husbandry. Davy is proud of a herd of pure-bred goats. These he treats with tenderness and consideration, probably because his own goathood days are still fresh in mind.

Perry Ostrum, aggravates a saxophone at dances and plays a Ford for the Los Angeles Feather and Down Company. This latter occupation must be soft and light.

McGillis engages in numerous activities. Office work at the Keystone Company and special agent for the Los Angeles Express at Eagle Rock and Glendale. These activities enable him to attend school and still be a “society slicker.”

Our Mr. Russell generously devotes his evenings to the teaching of Spanish and vocal, together with a shift at the Y. M. C. A. office. These duties relieve him of adipose and keep him “conditioned.”

The amiable Lawrence Heacock works the Puento for a neat little roll. He is a professional “gasoline squirt,” scrupulously honest.

Jameson and Huff will probably be employed as head waiters in the Y. M. C. A. dining room as long as their breakage does not exceed their makage. They have at last developed enough technique to handle hot soup and the guests no longer suffer burning embarrassment. Their menial duties are responsible for their modest dispositions.

The most remarkable achievement so far is the construction of the new laboratories. Under the skillful supervision of their own engineer, H. M. Grow, the “Frosh” completed every detail necessary to make it the most modern structure in the city. This may have been unfair to organized labor, but college officials demanded good work.

PAUL JAMESON.

Patient in Clinic: How much do you charge for circumcisions here?

1st Student: \$7.50.

2nd Student: No, \$5.00.

3rd Student: That's right, that is our cut rate.

FRESH

MEN



WE WANT



GREAT SCOTTY!



GO TO IT FRESHIES



WE THREE



BABES IN THE WOODS



EASY BOY EASY



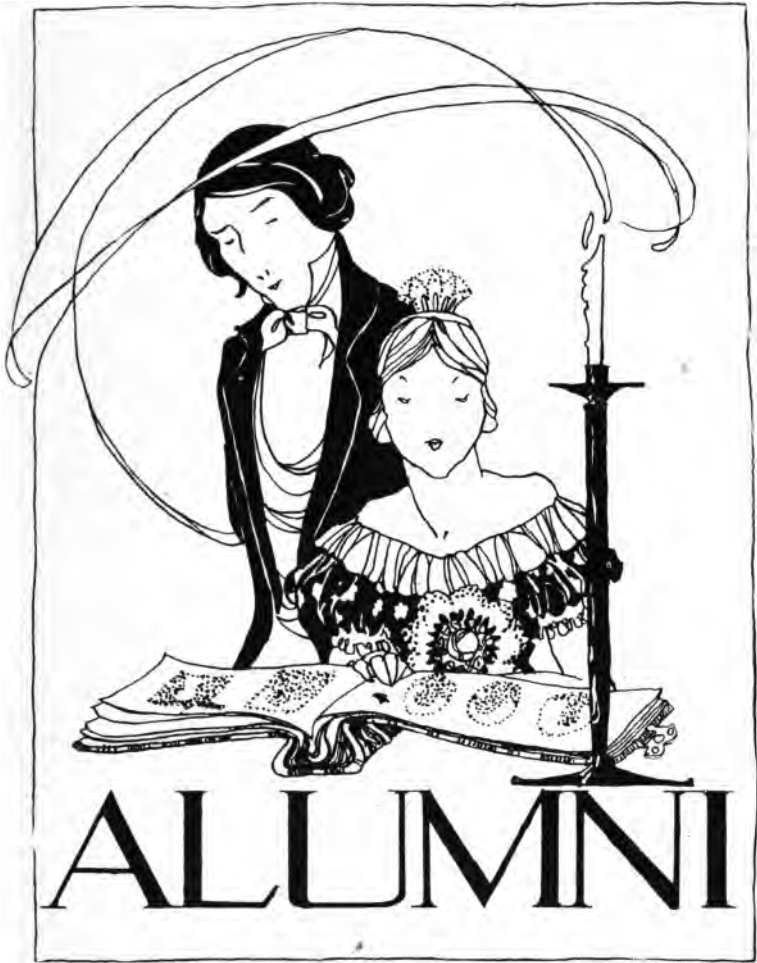
UNSHACKLED



THE UNCONQUERED



SUMMER STYLES



ALUMNI CLASS OF JUNE, 1920

INTRODUCING THE CLASS OF JUNE, 1918

This class was the first to graduate from the College of Osteopathic Physicians and Surgeons as four-year students. They have the spirit of the College always with them, and have shown that spirit by forming an alumni organization as a class. Why not have more of the graduated classes follow their example; and then, all classes join as a whole as one big Alumni organization?

Below is a concise history of their past and present.

THE EDITOR.

ORA L. WEBB, 'D. O.—Graduated from Hollywood High School, June, 1912. Entered C. O. P. S. September, 1914. Graduated June, 1918. Now practicing in Los Angeles, specializing in Gynecology and Obstetrics.

WALLACE C. CLARK, D. O.—Entered C. O. P. S. in September, 1914. Graduated June, 1918. July, 1918, reported at Angel Island and was assigned to the non-commissioned officers' training camp at Fort Scott, San Francisco. Later transferred to the Hospital Corps at Presidio, San Francisco. Received discharge January, 1919. March, 1919, entered Los Angeles County Hospital as an interne. Will graduate from County Hospital July, 1920. Expects to take up Genito Urinary practice somewhere in the Bay region.

ELSIE MARSHBURN, D. O.—Graduated from preparatory Whittier College. Took up course of nursing at Redlands Hospital. Entered C. O. P. S. September, 1914. Graduated June, 1918. Now practicing in Los Angeles, Cal., specializing in Gynecology.

EDWARD T. ABBOTT, D. O.—Entered C. O. P. S. September, 1914. Graduated June, 1918. June 10th, 1918, appointed member of house staff of Los Angeles County Hospital. Graduated from County Hospital January 1st, 1920. Now practicing in Long Beach, specializing in Surgery.

HESTER TRIPP OLEWEILER, D. O.—Graduated from Hemet Union High School. Took a library apprenticeship at Riverside County. Entered C. O. P. S. September, 1914. Graduated June, 1918. Changed name to Oleweiler May, 1918. Now practicing in Santa Ana, specializing in Gynecology and Obstetrics.

A. N. JACQUEMIN, D. O.—Entered C. O. P. S. September, 1914. Graduated June, 1918. Now practicing in Boise, Idaho, specializing in Surgery and doing general practice.

R. H. BARKER, D. O.—The original member of the class of June, 1918. Now located at Happy Valley, Vancouver Island, Canada.

LAURA McDONALD, D. O.—Entered C. O. P. S. September, 1914. Graduated June, 1918. Now located in Los Angeles, California.



THE DAME
THAT NEVER
STAYEZ THRU
A HOLE
LECTURE.

Tolly U. Ria



A MESSAGE TO THE ALUMNI SECTION OF THE COLLEGE

HAVE you, the alumni members of the C. O. P. & S., ever stopped to think what you owe the college from which you received your degree? Have you ever thought what you could do for the profession in general, and in one way pay three-fold your double obligation—that obligation not of money, but something money cannot buy?

There are in your circle of friends, young men and young women, with college and preparatory educations who are looking for and anxious to study a profession. We need more Osteopaths. At the present rate of graduation it will take forty years to supply the need of the profession.

Do you not feel it your duty to assist these young people in choosing a profession? Have not the graduates of this College proven themselves capable physicians? That is obvious, and it is your duty to help keep the college going. It takes students to do this, for who would lecture to plastered walls?

There are over two hundred and fifty Alumni members, as listed in this section, who have graduated since the union of the Los Angeles College of Osteopathy and the Pacific College of Osteopathy. If each Alumni member would make it his or her duty to send one student each year to this College, see what it would mean in four years' time. If the Alumni members of the Pacific College of Osteopathy and the Los Angeles College of Osteopathy would join in this great duty, the growth of the College would be spontaneous.

Now, do I hear you asking, how can I do this? You know how, but time has weaned you away from College days.

This edition of the Western Osteopath was edited with the one thought in view to let you know what the College is doing, and bring back to your mind the time when you were in College.

If you find a person whom you feel is interested in Osteopathy, who has the previous education, send the names to the Registrar. Get a catalogue, take an interest and join hands with us in this campaign for a bigger and better College.

THE COLLEGE EDITOR.

“WHY NOT AN ALUMNI ORGANIZATION?”

A PRESIDENT of any live College will tell you that one of the most valuable assets of his College is his loyal and enthusiastic Alumni. If instead of being loyal boosters for the school our alumni go off and apparently forget that the school exists, whose fault is it? Are we to expect that our various busy graduates scattered throughout the country shall automatically keep their enthusiasm at a high pitch? If the Alumni are themselves apparently forgotten, of course, they will forget.

What shall we do? Just what every other college does—organize an alumni association. Let some member of the Faculty or some Alumnus associated with the College be appointed and paid to oversee this, for the old adage is still true that “what is everybody’s business is nobody’s business.”

Elect the officers of the association from among those that reside near and are in close touch with the College. The dues may be small—say \$1 per year for fifteen years, or \$15 paid in larger installments. Each alumnus after having paid the \$15 to be given a certificate of life membership in the College

of Osteopathic Physicians' and Surgeons' Association. Out of these dues an alumni bulletin could be published two or three times a year and sent to all of the members. This bulletin to contain news of all graduates about whom information can be obtained, and also to be a means of keeping the alumni informed as to the doings and needs of the College. It is surprising how one's dormant enthusiasm fires up at the reading of one of these "Home Letters" from the old Alma Mater with its news of many of our well remembered school-mates. Who wouldn't pay a dollar a year for fifteen years in order to get that privilege for the remainder of one's life. Have special ceremonies at each commencement time, for the reception of the "Baby Alumni" into the association. One association we know of applies a certain per cent of the dues received each year to the endowment fund of the College.

Let each graduate class organize and elect a permanent secretary and treasurer; someone who can be relied upon to do the work. Here, too, some member of the Faculty should take it upon himself to talk the proposition to every graduating class. What class in the midst of senior examinations and with the State Board before it is going to think up any remarkable and permanent scheme of organization for itself? This plan is followed by many schools.

Let the classes plan reunions, to meet during the conventions of the State Osteopathic Association, the first reunion to be held the third year after graduation, the second the fifth year, the third the seventh year, and after that every seven years. The members of the class are notified through the columns of the alumni bulletin of any activity concerning the association.

Other colleges do this. Why not the C. O. P. & S.?



Alumni

ALUMNI MEMBERS OF THE COLLEGE OF OSTEOPATHIC PHYSICIANS AND SURGEONS

Los Angeles : California

Abbott, Edward, Long Beach, Cal., 515 Markwell Bldg.
Agee, Aurette M., Kansas City, Mo., 128 Lawn avenue.
Akey, Mary V., Los Angeles, Cal., 4219 Central avenue.
Ames, Ada D., Los Angeles, Cal., Marsh Strong Bldg.
Ames, Munroe, Los Angeles, Cal., Marsh Strong Bldg.
Anderson, Alam M., Centralia, Wash.
Anderson, John Jr., Bingham, Utah.
Anderson, Leland, Los Angeles, Cal.
Arnold, Homer J., Colfax, Wash.
Arthur, Alexander, Philadelphia, Pa., 937 South 55th street.
Bain, Lenord.
Bashor, E. G., Los Angeles, Cal., 801 Ferguson Bldg.
Bashor, Horace A., Los Angeles, Cal., 801 Ferguson Bldg.
Barker, R. H., Vancouver, B. C., Happy Valley.
Bartholomew, G. H., Los Angeles, Cal., 340 Consol. Realty Bldg.
Bakter, Marvin V., Greenville, Texas, Citizen's National Bank Bldg.
Bell, George C., Santa Maria, Cal.
Bell, William J., Alhambra, Cal., Main and Garfield streets.
Bennett, Bernice, Long Beach, Cal., 221 West Eighth street.
Biddle, Samuel G., Los Angeles, Cal., Black Bldg.
Blind, Charles A., Waxahatchie, Texas, 1030 Hawthorne.
Bodmer, Vern, Pocatello, Idaho, box 1087.
Bruster, Raymond T., Los Angeles, Cal., care of *Evening Herald*.
Bricker, Edwin G., Winnipeg, Can., 714 Comersset Bldg.
Broadbent, Sydney R., Hollywood, Cal., 6412 Hollywood Bldg.
Broadhead, Annie, Long Beach, Cal., 218 East Seventh street.
Browne, J. Coleman, Stockton, Cal.
Brayton, Fred C., Los Angeles, Cal., 3607 Percy street.
Bryan, Charles, Los Angeles, Cal., care of Sisters' Hospital.
Buck, Estella, Los Angeles, Cal., 612 St. Paul street.
Buck, Robert H., Denver, Colo., Argonaut Hotel.
Burke, James C.
Cale, Linnia A., Los Angeles, Cal., 931 South Hill street.
Carin, Harold G., Fullerton, Cal., 118 East Chapman street.
Carr, Harry N., Detroit, Mich., care of Receiving Hospital.
Carr, Elvaretta W., Los Angeles, Cal., 1300 Manchester avenue.
Caylor, G. D., Los Angeles, Cal., care of City Maternity Service.
Chambers, F. S., Los Angeles, Cal., Hollingsworth Bldg.
Chamberlain, F. H., Los Angeles, Cal., 443 San Fernando Bldg.
Clark, Wallace C., Los Angeles, Cal., 1879 Echo Park avenue.
Clauson, J., Los Angeles, Cal., 1632 West 46th street.
Coghill, Cora E., Brea, Cal.
Collinge, P. T., McMinnville, Ore.
Collinge, Maud McG., McMinnville, Ore.
Colton, Guy W., Eagle Rock, Cal., 312 West Colorado boulevard.
Comer, Grace F., Los Angeles, Cal., 4122 Bernice street.
Comstock, John A., Los Angeles, Cal., 300 San Fernando Bldg.
Conger, Mabel, Corning, Cal.
Cope, James E., Los Angeles, Cal., Baker Detweiler Bldg.
Copeland, Francis Mc., Los Angeles, Cal., 4050 Dalton avenue.
Crew, D. A., Upland, Cal., 690 North Second street.
Couturier, Joe C., Los Angeles, Cal., 315 Merchants' National Bank Bldg.
Culbertson, May J., Sierra Madre, Cal., 193 West Central.
Culver, Phoebe, Roseburg, Ore., care of J. F. Culver.
Currie, Isabel K., Los Angeles, Cal., 625 Loomis street.
Currie, Helen B., Glasgow, Scotland, 19 Royal Crescent.
Davidson, Bertha, Portland, Ore., 913 Selling Bldg.
Davidson, Frank, San Francisco, Cal., 81 Ninth street.

- Deeks, Frederick, Toronto, Can., 202 Dominion Bank Bldg.
 Deming, Ed C., Los Angeles, Cal., 300 San Fernando Bldg.
 De Jardine, C. A., Toronto, Can., Dumick Bldg.
 De Lario, Charles E. (killed in action in A. E. F.).
 De Muth, Luther, Los Angeles, Cal., Wright and Callender Bldg.
 Dieterich, O. A., Glendale, Cal.
 Dinsmore, Beatrice, Redding, Cal.
 Doak, Merton S., San Pedro, Cal., 429 Santa Cruz avenue.
 Deau, Exilda, Los Angeles, Cal., Auditorium Bldg.
 Driskell, George W., Los Angeles, Cal., Union League Club.
 Dyer, Caroline, Hilo, Hawaii, 418 Waihanuenu avenue.
 Dyer, Louis Q., Los Angeles, Cal., 300 San Fernando Bldg.
 Eaton, Ruth L., Oregon City, Ore., Masonic Bldg.
 Eckles, James C., Casa Verduga, Cal., 920 North Central avenue.
 Elliott, Mabel M., San Diego, Cal., Spreckels Bldg.
 Elvins, Richard E., Spokane, Wash., 209 Paulson Bldg.
 Epperson, Ben C., Stirling City, Cal.
 Epperson, Ury M. (killed in action A. E. F.).
 Fabrick, Frederick, Los Angeles, Cal., 817 Baker Detweiler Bldg.
 Fellows, Odell T., Los Angeles, Cal., ninth floor, Brack Shops.
 Fenner, H. A., North Platte, Neb., 6 Reynolds Bldg.
 Fleming, Lou, New Orleans, La., 1117 Maison Blanche Bldg.
 Fleming, Elsworth, Long Beach, Cal., First National Bank Bldg.
 Ford, Edith Webb, Glendale, Cal., 417 West Burchette avenue.
 Ford, Robert L., Glendale, Cal., 417 West Burchette avenue.
 Ford, Ernest L., Corning, Cal.
 Ford, Maud A., Corning, Cal.
 Fratello, A., deceased.
 Games, Marion, Santa Ana, Cal., Spurgeon Bldg.
 Gatton, Mary, Los Angeles, Cal., care of County Hospital.
 Ghering, Roscoe L., Spokane, Wash., Masonic Temple.
 Gibson, Katherine, Los Angeles, Cal., Consolidated Realty Bldg.
 Goode, J. L., Los Angeles, Cal., 2633 Magnolia avenue.
 Gordon, K. W., Los Angeles, Cal., 1910½ Allesando street.
 Gordon, Mary A., Los Angeles, Cal., 4811 Pasadena avenue.
 Goudy, Amelia, Los Angeles, Cal., 219 North Olive street.
 Gray, Harold V., El Centro, Cal., 519 State street.
 Green, Wilford E., Los Angeles, Cal., 821 San Fernando Bldg.
 Griffiths, George A., Fayetteville, N. C.
 Griffin, Fred A., Los Angeles, Cal., 806 Wright-Callender Bldg.
 Gustason, David G., Los Angeles, Cal., 1035 South Oxford street.
 Guyton, J. F., Los Angeles, Cal., 5889 Inskip avenue.
 Haley, Waldo E., Crawford, Colo.
 Hamilton, Catherine, Ontario, Cal., 519 North Euclid avenue.
 Hanes, E. F., Calais, Me.
 Hatch, A. P., Newark, N. J., 567 Warren street.
 Hatch, Blanche A., Newark, N. J., 567 Warren street.
 Harvey, Kenneth B., Los Angeles, Cal., 321 West Third street.
 Harvey, Harold E., Berkeley, Cal., 2251 Telegraph avenue.
 Hayman, Benjamin, Houston, Texas, Kress Bldg.
 Haywood, J. N., Thatcher, Ariz.
 Hockom, Emil E., Tacoma, Wash., 795 South Eye street.
 Hockom, Mabel S., Tacoma, Wash., 795 South Eye street.
 Hoeffter, P. T., Los Angeles, Cal., Ferguson Bldg.
 Holcomb, W. L., Denver, Colo., Empire Bldg.
 Holden, Naoma C. E., Arbuckle, Cal.
 Hoskins, Mrs. Avis, Chicago, Ill., 122 South Ashland boulevard.
 Hoskins, Earle, Chicago, Ill., 122 South Ashland boulevard.
 Howe, J. Willoughby, Los Angeles, Cal., 310 Ferguson Bldg.
 Howland, Mary, Los Angeles, Cal., 2187 West 29th place.
 Huer, L. W., Imperial, Cal., care of Tamarack Ranch.
 Hummel, A. A., Hollywood, Cal., 5502 Santa Monica boulevard.
 Hummel, Sarah M., Chicago, Ill., 906 Goddard Bldg.
 Hunt, Fred W., Hyde Park, Cal.
 Huxley, Robert D., Los Angeles, Cal., 315 West 60th street.
 Ingle, Joseph L., La Grande, Ore., New Foley Bldg.
 Ingles, Iona S., Long Beach, Cal., Moody Bldg.
 Jacquemin, A. N., Boise, Idaho.
 Jason, Harold L., Bard, Cal.
 Jennings, Grace P.
 Jeffery, E. J., Seattle, Wash.
 Johnson, Eda L., Sienyu, Fukien, China, Margaret Elizabeth Nash Memorial Hosp
 Johnstone, Emily L., Ventura, Cal.
 Kahn, Paul, Los Angeles, Cal., 512½ South Main street.
 Kalt, A. V., Pasadena, Cal., 637 Chamber of Commerce Bldg.
 Kaylor, J. W., Bellingham, Wash.
 Keam, Elinor M., Melbourne, Australia, Cornhill Chambers, Collins street.
 Kidder, Carl E., Los Angeles, Cal., 3519 Central avenue.
 King, Errol R., Riverside, Cal., 205 Pennsylvania Bldg.
 King, Franklin P., San Bernardino, Cal., 305 Chamber of Commerce Bldg.
 Landers, Leonora, Trinidad, Colo., McCormick Bldg.
 Lawson, Robert G., Glasgow, Scotland, Lion Chambers, 170 Hope street.
 Lee, Andrew B., Los Angeles, Cal., 840 North Occidental.
 Lee, Morgan P., Los Angeles, Cal., 534 Mason Bldg.

- Line, F. Warren, Oakland, Cal., 170 Athol avenue.
 Linwalter, D. G.
 Lister, Anna, Pasadena, Cal., 302 Grant street.
 Lord, Caroline C., Los Angeles, Cal., care of County Hospital.
 Lusby, Ralph, Glendale, Cal., 323½ Brand boulevard.
 Lynch, John L., Eugene, Ore.
 Lyda, Elizabeth E., The Dalles, Ore.
 Lyon, Harry W., Calipatria, Cal.
 Malin, William, Los Angeles, Cal., 6925 Hollywood boulevard.
 Maloney, Henry L., Los Angeles, Cal., 1364 Walnut street.
 Makielski, Peter H., Mishawaka, Ind., 126 Lincoln Way West.
 Marsburn, Elsie, Los Angeles, Cal., Ferguson Bldg.
 Martin, Francis W., Los Angeles, Cal., 407 Ferguson Bldg.
 Martin, Alexander, Los Angeles, Cal., 407 Ferguson Bldg.
 Miller, Laura Jean, Los Angeles, Cal., 602 O. T. Johnson Bldg.
 Minter, Edith E., Ontario, Cal., 321 West D street.
 Moorhouse, I. K., Norway, Me.
 Morris, Wade H., Los Angeles, Cal., 421 Black Bldg.
 Morgan, Gladys, San Diego, Cal., Spreckels Bldg.
 Mortenson, E. B., Huntington Park, Cal., 125 North Pacific boulevard.
 Moss, L. S., Oakland, Cal., 4151 35th avenue.
 Murray, S. L., Los Angeles, Cal., 1926 Ellendale avenue.
 Murphy, Mrs. E. T., Gary, Ind., 105 West Fifth avenue.
 McAllister, T. W., New Westminster, B. C., 815 Fourth avenue.
 McCleery, Grace L., Moneta, Cal.
 McClelland, Claude L., Ontario, Cal., 142 North Euclid avenue.
 McDonald, Laura, Los Angeles, Cal., 915½ West First street.
 McEwan, E. N., Olathe, Colo.
 McKay, Eva J., Sunnyside, Wash., 506 Commercial Bldg.
 McMath, Paul W., El Segundo, Cal., State Bank Bldg.
 Naylor, James D., Los Angeles, Cal., Ferguson Bldg.
 McMullen, Beatrice N., Fullerton, Cal., 229 East Commonwealth avenue.
 Nickerson, Francis S., Los Angeles, Cal., Hollingsworth Bldg.
 Nye, Clarence L., Los Angeles, Cal., 300 San Fernando Bldg.
 Oieweller, Hester T., Santa Ana, Cal., 114½ East Fourth avenue.
 Ousdale, A. F., Santa Barbara, Cal., 1202 Chapala street.
 Packard, R. M., Oakland, Neb., box 457.
 Paine, Harry W., Oregon City, Ore., 911-J-2 Adams street.
 Palmer, H. G., Compton, Cal.
 Pentz, Herbert H., Boston, Mass., 19 Arlington street.
 Pfeifer, A. D., Los Angeles, Cal., 3224 Pasadena avenue.
 Phillips, Harriet L., Hollywood, Cal., 6404 Hollywood boulevard.
 Pickett, Nina E., Portland, Ore., 751 Morgan Bldg.
 Pierce, Thomas O., St. Joseph, Mo., Bowlinger Bldg.
 Piersall, C. E., Oklahoma City, Okla., 811 American National Bank Bldg.
 Pine, J. W., Spokane, Wash., 209 Paulson Bldg.
 Powers, R. A.
 Powis, H. S., Arbuckle, Cal.
 Prager, Loe, Los Angeles, Cal., 319 Hollingsworth Bldg.
 Rawson, Guy A., Los Angeles, Cal., Exchange Bldg.
 Reed, William J., Los Angeles, Cal., 509 East Vernon avenue.
 Reid, John R., South Pasadena, Cal., 837 Grand avenue.
 Reinkin, Emmitt D., Troy, Mont.
 Riley, Henry W., Chicago, Ill., 4330 Park avenue.
 Ritchie, Mary, Manchester, Eng., 13 St. Ann street.
 Roane, William, Los Angeles, 309 West 53rd street.
 Roberts, R. M., Corvallis, Ore.
 Robie, R. F., Oakland, Cal., First National Bank Bldg.
 Roe, Edmund A., Edmonton, Alta., Can., 322 Tegler Bldg.
 Rosa, Emma E., Los Angeles, Cal., 796 Kensington road.
 Rowlington, C. B., Los Angeles, Cal., 796 Kensington road.
 Sargent, V. O.
 Sears, G. S., Colton, Cal., 325 North Eighth street.
 Schellenberg, S., Los Angeles, Cal., 407 Ferguson Bldg.
 Sechrist, Ward, Alhambra, Cal., 423A West Main street.
 Shackerford, E. J., San Diego, Cal., American National Bank Bldg.
 Shaffer, W. I., Gotenberg, Neb., 11 Hinkley Bldg.
 Sharp, O. L., Los Angeles, Cal., 504 Black Bldg.
 Sharp, H. E., Los Angeles, Cal., 507-8 Auditorium Bldg.
 Skaden, Robert S., Caldwell, Idaho.
 Shaw, Eva, Los Angeles, Cal., 6300 Arroyo Seco avenue.
 Slosson, Jane, Geneseo, Ill.
 Sluttus, Daisy, Los Angeles, Cal., 1143 South Normandie.
 Smith, Ralph E., Los Angeles, Cal., care of County Hospital.
 Smith, W. Burr, Los Angeles, Cal., 2834 Stephenson avenue.
 Spalding, A. Q., Pasadena, Cal., 949 Fair Oaks avenue.



- Spear, J. L., Santa Rosa, 808 Benton avenue.
 Stevens, Thomas M., Modesto, Cal., 821 Seventeenth street.
 Stevens, G. W.
 Stewart, James, Mill Valley, Cal.
 Story, Mignon, San Luis Obispo, Cal., 1342 Garden street.
 Stuart, Miss E., Portland, Ore., 751 Morgan Bldg.
 Styles, J. H., Kirksville, Mo.
 Sutton, C. C., Santa Ana, Cal., Spurgeon Bldg.
 Sutton, Marian G., Santa Ana, Cal., Spurgeon Bldg.
 Sweeney, Genevieve.
 Taylor, Charles L., Long Beach, Cal., 331 Pennsylvania street.
 Teeter, John J., Los Angeles, Cal., 1111 South Alvarado avenue.
 Teeter, J. E., Los Angeles, Cal., Bradbury Bldg.
 Thomas, G., Stockton, Cal.
 Thurston, F. H.
 Tietjens, G. W., Denver, Colo., 1554 California street.
 Tingley, E. C., Glendora, Cal., First National Bank Bldg.
 Tuttle, A. M., Bakersville, Cal., First National Bank Bldg.
 Utterbach, C. B., Puyallup, Wash., S. P. Gray Bldg.
 Vance, Lilla, Los Angeles, Cal., 1645 Ingraham street.
 Vanosse, Oliver E., Stockton, Cal., Farmers and Merchants Bldg.
 Van Dorn, I. Cellan, Spokane, Wash., 715 Old National Bank Bldg.
 Van Dorn, Bernice M., Spokane, Wash., 715 Old National Bank Bldg.
 Van Valkenburg, R. D., Washington, D. C., 1415 G street, N. W.
 Wade, Charles W., Los Angeles, Cal., Wright-Callender Bldg.
 Warner, Earl.
 Watson, Joseph E., Los Angeles, Cal., Ferguson Bldg.
 Watson, T. O., Seattle, Wash., 601 Seaboard Bldg.
 Watson, J. M., Los Angeles, Cal., Black Bldg.
 Weaver, Rachael, Seattle, Wash.
 Webb, E. B., Los Angeles, Cal., Hollingsworth Bldg.
 Webb, Ora L., Los Angeles, Cal., 518 Ferguson Bldg.
 Weis, Carolin, Eagle Rock City, Cal., 455 East Hill avenue.
 Wells, Clarence K., Los Angeles, Cal., 321 West Third street.
 Wells, C. E.
 West, Kathryn, Los Angeles, Cal., 2151 Elsinore street.
 Wilson, June L., Burbank, Cal.
 Wilson, Frank M., Exchange Bldg., Los Angeles, Cal.
 Weston, Albert M., Los Angeles, Cal., 742 South Burlington avenue.
 Whitcomb, F. S., Monrovia, Cal., or Fresno, Cal., Rowell Bldg.
 Whittenburger, C. R., Burley, Idaho.
 Wood, H. A., Amity, Ore.
 Wood, M. D., Spokane, Wash., 209 Paulson Bldg.
 Woolley, Fred M., San Francisco, Cal., 1314 Broderick street.
 Wrenn, W. R., Los Angeles, Cal., 1212 South Flower street.
 Wright, Ben O. L., Hollywood, Cal., 4626 Melbourne avenue.
 Wright, O. L., Los Angeles, Cal., 602 O. T. Johnson Bldg.
 Wright, C. N., Santa Ana, Cal., 210 North Ross street.
 Wright, Mary, Santa Ana, Cal., 210 North Ross street.
 Yates, Wilbur S., Athol, Mass., 386 Main street.
 Yeaton, Ivan D., San Francisco, Cal., S. F. College Physicians and Surgeons.
- The addresses of the doctors above are as correct as we can trace. If any change has been made we would appreciate being notified of same.
- Below are listed the number of graduates of the Pacific College of Osteopathy and the Los Angeles College of Osteopathy, both uniting to form the College of Osteopathic Physicians and Surgeons.
- Alumni members of P. C. O.....261 Alumni members of L. A. C. O.....456



Dr. Smith (in Gyn Clinic)—What are the non-infectious causes of endocrinovicitis?
 Student Olewiler—Buttonhole pessaries.

The Western Osteopath

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Subscription \$1.00 per year in Advance

Hotel Bellevue

San Francisco, June 14 to 19

A week's post graduate course that would cost you little less than \$100 elsewhere; the things you want to see and know about will be there, and then when you are tired of clinics and technic and lectures, just to get together and know each other a little better, with a bit of fun intermingled, and all this in that warm, sunny spot about San Francisco Bay in the Golden State of the West.

C. B. Atzen, D. O.

Said a D. O.: "If I were to pick the one man best fitted to lead the Osteopathic profession at this time I would without hesitation name Dr. Atzen of Omaha. He has shown this leadership many times at our great gatherings—a leadership that illumines and inspires. He is a man with a message and a vision, and he is able to so clearly deliver that message that you will get his vision. Withal, as his subject suggests, he is a foremost scientific Osteopathic physician whom no one should miss on the May Circuit Clinic."

Three notable issues of the WESTERN OSTEOPATH—the Surgical Number, which several pronounced the best of the W. O. numbers yet published, this,

the Student Special, and then the Women's Osteopathic Club of Los Angeles, with Dr. Jennie Spencer, chairman of the editorial staff.

To the Profession of California and the West:

The Western Post-Graduate Clinic Circuit has eclipsed everything previously attempted by any profession, medical or Osteopathic, in providing a program for local societies. The California Osteopathic Association with the Western Association as its guest, sincerely hopes to give, from the standpoint of practical information, the best and most helpful convention ever held anywhere—State, national or international. The practical application of the principles of Osteopathy in all of its branches, will be the watchword of the Convention.

San Francisco welcomes you. The San Francisco Osteopaths are providing for your comfort. The Bay Society bids you attend. The State Cabinet, with the aid of the College, is providing a Post-Graduate Course that will give you something of value along every line of diagnosis and treatment; methods you will be able to employ in your daily practice.

Come, bring your friends. Enjoy the convention and you will want to "Come again."

W. W. VANDERBURGH,
President.

The State Convention Program

The programs of the recent conventions held in Los Angeles have established such a high standard of usefulness and excellence that only with great difficulty could they be excelled. However, we are trying to as nearly as possible equal their good points. The program committee hopes to make the meeting as practical as possible, to have it answer the problems of the profession and of the individual, to have it show the latest developments in the various branches of medical knowledge, and, above all else, to have it thoroughly and enthusiastically Osteopathic.

As last year, the mornings will be given over to the post-graduate clinic work, conducted by the professors of our School (now being arranged for) and others of our efficient men. Dr. C. C. Reid of Denver will give some of his justly celebrated "Efficiency Lectures." Dr. Gerdine of the Still Hildreth Sanitarium will again conduct classes in psychiatry. Drs. H. E. Penland and F. A. Lacey will lecture. There are also some further interesting possibilities. A feature will be the holding of a technic hour from eleven to twelve o'clock each day, when five of our best technicians will be working and all who attend will be rotated through their classes. Have you any suggestions as to whom you would like to see?

Regarding the clinic work, the committee would like to announce that heretofore too much of the clinician's time has been taken up with examining the cases before the clinic. Help them to make the clinic of greater value through covering more cases by bringing with you cases and, if possible, handing to the clinicians the day before as complete historical, clinical and, if possible, laboratory case reports as can be arranged.

Remember the clinicians will be instructed to give precedence to those

cases having such reports, and possibly they may never get to your case.

The program of the convention will consist of from six to eight papers, some business, a Ruddy "round table" and possibly a question box each afternoon excepting Wednesday, when an auto ride to beautiful La Honda Canyon for a barbecue will be staged. Monday evening there will be a reception and dance.

Dr. Gwladys M. Morgan has charge of the Tuesday program, which will be devoted to pediatrics. At the same time a baby show will be staged in another room, and in the evening there will be a public lecture to parents.

On Thursday a wonderful program will be given by the Los Angeles Surgical Society devoted largely to the signs and indications for surgical interference in the various portions of the body. Among other useful things they will teach us what is regarded as good surgical advice so that our advice to our patients may be strictly up to date.

On Thursday evening the attending members will receive a treat. Dr. Tasker has kindly consented to give a lecture, "I Love You, California," illustrated by his nation-famous natural color photographs and covering the scenic wonders of all portions of our State. There is a possibility of the W. O. A. accepting an invitation to stage a program on Friday. Friday night we banquet.

Saturday will see the regular program.

Besides the Tuesday and Thursday sessions, the features of the program already arranged for are a lecture by Dr. Louisa Burns on the New Concepts of Physiology and their relation to Osteopathy, lectures by Drs. Reid and Gerdine; one by Dr. Sylvia Boyce on "The Further Development of Osteopathy"; one by Dr. Josephine Jewett on "The Internal Secretions"; lectures by Dr. W. H. Wakefield and Herbert Nims.

Others are now being arranged for.

If you do not see what you want, ask for it.

If you know of anyone doing special work whom we should hear from, tell us. When the final draft of the program is printed, study it, think out what you would say on each subject and come prepared to discuss it. Come prepared to contribute from your knowledge and experience. Help us to make this convention worth attending.

WILLIAM HORACE IVIE,

Chairman Program Committee.

One Newspaper's Report of Dr. Edmiston's Meeting

(The Osteopaths of Blackfoot, Idaho, invite Mr. Byrd Trego, editor of *The Idaho Republican*, to attend the meetings at Pocatello. The editor listens very attentively to every doctor and gives nearly a page write-up of each monthly meeting. Following is his description of what he heard at Dr. Edmiston's lecture:)

OSTEOPATHS HOLD STATE CONVENTION

Large Attendance at Meeting in Pocatello Friday

CLINIC INTERESTS

A convention of Osteopaths was held at Pocatello last Friday. It was a district meeting, this organization being a branch of the State organization, which in turn constitutes a branch of the National organization. They hold these meetings monthly, and an expert is brought in to conduct a clinic, in this way keeping the local practitioners taught in the latest things of the science. The leader in Friday's meeting was Dr. S. C. Edmiston of Los Angeles, who opened the clinic at 2 o'clock and continued it till 11:30 p. m. with an intermission of one hour for dinner.

It had been known for a month

that Dr. Edmiston would be there on that date, and a good many people had made arrangements to attend the clinic to be operated upon. The editor of *The Idaho Republican* was present by special invitation, and witnessed the operations and accompanying demonstrations and lectures. It was intensely interesting, fascinating and all but startling in its revelations at times. It brought up thoughts of painless remedies and bloodless surgery surpassing fiction, and all surcharged with a reality that was satisfying. The waiting list was made up of men, women, boys, girls, rich and poor, prominent and lowly, and the skill of the leader with his jolly ways of diagnosing cases at a few glances and then proving his case and then applying relief or remedy by a gentle pull or a tug or a twist at spots he had previously described as being inflamed or tender, kept interest keen and some of the time brought forth merriment and good cheer not expected to be witnessed in the sick room or the places where afflicted people are gathered and treated.

The patients entered the operating room knowing they were to be surrounded by a company of strangers, but accompanied by one or more friends, and what most of them expected would be a trying ordeal proved to be a little visit with a leader who in most cases would stand back and tell the patient when to sit, when to stand, when to lie down and when to turn over, and all the while the patient would be thinking back and confessing what accidents he or she had had, what illnesses had followed, and what the results had been, and much of the time laughing to see how simple had been the cause of damage to self. From what we saw at the clinic we think that a person could send his clothes to Dr. Edmiston to examine and he could look them over, note the

strains and places of greatest wear on them and make a very correct statement of what was the matter with the patient. He says that people's occupations are now writing their health record and their expectancy to a great extent, and that we are running so much into specialties that unless we give more attention to scientific training and recreation our occupations will identify us among all observing people and will also determine our fate. The old story of Agassiz, the scientist, who on being shown the scale of a fish, could make a correct drawing of the fish it was taken from, and the location of that scale on the fish, seems suggested again in Dr. Edmiston, who on casting his eye over a patient lying flat on a table with his clothes on, could make a sketch on the blackboard and mark the spots in his body that would be found to be inflamed and sore to the touch, and all this before he had touched him.

The writer took no notes for use in making a detailed write-up, but in the next issue will make a few statements regarding the science as it was presented.

Doctors A. H. McFarland and F. A. Sloan and Editor Byrd Trego attended from Blackfoot, and from other places were J. R. McMillen, Twin Falls; Ada Sash Symmonds, Idaho Falls; Vern M. Bodmer and wife of Pocatello, Andrew M. McCauley and wife of Idaho Falls, Grace J. Parks of Pocatello, E. C. Hiatt of Rexburg, George A. Aupperly and Dr. Rogers of Idaho Falls.

In the business meeting following the clinic, they elected Dr. F. A. Sloan of Blackfoot chairman of the Idaho Falls district, and adjusted their rates for fees to make them uniform. For treatment at the office the charge is \$2.50, treatment at the home is \$3.00, night calls after 9 o'clock \$5.00. Persons who are poor and unable to pay

can get treatment without price by satisfying the Osteopath that he or she is a person of good character and deserving and worthy of help.

Progress

This is a day of progress. Osteopathy is clearly the greatest step for progress in the therapeutic field, in a century. It is progressing today. Let us progress with it, never failing to grasp an idea that will aid us to more intelligently apply the principles of the greatest science known for the treatment of disease.

In order to grow we must have the opinions of others in the same line of thought. This opportunity is afforded through the Post-Graduate Clinic Circuit. The "live wire" Osteopaths of each city will be the recipients of invaluable information,—the latest developments in every field of Osteopathic endeavor.

This circuit is a miniature post-graduate course, in that each speaker is a specialist in his field, and we have the opportunity of securing information that is invaluable to use in our general work, at the least possible expense to us and with scarcely any loss of time from our offices. In other words, the information is brought to our door with little or no effort on our part; each speaker largely paying his own expenses through consultation fees.

This Clinic Circuit also affords us an unusual opportunity in that we are able to call into consultation the best men in the field, right in our own city, without the necessity of paying their carfare in addition to the consultation fees. Many of these men are receiving hundreds of letters a year asking advice on treatment and diagnosis. Now they may be asked these questions in person.

There never has been such a demand for Osteopathy as at present. We need

more in almost every Western city, and to get more Osteopaths we must send more students. Twenty-five years of student-getting will not supply the demand, for the demand will be constantly increasing if we think Osteopathy, live Osteopathy and practice the pure unadulterated Osteopathy of Andrew Taylor Still.

MABEL GAMBLE, D. O.,
Salt Lake City, Utah.

Ignorance vs. Knowledge

My attention was recently directed to some grievous mistakes made by certain of the old school practitioners; mistakes which I cannot understand any educated physician making and for which I can ascribe only the excuse of gross ignorance or wilful dishonesty. I am inclined to think the former is the case, as I am sure that these men are absolutely sincere in all that they do. Ignorance must therefore be the answer. Do we as Osteopathic physicians ever lay ourselves open to the same form of criticism?

We know that the science of medicine is advancing with leaps and bounds and too, we know that we are not situated so as to keep right up to date along all general lines as we rightly should. We will all agree that it would be best for us if we could take a post-graduate course every year or so, but that is impractical to many. What are we to do then—just stay in our old rut and rust?

The Western Osteopathic Association has hit upon a very novel scheme and one which is entirely original so far as I know. It has recognized the great need and has endeavored to remedy the condition in a very practical manner in the form of its post-graduate circuit. By this means we get the benefit of special ideas from men who make a specialty along certain lines. Through it we find that there are other ideas besides our own and which may be

more worthy of application than ours, and if the person coming is a specialist we can accept his as the voice of authority. We thus have the benefit of a resident post-graduate course without having to spend time, money and miles of travel.

The two speakers who have already passed over the circuit have blazed the way for more and have proven that the idea is not a dream but a practical, workable plan, especially in regard to the expense, as it is almost unbelievable what it costs the individual local society.

All great movements begin slowly, at first, and this new venture is no mushroom.

J. COLEMAN BROWNE, D. O.,
Secretary, Sacramento Valley
Osteopathic Society.

In Union There Is Strength

"United We Stand. Divided We Fall."

The profession should find it in their hearts to honor the unselfish patriots who have taken up arms that Osteopathy as a distinct school of medicine shall not perish. The new Organization Draft aims that every D. O. will not only be enlisted, but trained for the service. 1920 should find all on active duty.

A monthly speaking tour of Western States.—Who can think of a more effective process of post-graduate education, a more ethical advertisement for Osteopathy, tending to help every physician in each district in exactly the same proportion as he helps in the promotion of the Clinic. As soon as we are accustomed to a traveling clinic, the matter of accumulating cases will be easily solved. Referred cases will be very much impressed by the distinction that comes to them from consultation with a specialist from afar, not to mention the help that may come to him from the examination or treatment given in the Clinic. No

doctor can be expected to see every case from every angle.

The value of the speaking tour to the physician who does not often meet another of his own profession can scarcely be over-estimated. The dread of falling into the proverbial "rut" is in the background of every doctor's mind and no matter how broad he may feel, frequent association with his colleagues will help him to a clearer, truer interpretation of the Science of Osteopathy.

MAUDE CALLISON,
Secretary, Arizona Osteopathic
Association.

Wherever Osteopathy's Banner Is Unfurled.

Organization touches a vital spot in me. I have long realized its need. Those who fought and weathered the storm in the past realized it, and sooner or later we must all come to realize how much we need a thorough organization for future development. Not only is this true of this State, but everywhere, wherever Osteopathy's banner is unfurled.

Now that we have, in my opinion, passed the crisis, death can come only as a result of living for self and not supporting law and regulation pertaining to a solid organization.

About two years ago our imitators were leading us in strength, only because of their thorough organization. As a result of unity this strength grew in spite of the fact that they were but imitators. Imagine then what could be accomplished by the real with a united front.

After a few weeks' trial with the Clinic here in Boise, though many difficulties are yet to be overcome, I can see nothing but success as a result of combined effort, not only from the doing of good to others, but as an incentive to our own efforts and an example to the public to prove to them that we

merit their support. Could we each one fill our niche there would be no limit to our accomplishments.

I am hoping we will realize these things and that we will not wait until we are driven together by storm, thus losing power by not having our forces organized.

GEO. H. HANDY,
President Boise Valley
Osteopathic Society.

In San Diego

The members of the San Diego Co. Osteopathic Association were very enthusiastic over the recent visit of Dr. E. M. Downing, of York, Pa.

Dr. Downing's technic for treating the cervical regions is simple, unique, and thoroughly scientific. A splendid afternoon clinic was held in the offices of Dr. Nellie Pierce and Isabel Austin.

A banquet was held in the Hotel Churchill, after which all adjourned to the offices of Dr. Louise C. Heilbron, where a most profitable evening was spent.

The Association voted unanimously to endorse all amendments suggested for the Constitution and By-Laws. Several months ago it had been voted to open a clinic, but no definite plan was made.

It took Dr. Whitehouse's "up-to-the-minute" talk to boost the work along. The outcome will be the establishing of a clinic similar to the Pasadena Clinic.

Dr. Emma E. Donnelly was present and gave us a very interesting outline of the good work already accomplished by the Pasadena Clinic.

Dr. Downing gave a short talk and also corrected a number of cervical and upper dorsal lesions by his special technic.

Dr. A. S. Noble gave a short talk upon Technic, commenting especially upon the simple and scientific method of Dr. Downing's treatments.

The San Diego County Osteopathic Association voted unanimously for the continuing of the monthly clinic.

LOUISE C. HEILBRON,
Press Chairman.

Osteopathic Hospital in Boise

Again the "Whitehouse Organization" scores! With the guiding hand of President Charles H. Spencer and the generosity of Dr. T. J. Ruddy, the Boise Valley Osteopathic Society opened its campaign for a hospital under the auspices of the "Hospital Bureau" of the W. O. A.

Dr. Ruddy challenged us to round up a \$2,000 clinic for a two-day stand, and we nearly did it, at least he said he had "enough," even with such good assistants as Dr. R. S. Skaden of Caldwell, Dr. N. B. Barnes of Emmett, and Drs. C. E. Freeman, L. D. Anderson, C. W. Kingsbury and G. H. Handy of Boise constantly at his beck and call.

Plans are being prepared to secure estimates on alterations and equipment on certain prospective sites, and "eager expectation" mildly expresses our hopes for the near future.

The two-day Ruddy clinic increased enormously the prestige and public knowledge of Osteopathy not only in Boise, but in all the towns in this valley, and we believe the time is ripe to attempt the realization of our dream of an Osteopathic hospital.

—C. E. F.

We had to cut down for this issue or we couldn't get it into the envelope. The other articles will be in ensuing numbers.

The Idaho Republican is the paper on the circuit that deals most generously with the Circuit Clinician. Seldom less than a full page and often a verbatim report of every man's lecture.

The "Bug Bear" of Small Societies Overcome

All of the members of our Society have been unanimous in their expressions of being well pleased with the policy and purposes outlined by the W. O. A. and hope to see the "Circuit Clinic" a great success. We visualize, dimly as yet I suppose, an organization which will mean much to us individually and to our profession as a whole.

Dr. Edmiston was greatly appreciated. We only regretted we did not have him with us longer. He left us "food for thought," and I am sure all who heard him will be better Osteopaths for his having been here.

The great "bug bear" of a small local Society has always been the program for the meetings. In the new organization this is ably provided for and it is with considerable anticipation we look for the advent of our next speaker.

Here are our very best wishes and, I trust, strong support for the W. O. A.

OLIVIA A. LYNN,
President, Southern Colorado
Osteopathic Society.

The Ethmoid Chapter of the College of Osteopathic Physicians and Surgeons would like to get in touch with all Axis members in California or in the Western States Association. We want to know them, regardless of the chapter or school which they originally joined. They can communicate with Miss Havemann.

"Am using 'bedside technic' methods and working on spleens with good results."—BERTHA E. SAWYER.

State Board of Medical Examiners will meet week of June 28, 1920.

Dr. Fred M. Wooley is another successful candidate before the State Board, and will be associated with his uncle, Dr. Burke of San Francisco.

Some of the Things I Am Getting Through the Western Osteopathic Association

1. A regular post-graduate course—each month a different subject.
2. Getting acquainted with some of my Osteopathic neighbors.
3. Getting a chance to discuss Osteopathic questions and problems with them.
4. Getting away from old ruts.
5. Getting the cobwebs brushed out of the brain.
6. Getting more diagnosis and treatment.
7. Getting a broader outlook of Osteopathy.
8. Getting a big dose of enthusiasm each month.
9. Getting a chance to know and hear some of the big men of the profession.
10. Better able to understand and appreciate the writings of these men.
11. Getting more patients because of the above things.
12. My patients are getting better service.

These things are all made possible by the splendid organization of the Western States. The cost is only a little railroad fare, with really no time lost from my office. It seems almost impossible that we can get so much for so little expenditure. Long live the W. O. A.!

CHAIRMAN OF CLINICS,
Idaho Osteopathic Association.

Dr. E. Bertella Ferguson has just returned from a two months' sojourn in Japan with a party of friends and patients. Dr. Edith Robb had charge of her practice in her absence, and is now associate physician. Dr. Robb made a splendid showing before the board and has joined the State association.

The Western Osteopathic Association has kindly sent Drs. Ruddy and Edmiston to Colorado. They came, we saw and they conquered—a goodly proportion, and now we are trying to make the rest of our people in the State see and be conquered.

These visits have awakened the thoughtful Osteopaths to the needs of our State and to its opportunities, and if we are awake we will be able to awaken those who are not in touch with our organization. Those who have been able to attend the Clinics are enthusiastic over the plan and its possibilities, for so much more can be accomplished by team work. This plan offers professional education, fellowship and the advancement of Osteopathy.

The plan of committees extending from the local group, through city and State to the Western should enable each one to work on the committee which most appeals to him, and if one is working along the line of one's inclination or hobby the work is much more apt to be attended to.

Plans are now being pushed for a hospital in Denver and the project is meeting with much approval, backed by money. A clinic is also under consideration, with good backing,—all of this new work, however, is being correlated, and has the backing of the Association. Nearly half of the profession in active practice in the State have undertaken to see the thing through, and we feel that ultimately each one will feel that he cannot afford to be outside. MARTHA A. MORRISON,

Secretary Colorado Osteopathic Association.

Children's Day

The most popular day of the P. G. week will be children's day, under the management of Gwladys Morgan, with Local Chairman Dr. Margaret Farnham, who has already planned for the co-operation of Mother's Congress.

Prince Jaime's Aural Trouble

(Glasgow *Herald*, March 2, 1920.)

Prince Jaime, 12-year-old second son of the King and Queen of Spain, who is at present in London receiving treatment from Mr. Johnston May, manipulative surgeon, Park Lane, is gradually gaining his sense of hearing. The young prince, who has been deaf since birth, has been treated by many eminent European specialists, but with comparatively little success. In December of last year Prince Jaime was first attended by Mr. May. A few days after his visit to the surgeon he was overjoyed at being able to hear part of the music at a performance of "Chu Chin Chow." Since that date his affliction has become gradually easier, and hopes are now entertained that by Easter the prince may be able to return to his native land completely cured. A few weeks ago, while inspecting his elder brother's chicken farm, in which he is greatly interested, Prince Jaime surprised his tutor by suddenly remarking, "What a funny noise," pointing at the same time to two ducks which were quacking loudly. The prince, who was taught to speak by means of lip-reading many years ago, was able to imitate the sounds which he had just heard.

Mr. May is a Kirksville man, but did not finish. He is not a member of the British Osteo. Society, prefers calling himself a manipulative surgeon.

Dr. Downing a Winner

The circuit clinic was running strong when on its way through Oakland. Dr. Downing had 'em all rocking. It was late at night when last seen, and he still had a waiting list. It was practical stuff, too, that he gave us. We hope Downing will come again, and his good wife too. We miss the best part of the man when he comes single-handed.

Questions

1. Why are the blood and lymph alkaline?

2. What is the pathological term applied to reduction of this alkalinity?

I wish members of the profession to furnish short trite answers to the above questions, to be published in the WESTERN OSTEOPATH. The best of these articles will also be used by our publicity secretary.—CURTIS W. BRIGHAM, D. O.

The American Osteopathic Society of Ophthalmology and Oto-Laryngology will be held at Chicago Osteopathic Hospital from June 21st to 27th. An unusually complete program of interest, not alone to specialists but to the general practitioner, is offered.

THEN

The great National meet, June 28th to July 2d, at which time more notable and constructive measures will be brought out than at any time in the National's history. The program will be next in interest to our San Francisco week, both as to men and material offered.

Our Students' Number

This issue is something unique in the history of the WESTERN OSTEOPATH, a student number—the Cortex Number, by our college students of Los Angeles. Not alone unique but full of college and allied stuff that will interest our readers. No copy matter, including cuts, was ever presented, our printers declare, in such good form as that offered them by Dr. Hurt and his staff. We believe our readers will join us in congratulations to Dr. Hurt and the splendid student body, who made this issue possible. This number should be a student-getter, and that's one big issue before the profession just now. Use your number to present the matter to prospects. If you need another we can send you one of the few extra we have for 75 cents.

What O! Western Osteopaths!

A generous welcome awaits you in San Francisco, June 14th to 19th, inclusive, at the annual convention of the Western Osteopathic Association.

Come, one and all; kith and kin! Headquarters, Hotel Bellevue, Geary and Taylor Streets.

Wire or write me if I can be of service.

EMILIE VICTORIA SUTTON,
291 Geary Street, S. F.,

Chairman of Social Committee.

"We have just had another wonderful meeting with Dr. Downing. We have been starving to death for just such things as these men are giving us. There is nothing that will wake up the Osteopathic profession like these lectures. I believe half the practitioners don't believe the principles, and why should they? When a new graduate goes to a State meeting he hears everything but Osteopathic technic. (Just you come to San Francisco Convention and see what's on.—Editor.) It's going to be different now when we see our leading men, come along with the enthusiasm that has been shown. Believe me, it puts a different feeling in a beginner—as well as the old ones.

"'Bedside Technic' opens up a wonderful field to me. I hope to be at San Francisco Convention for more technic."—DR. E. T. PARKER.

Opportunity.

Opportunity is knocking with a heavy mallet at the front door of every D. O. in the W. O. A. once every thirty days. Opportunity to procure a brain polish, oil up the machinery of Progress, and get that good old feeling of sitting up in the band wagon.

Would suggest to any D. O. who does not clearly hear and see this Opportunity, to launder his ears and have his myopic eyes refracted and fitted to 1920 glasses.

UNCLE PETE.

Just a few lines to express my appreciation of the efforts made by the Western Osteopathic Association in behalf of the members of the profession which it reaches by means of the Circle Clinic.

The Colorado Springs meeting, held March 24th, was a decided success. The demonstrations in technic given by Dr. Gaddis were an inspiration, and I can't help recognizing this as a long step in the right direction, and in the fulfillment of a long-felt want. The technic employed by Dr. Gaddis is great, and is a great improvement over the usual back-breaking methods, especially that used for general spinal relaxation.

No D. O. within a reasonable distance of the circuit can afford to miss the helpful instruction furnished by the W. O. A. along the various lines, with which every doctor in the profession should be familiar and competent in the employment of.

No matter how well we are versed in the science of Osteopathy theoretically, if we fail to employ methods that will successfully back up our claims our work is bound to be more or less a failure. The thoroughly equipped Osteopath will recognize every Osteopathic lesion the human body is subject to and will have developed a method, or various methods, of reducing that particular lesion. Some are born mechanics, and can figure out more readily the various ways of accomplishing the task before them than the ones not so favored, hence the need of instruction from these specialists along their particular lines by the practicing physician in the field who is in a position to employ it and demonstrate its usefulness.

Let the good work go on, and greater things are in store for those of us who utilize the light as fast as it is revealed to us.

E. WM. CALDWELL, D. O.

Athletics

C. O. P. S. TENNIS TEAM

"THE VARSITY"

DR. CHAS. C. TALLIAFERRO, JR.	Captain
MEREDITH T. WATERMAN	Manager
DR. K. B. HARVEY	Coach

RALPH D. HOARD

GEORGE STARR

SECOND TEAM

WALTER STAIRS

HOWARD MCGILLIS

RESULTS OF TOURNAMENTS

C. O. P. S.	7	Throop College	10
C. O. P. S.	7	U. of California S. B.	10
C. O. P. S.	10	U. of California S. B.	7
C. O. P. S.	4	Pasadena High School	13
C. O. P. S.	13	Monrovia High School	4
C. O. P. S.	16	L. A. Poly. High School	1
C. O. P. S.	17	Whittier College	0
C. O. P. S.	13	Lincoln High School	4
C. O. P. S.	17	Occidental College	0

103

49

TALIAFERRO, first man (Tully)—Taliaferro as our first man is a wonder at the game; he is all that can be asked for a pivot man; his service is a wonder and can not be returned by the best of them; as a singles player he has won five out of six matches and all his doubles matches except one. He combines brain with speed, and his sportsmanship always wins the crowd and the respect of his opponent. All our victories are due to "Tully's" strategy in playing the team to win and not to shine himself. "Tully" is entered in the All Southern and should win a name for himself and for C. O. P. S. He will be with us next year.

WATERMAN, second man (Merry)—Playing second singles and with "Tully" in doubles is about all "Merry" does besides going to school when he is not trying to dope out a tournament with some other institution of learning. He has won three of his singles matches besides helping Captain Taliaferro win the doubles. Not as fast as the first man, but he is a comer and should make good again next year.

STARR, third man (Twink)—"Twink" is an all round good worker, ever faithful in practice and always ready to give his best for COPS. "Twink" has won the majority of his games and brought fame to our College. Playing with his teammate Hoard he is a star. "Twink" will be with us next year.

HOARD, fourth man (Ralphus)—This is Ralph's first year on the courts, and too much must not be said of his work on the courts. He has worked hard and done his best. In all his matches he has shown great improvement and backed up Starr in every play in doubles. He has given his opponents a hard rub in all his matches, and won when his point was needed to win for COPS. Ralph will be with us next year.

The prospects for next year's team are very bright, as all this year's varsity will be back with us, and some of the men that were not able to get out this



year will be out to make a fight for a place on the team. Pat Ireland and Walter Stairs are men of good caliber, and will be able to be on the courts next year. The faculty has given the team its whole-hearted support and has donated sweaters to the team with the understanding that if they did their best that they would be given to the members of the varsity at the close of the season.

Dr. Harvey, our coach, has done much to develop a winning team, and much credit is due to him for our victories.

Doc. Dickenson, as our umpire, has been ever faithful and has always been with us.

Taliaferro and Waterman expect to play in California's classic, the Ojai Tournament, also in the All Southern, and should give a good account of themselves in both tournaments.

Here's Luck to Our Team.

Dr. Turney—What kind of disease caused most of the deaths in the army?

Maude Mason—Military T. B.

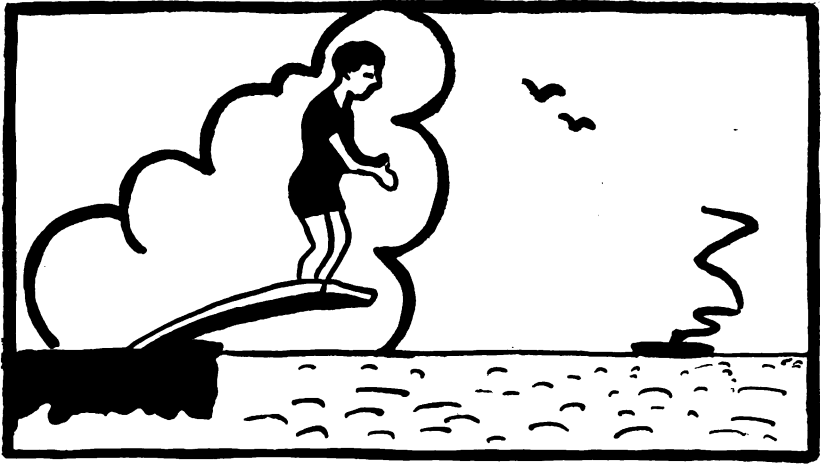
"SPRING FIELD DAY"

Field Day Manager—Ralph D. Hoard.	Freshman Athletic Manager—Robert
Senior Athletic Manager—Clarence	Kolts.
Hopkins.	Starter—Dr. Bert Weston.
Junior Athletic Manager—Carl Lind	Judges—Dr. Turney, Dr. Spencer,
Sophomore Athletic Manager—Meredith	Dr. Chandler, Dr. Copeland.
Waterman.	Announcer—Dr. Nye.

PROGRAM

9:30 A. M.—Indoor Baseball.....	Sophomores vs. Freshmen
10:30 A. M.—Rowboat Race	Men—Singles
11:00 A. M.—Canoe Race	Men—Doubles
11:30 A. M.—Rowboat Race	Girls—Doubles
12:00 to 1:00	Lunch
1:30 P. M.	Canoe Tilting Contest
2:00 P. M.—Rowboat Race	Men—Doubles
2:30 P. M.—Canoe Race	Girls—Singles
3:00 P.M.—Canoe Race	Men—Singles
3:30 P. M.—100-yard Swim	Men
50-yard Swim	Women
200-yard Swim	Men





A LITTLE FUN,
 A LITTLE PLAY,
 A LITTLE LAUGHTER
 DAY BY DAY,
 A LITTLE SCHOOL,
 AND, WE'LL CONFESS,
 A LITTLE BIT
 OF WAYWARDNESS.
 A LITTLE GRIEF,
 A LITTLE WOE,
 AS DOWN THE LATTER
 YEARS WE GO.
 A LITTLE LOVE,
 A LITTLE STRIFE,
 A DEAL OF HOPE—
 AND THIS IS LIFE.



"ANTICIPATION"

We are going to have "some time." Already there are signs of keen rivalry among the classes, with the exception of the Senior Class. But we hope to taunt and whip them into shape before the day. We are going to have real prizes for each winner of first and second places, and the Balboa Chamber of Commerce is awarding to the winning class a nice Felt Banner—worth working for, I will say.

If the practicing doctors will lend their support financially, physically and morally, as the school and faculty will, it will be *some day*. Witness the answers to the question, "Will you be there, Doctor?"

Dr. Spencer: "Obviously, it will be a necessity for the preservation of the well-being of the individuals and the continuity of the line of descent."

Dr. Chandler: "By all means it will create an opportunity to increase my diminishing opsonic index and reaction time."

Dr. Weston: "Why, certainly, the day will assist to reduce inflammation with no danger of producing anaphalaxis with a second dose."

Dr. Turney: "W-e-e-l-l-e, I guess so, 'twon't hurt me any." (I couldn't get the rest he said, as usual.)

Dr. Copeland: "Sure, it will do us all good; we all will be better able to jump on the water-wagon when we get back."

When I asked our announcer to officiate—well, surely you all heard his emphatic acquiescence.

Time and space cannot be taken here to enumerate all of the benefits attributed to the outing by our worthy faculty. But they one and all agreed that any and every disease known to science can be cured by joining the COPS in their Annual Field Day.

After the sports we are all going to eat, and we have been promised an "honest to goodness" meal, no frills, just plain eats. And we hope Dr. Ruddy will punctuate our dinner with his usual laugh-producing remarks. Dr. Bowling will be there with a story or two. (They are good.) And Dr. Forbes must give us some new advice. After all that the evening will start. It's going to be a large evening. There will be music for those who care to dance, and canoes for those with other inclinations. So, as we have said before, it will be *some day*. And after that, *bonne nuit et biens dorm!*





THERE'S a time to sing and a time
to dance."

How well we have proven this true!
"All work and no play makes Jack a dull
boy."

Was another old adage we knew.
So we've managed to sing as we plodded
along,

And to dance, when occasion allowed,
Or hike up the mountains,
Or swim at the beach,
Or get up a gay little crowd
And slip away from our work awhile to
take in a movie show,

And in doing this it may be true-
That some of us may not know
The exact concentration of NaCl
To apply to a frog's hind leg
To make it "Shimmie" its very best,
Or the caloric worth of an egg;
Or whether we hear with our frontal lobe,
Or feel with our cerebellum,
Or, if someone asked for "Koch's Postu-
lates."

Perhaps we couldn't tell 'em.
But we've got some memories stored away
of dear old college days,
That will last us through to the "End of
the trail"

And help in a million ways
To keep us close in the years to come
And give us a kindly thought
And a helping hand and a loving word
For the friends these days have brought.

—W. J.



Society Notes

THE present College year has been marked by a great increase in social affairs. For the two years preceding there had been a paucity of things of this nature, owing to the fact that all of the men in the different classes were doing their bit in some branch of the service, that each class, sorority or fraternity has seemed to vie with the others in seeing how many dances, banquets, hiking parties, etc., they could put on in celebration of the return of said men to the arms of their Alma Mater.

It is doubtful if any but the men in question realize what a hardship it has been for them to lose from a year and a half to two years out of their course, in most cases spending that time in work entirely foreign to that which would be of benefit to them in fitting them for their profession, and then coming back to find, in most instances, that the class with whom they were to have been graduated had already finished and that they must try to make a new place for themselves with students who were mere "Freshies" when they went away to the war. Truly a most galling and unsatisfactory situation, but it must be admitted that the boys are showing a fine spirit and settling into the work again in a manner most praiseworthy. Small wonder that we have wined and dined them upon the slightest provocation. We are glad they are back, and want them to know it.

The first social affair of note was the reception given by the faculty to the Freshmen Class at the Friday Morning Clubhouse. Dr. Forbes' greeting to the class was most inspiring, and this was followed by a very delightful program, a feature of which was a clever little song given by the Freshmen Class, in which was incorporated numerous drives at the faculty and upper classmen. Painter, a live-wire in the class, led them in the singing and class yells. After the program a good jazz orchestra furnished music for dancing. It has been whispered that some of the Freshmen felt that the upper classmen lost sight of the fact that the dance was given primarily for their entertainment, and failed to act the part of ideal hosts and hostesses in seeing that said "Froshies" had their programs filled, but, at best, this is a mere rumor, and we will treat it as such and pronounce the whole affair a huge success. There will be another Freshman Reception before long, and we will let the disgruntled ones show us how it should be done.

A number of affairs were given for the Mid-year Graduating Class, one of the first and most enjoyable being a dinner and dance at the hospitable home of Dr. Lillian Whiting. Dr. Whiting has the charming faculty of making her guests feel so truly welcome that her entertainments are always pronounced successes. When one bids her good-by, with thanks for a delightful evening, there are no mental reservations. She is an ornament to the profession. "Long may she wave!"

Another delightful social event was the dance given for the Graduating Class of February, nineteen hundred and twenty. The graduating exercises were held in the Gamut Club. The stage was banked with the gift flowers of the graduates, who were most impressive in caps and gowns. Dr. Tasker delivered the baccalaureate address and Dr. Lillian Whiting presented the diplomas. After the exercises were over and the young doctors had received the congratulations

and best wishes of their admiring friends, the alluring strains of a remarkably good orchestra drew everyone to the adjoining ballroom, where dancing was enjoyed and delicious punch imbibed until the witching hour of midnight.

The Senior B class entertained the graduating Senior A class with a dinner at the home of Mrs. Percival. President Hopkins of the Senior B Class and Mrs. Percival spared neither time nor effort in making the affair a huge success. A committee appointed by them assisted in the arrangements, helping to prepare stimuli for the senses, auditory, olfactory, visual and gustatory, with perhaps a special emphasis on the latter, for it must be stated that it was a banquet in every sense of the word. The members of the Senior A Class were seated at one table, at whose head presided the ever-popular Dr. Ernest Bashor. At another long table were all the members of the Senior B Class. Funny little jingles on the backs of the place cards afforded much amusement, as did the speeches of the graduates in response to the demands of Mr. Hampton, the toastmaster of the evening. Some of the musicians of the class furnished musical numbers, and as a last resort of the evening Mr. Percival took a flashlight of the crowd. If the guests enjoyed themselves one-half as much as the entertainers it was certainly a grand success.

The banquet and field day were, as usual, delightful. Redondo was again the chosen site for Field Day festivities. The ordinary procedure of toastmaster and responses was done away with for the once and things were conducted in a purely informal manner. The orchestra which furnished the music for the dance played during the dinner and some of the more festively inclined tripped the light fantastic between courses. It was a wise provision on the part of those having the affair in charge, as it helped to assuage the keen disappointment in the matter of food. Even though the annual clamshells had been consigned to oblivion, some of the concoctions that were wont to be served upon them were insinuated into the repast with disastrous effect. But why cavil at such small matter as the kind of food served at a banquet? It was the good fellowship we're after, and there was certainly plenty of that on hand. Our Dr. Ruddy was very much in evidence at the dance which followed the banquet and managed to instill a lot of fun and noise into the affair. We have never learned of a five- and ten-cent store robbery having been perpetrated at about that time, hence the source of his unlimited supply of favors remains a mystery. It looked like a shrewd piece of business on his part to stimulate a demand for his particular type of therapy, as every one of the favors he passed out with such a lavish hand was of a nature to destroy either the eye, the ear or the throat. We trust he gave us credit for seeing through his evil machinations. The floor was perfect, the music fine, and everyone had a wonderful time at the Field Day dance.

Lorenzo D. Whiting gave a very enjoyable dancing party at his home in Pasadena early in the school year. These little informal affairs are of frequent occurrence in the Whiting home and are invariably delightful. Dr. Whiting had been in the service for two years and, although he obtained some valuable laboratory and hospital work during his absence from home and college, he is as evidently glad to be back as his many friends are to have him.

Miss Pauline Munro, one of the popular members of the Senior A class, gave a charming dance at the Women's Club House in Monrovia. She was assisted by her parents, Mr. and Mrs. J. Allen Munro, and her aunt, Mrs. Renaker. The club was beautifully decorated and the music and refreshments were delightful. A number of dinner parties were given by guests prior to the dance.

KAPPA PSI DELTA

The first social affair given by the sorority during the past year was a reception and dance at the Kensington Apartments, the home of Winifred Jenney. A large number of out-of-town members were in the city at the time, attending the State convention, and the sorority took this occasion for entertaining them. A four-piece orchestra furnished music for dancing and delicious punch and wafers were served.

The week following the dance the sorority again entertained the out-of-town members at a noon-day luncheon at the "Cafe Beautiful." Winifred Jenney acted as toast-mistress. Dr. Jennie Spencer, in responding to her name, paid a very beautiful tribute to the memory of Dr. Alice Chaffee, who sacrificed her life during the first influenza epidemic. Dr. Mary Wright of Santa Ana proposed that a block be taken in the new college building as a memorial to Dr. Chaffee. The suggestion met with the hearty approval of all the members and has at the present time been put into effect. Dr. Bertella Ferguson, of Berkeley, and Dr. Marie Grunwald Fitch, of Pasadena, were chosen as representatives of the sorority at the National Convention in Chicago.

The next delightful affair was a lawn party at the home of Edith Steinberger, in Sierra Madre. After the delicious refreshments had been served, the guests were entertained by an exceptionally fine musical program, one of the special features being several whistling solos by Nina Kellogg Norris.

The first week of school the sorority had a get-together luncheon and the policies of the ensuing year were outlined and adopted.

October 11th a charming reception was given at the home of Dr. Lora B. Emery for the girls of the Freshman class. A stringed orchestra furnished music during the afternoon and delicious refreshments were served.

A number of social evenings were held at the home of different members, the girls entertaining being: Zora Painter, Vera George, Dolce Mansfield and Edith Badillo, the last one being at the home of Edith Steinberger. The members took this occasion to present Dr. Vera George with a graduation gift.

On January 8th a very pleasant evening was spent at the home of Dr. Cora Tasker. Autochrome pictures of the Yosemite, Oregon, Missions of California, California wild flowers and the San Francisco and San Diego fairs were thrown on the screen and discussed by Dr. Cora. Dr. Fryette, of Chicago, was present and gave a very interesting report of the Chicago Chapter's activities.

Dr. Jennie C. Spencer has given two very interesting lectures during the year to the women of the college.

One of the very prettiest dances of the year was given in the charming ballroom at the Kensington. The music was especially fine, a large number of guests were present and everyone reported a perfectly delightful time.

On Saturday evening, March 20th, initiation ceremonies were held at the home of Lulu Malone. Seven new members were taken into the sorority.

IOTA TAU SIGMA FRATERNITY

On Wednesday evening, early in the school year, the Iota Tau Sigma Fraternity entertained the men of the Freshmen class with a smoker at the offices of Drs. Goodfellow, Jones and Merrill. During the evening, Drs. Jones, Goodfellow and Watson spoke upon the aims and ideals of the fraternity in a telling manner. It was a matter of supreme gratification to the boys in the fraternity to see the success our people are achieving as evidenced by the splen-

didly equipped offices and laboratories that the doctors so kindly showed us. In the matter of liquid refreshments, it was necessary to have a touching faith that the "Lord will provide." Suffice it to say that this faith was not misplaced.

Friday evening, December 12th, the Iota Tau Sigma Fraternity gave a dance to the members of the student body of the college at the Friday Morning Clubhouse. Music was furnished by the celebrated Hightower Orchestra and delicious punch was served. For the past two years so many of the fraternity men have been in military service that few social events have been given. Now that the boys are home again things will brighten up in a social way and the Frat's past reputation as royal entertainers will again be re-established.

PHI SIGMA GAMMA

On Saturday evening, February 28th, the Phi Sigma Gamma Fraternity gave a very delightful dancing party at the Friday Morning Clubhouse. The Goldwyn Studio Orchestra furnished the music and the punch was delicious. One of the features of the affair that deserves special mention was the large number of the fraternity men who are out in the field or interested in some other line of endeavor who were in evidence at this party. It speaks well for the strong feeling of fellowship that exists in this fraternity.

The second Monday evening of each month has been set aside as a regular get-together night for the Phi Sigma Gamma Fraternity and their friends. No set form of entertainment is stipulated, but whatever appeals to the prevailing mood of the crowd is the order of the evening. Sometimes this means dancing, another time cards, talks, or, best of all, "eats." The affairs have proven to be such a decided success that their continuance is assured.

THE SOCIAL ACTIVITIES OF THE AXIS CLUB

The first social event of this school year was a reception to the girls of the Freshman class. This took the form of an informal weinie bake at Sycamore Grove, one Friday evening just two weeks after school opened.

The next was a tea given at the beautiful home of Dr. Nina Stevens on Vine street, in Hollywood.

One evening after business meeting all enjoyed a social chat and tea at Dr. Miller's.

At the kind invitation of the Kappa Psi Delta we attended and enjoyed a lecture by Dr. Jennie Spencer on "Woman's Work in the Field."

March 20, 1920, at the home of Dr. Nina Stevens, the club initiated Dr. Mary Gamble and Miss Helen Hoyt into the mysteries of the Axis Club. A general social good time followed.

Dr. May J. Culbertson took it upon herself to get married New Year's eve, surprising her sorority sisters. Now she is Dr. M. J. C. Laidlaw. The club, in turn, surprised her with a shower and dinner at her home in Sierra Madre January 20.



ATLAS CLUB DANCE

The affair of note given by the Atlas Club during the past year was the dance at the Friday Morning Club House, Friday evening, March 27th. Time and thought had been expended in no small measure toward making this a notable affair. This was quite the most generally attended dance of the season. Dr. Crist was very much in evidence and dissipated all tendency toward formality by insisting upon a Paul Jones early in the evening. Two recently consummated engagements were announced at this time. It would be a misstatement to say they came as a surprise to anyone, but they helped to increase the general goodfellowship and pleasure of the evening.

Our best wishes for your future.

Dr. Elmer S. Clark and Miss Georgia Miller.

Mr. Edwin Craddock and Miss Beatrice Kelly.

DELTA OMEGA SORORITY

September 15th, 1919, luncheon at the Broadway Roof Garden. Fifteen girls, including several freshmen, enjoyed getting acquainted and relating experiences of summer vacation.

September 26th, 1919, an enjoyable evening spent at the home of Zelda Sheldon, featuring the individual stunts of the active members. There was music, dancing and refreshments.

December 17th, 1919, Christmas party at the home of Maud Mason. A lap-supper was served by the pledges. Dim lights, a Christmas tree, with a gift for each one made a very pleasant evening.

March 6th, 1920, a most delightful dance at the Wednesday Morning Club-house, when everyone had found the place. The dances were short and snappy after we got started.

March 12th and 13th, 1920, house party at Santa Monica to initiate our pledges. Mr. Jack Steele kindly proffered the use of a house which we gladly accepted and surely appreciated. We started for a hike to Santa Monica Canyon, but a genially disposed man came along in a truck and took us all for a long ride up through the hills. Upon our return some of us enjoyed a plunge in the surf. If anyone ever wants to eat in Santa Monica, any Delta girl will recommend the "Betty Ross Tea Shop," on Utah street. My! Such good eats!

Washington Argus: Woman attempted to commit suicide by shooting at the Washington Hotel.

EXTRA! OUR HUMAN SUBMARINE.

Mrs. Brown was in a canoe,

A boy she did encounter;

We saw her heels up in the air,

And the boat went off without her.

Los Angeles, Cal.

Dear Joe:

Oh, how I wish you were here with me. I just know you would be another enthusiast in the Osteopath circle, which conviction I have bubbled about before; and what is more, you would be such a good scout on hikes. Hikes didn't mean so much to us back in Iowa, but let me tell you a bit about them here.

You know that Los Angeles is situated between the ocean and the mountains, and the scenery is truly wonderful on every hand.

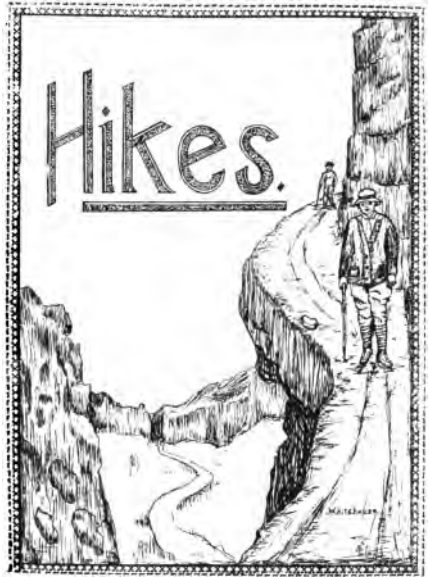
Last Fall the Freshmen took a five-cent car ride to the north and west and after a three-mile hike along a splendid auto road that was skirted with new beauties at every turn, we reached the Laurel Canyon Inn. A short distance from it we dropped our lunch supplies on the tables provided

for such as we. Before you could say "Jimmie Jones" the festal board was spread, and after a dessert of class songs and yells, we continued on our way, coming upon beautiful and sequestered dwellings hung high on some forbidden cliff or nestled snugly against the mountain side. We soon left the road for an unbeaten trail, which took us presently to the crest of Mount Lookout. Here lay before us the city of Los Angeles, and its suburbs, the oil wells, the aviation field, and out on forty mile radius various beach cities could be distinguished; while beyond lay the Pacific Ocean identified by the late afternoon sunpath. We were back home for supper a little tired, but happy as children.

Some weeks later we had a trip to Santa Monica Beach. A wiener roast, some kodak pictures, and the water sports came in strong. In fact, the "briny deep" was almost overwhelming to some of us on that first day of November. Let me tell you right here it doesn't necessitate the possession of a delicate taste bud to detect the NaCl. A drop or two is quite sufficient, but I was greedy, of course, and took a mouthful.

Our Saturday afternoons grew scarcer towards Christmas time. An impromptu evening hike of half a dozen miles revealed to us the beauties of Griffith Park by moonlight. We hiked over a good trail that was more or less wooded all the way. The snappy evening air laden with cypress odors generated hemoglobin for days to come. Our route was more tortuous than that of an angle-worm, and our views as broad as that of a bird's eye.

Did you ever in your fondest fancies picture a group of college students hurdling fences, climbing mountain side trestles, lying prone upon the earth to rest, lurching on teeter-totter boards and drinking out of a common canteen during the hours when most mortals sleep? Perhaps not, but it is lots of fun.



I wouldn't have missed that trip up Mount Lowe for Easter services for a pretty penny. It was a wonderful moonlight night, and the services on the mountain top just as day was breaking over the valley beneath left an impression on us all not soon to be forgotten. By mistake we got into a narrow pass, rocky and moss grown, down which a little mountain stream rushed to its fate; but if all mistakes were as beautiful and the endings as happy we would aim for more.

Truly, Joe, I can't begin to tell you of the beautiful places that are just within hiking distance of Los Angeles, or more truthfully speaking, within reach of an hour's car ride plus a hike of three or more miles. I have had only a few samples, but they certainly taste like more. You might think that we were cruelly stiff afterward, but a good hot bath and a little professional courtesy, in the form of Osteopathic manipulation, put the shroud on Sarco-lactic acid; and naught but our frolicking ways and radiant faces singled us out from the rest of the students next day.

I could rave on and on about these hikes, but conscience says, "Get thee to thy succus interricus and study up thy soap factory."

Here's hoping that you may join me in the West; and in the meantime I await your permission to re-effervesce.

With cardiac greetings,

ELISE.



Fraternities and Sororities

KAPPA PSI DELTA SORORITY

The Kappa Psi Delta Sorority was organized in Des Moines, Iowa, in 1904, and six chapters have been organized since then. The local chapter has an honorary membership of twenty-six and an Alumni of one hundred and fifty.

SORORES IN COLLEGO

Edith Badillo	Bertha H. Harter
Mary E. Becker	Lulu Malone
M. Elise Carlson	Edith Walker
Myrtle Coddington	Jean S. Will
Lily Harris	

GRADUATES

Vera A. George, D. O.	Dolce Mansfield
Winifred W. Jenney	Edith M. Steinberger.
Zora Painter	

SORORES IN FACULATE

Jennie C. Spencer, D. O.....	Alpha
Inez Smith, D. O.....	Alpha
Lillian M. Whiting, D. O.....	Honorary

CAN YOU ANSWER?

Where can a man buy a cap for his knee?
 Or a key to the lock of his hair?
 Can his eyes be called an academy
 Because there are pupils there?
 In the crown of his head
 What gems are found?
 Who travels the bridge of his nose?
 Can he use when shingling
 The roof of his mouth,
 The nails on the end of his toes?
 Can the crook of his elbow be sent to jail?
 If so, what did he do?
 How does he sharpen his shoulder blades?
 I'll be hanged if I know, do you?
 Can he sit in the shade of the palm of his hand?
 Or beat on the drum of his ear?
 Does the calf of his leg eat the corn on his toes?
 If so, why not grow corn on the ear?

Patient (in E. N. T. Clinic): "I want you to look at my throat; another doctor told me that my larynx are affected—whatever they are."

Dr. Ruddy: "This is a singular affection, but unless it receives prompt attention it may become plural."



AXIS CLUB

Founded 1899

CHAPTERS

Odontoid	Kirksville, Mo.
Sphenoid	Des Moines, Ia.
Hyoid	Chicago, Ill.
Mastoid	Philadelphia, Penn.
Ethmoid	Los Angeles, Calif.

Official publication, "*The Axis Bulletin*."

The Ethmoid Chapter was organized Nov. 24, 1916. The group was formerly known as the Pocahontas Sorority.

Club colors.....	Green and white
Club flower.....	White carnation

THE SEMESTER'S PROGRAM

Addresses:

Problems of the Juvenile Protective Association.....	MISS MARION SALLOS
Lecture	DR. CHAS. SPENCER
Vestigial Structures.....	DR. C. P. PHINNEY
The Eye.....	DR. T. J. RUDDY
Field Notes.....	DR. MARY GAMBLE
Research Work.....	DR. LOUISA BURNS
My Vision of Osteopathy.....	DR. LOUISA CROWE

ACTIVE MEMBERS

Dr. Laura McDonald	Dr. Grace Shank
Dr. Laura J. Miller	Dr. Anna Lister
Dr. Sarah L. Murray	Dr. Mary Gamble
Dr. Georgia B. Smith	Dr. Nannie Chapelle
Dr. Harriet L. Phillips	Dr. Grace McCleary
Dr. Laura B. Nelson	Mrs. Ruby Painter
Dr. Leanora K. Bates	Helen Hoyt
Dr. Nina Stevens	Edith Witzel
Dr. May Culbertson Laidlaw	Elsie Haverman

HONORARY MEMBERS

Dr. Louisa Burns	Dr. Jennie C. Spencer
Dr. Lillian Whitting	

ASSOCIATE MEMBERS

Dr. Jeanette Allison	Dr. Elinor Balfe
Dr. Thompson	Dr. Susan Balfe
Dr. Lash	Dr. Elizabeth Lane.

IN MEMORIAM

Anna Dobson



AXIS



RUBES



POSTED



DOBBY



CHOW



PIE FACES



SHIP WRECKED

CLUB

PHI SIGMA GAMMA FRATERNITY

(Colors: Navy Blue and White.)

CHAPTERS

College of Osteopathic Physicians and Surgeons.
 Chicago College of Osteopathy.
 Des Moines Still College of Osteopathy.
 American School of Osteopathy.
 Kansas City School of Osteopathy and Surgery.
 Philadelphia College of Osteopathy.
 Boston College of Osteopathy.

BETA CHAPTER

(Fraters in Facultate)

Dayton Turney, D. O.	W. H. Morris, D. O.
C. H. Phinney, D. O.	E. G. Bashor, D. O.

(Fraters in Collegio)

February, 1921

W. T. Hurt	Theodore N. Tripp
Floyd L. Hanes	Raymond C. Ireland

June, 1921

Otto T. Grua	Roger A. Peters
--------------	-----------------

George J. Starr

June, 1922

Ralph D. Hoard	George W. Woodbury
Meredith T. Waterman	John C. Knowlton

June, 1923

Robert T. Kolts	Howard M. McGillis
Lawrence W. Berlier	G. Russell Shaeffle
Reginald L. Secord	Earl T. Anderson

Pledged—James Gibson

The Phi Sigma Gamma is a National Fraternity with chapters in more than a half dozen of the leading citizens of the United States. The Beta Chapter of this fraternity is located at Los Angeles, Cal., and was nationalized in 1915. The fraternity is organized and maintained to help advance the Osteopathic, benefit the college of which it is a part, and aid the individual members.

Besides the social advantage enjoyed, the fraternity holds frequent meetings where subjects of vital importance to the profession and college are discussed by men of authority, either alumni of the Phi Sigma Gamma or others. Informal talks by men in the field are given to help us become real professional men; competent to deal with the every-day problems of a physician.

Demonstrations of technique are held, advice given and assistance rendered on the manifold questions which time and opportunity preclude from the college curriculum. Such in brief is the object and purpose of the Phi Sigma Gamma. Our endeavor is to establish and maintain high scholastic standards, foster a democratic spirit among the students, and in every way possible help turn out better, more proficient Osteopathic physicians.



DESCRIPTIVE ROSTER OF THE PHI SIGMA GAMMA SENIORS

WILBUR T. HURT (Ouch).—Born in Palo Pinto, Texas, though he never boasts of his birthplace openly. His high school days were spent at Dallas, Texas, his present home, and later entered the A. and M. College and studied agriculture. Entered the C. O. P. S. January, 1915. He enlisted in the Army as an aerial mechanic in 1917 and was sent to England that year, where he studied aerial machine gunnery and was sent from there to Paris and on to the front. He spent nearly two years overseas. His school life in C. O. P. S. has been one of constant activity, having held the following offices: class councilman, manager of social activities for two years, manager of Cortex, 1916, present editor of the C. O. P. S. edition of the WESTERN OSTEOPATH, and president of the Phi Sigma Gamma Fraternity.

FLOYD L. HANES (Feig).—Born in the little village of Dorloo, in the backwoods portion of New York. His high school days were spent in the Binghamton High School. After two years' labor for John D. entered P. C. O. 1913. He missed two years and entered the C. O. P. S. 1916. Joining the Navy in January, 1918, he served one year in the medical department of that branch of service. Married, and with hopes for the future.

THEODORE N. TRIPP (T. N. T.).—Born in Boston, Mass., and spent his first school days in Boston High School. He entered C. O. P. S. 1916 and joined the Army in 1917, spending a year with an aerial squadron in the spruce camp, Vancouver, Wash. After the termination of his military career he entered the Boston College of Osteopathy, where he spent one year. With a weak heart he returned to C. O. P. S. 1919, where he is majoring in landscape gardening.

RAYMOND C. IRELAND (Pat).—He first took breath in Denver, Colo., longer ago than his appearance indicates. His high school days were spent in San Diego, his present home, after which he labored through a course at the Hamilton and Lindley Law College, entering C. O. P. S. 1916. Being a good handshaker, he shook himself in as private secretary to a Colonel at Camp Lewis and was later sent to Yale Laboratory School and from there to France. He holds the record for furloughs, having visited England, Scotland, Ireland, Italy, San Pedro and Pasadena.

JUNIORS

OTTO T. GRUA (Swede).—Was born in the bad lands of South Dakota, where he grew up and spent his high school days. Entered C. O. P. S. 1916. But was soon a member of the mechanical division of the air service of the army. His time was divided between Camp McArthur, Camp Green and Marsh Field, where the dread pneumococcus brought him low and left him struggling for his last breath. However, he hasn't breathed it yet and seems rugged enough to stay on earth until war is declared again. But danger again besets him, for he is now father confessor to the designing Junior girls.

ROGER A. PETERS (Pete).—One of the corn-fed sons of Emporia, Kansas. He graduated from Berkeley High School and entered the C. O. P. S. 1916. One of the first to enlist, was soon sent to France, where he kept his feet on a desk during the day and slept in a French feather bed the rest of the time. Without a hint to anyone, except perhaps the lady fair, has rushed in where few of his longer geared and more matured brothers have done ought else than fear to tread. Here's luck for Pete and Mrs. Pete, and whatever be vouchsafed to them in Pete's Re-Pete's.

GEORGE J. STARR (Twink).—He began to twinkle at the home of the old school at Kirksville, Mo. He was one of the literary lights of Pasadena High School, entering C. O. P. S. in 1916. True to his name, he sought the upper region; he enrolled in the Aviators' College of Riverside. He lost his grip and broke his wing while flying in practice. His flying career being ended, he joined the Hospital Corps of the Navy, spending two years at San Diego. Twink continues to shine as one of the stars of the tennis team.

SOPHOMORES

RALPH D. HOARD (Dam-It).—Another son of the bad lands, having first cussed in Alcester, S. D. Graduated from Pasadena High School and entered C. O. P. S. 1916. During the war he served in the Medicos' Field Hospital for sixteen months, ten of which were spent overseas. While in France he enriched his otherwise extensive vocabulary with a choice selection of French and German damns. He is the present field day manager and his interest in Balboa real estate is why we went there.

MEREDITH T. WATERMAN (Merry).—Somewhere in the near vicinity of Soldiers' Field, the athletic mecca of fair Harvard, our Merry was born in the otherwise sleepy hamlet of Cambridge, Mass. He is a graduate of Pasadena High. The school made famous by himself and Hoard. Entered C. O. P. S. 1916. He served with the 42nd Division, driving an ambulance over some of the famous French battlefields. It was largely due to his magnificent driving that the St. Mihiel, Argonne and Meuse offensives were successful for the Allies.

GEORGE W. WOODBURY (Woody).—A product of the Mayflower, direct descendant of Percine White. Born somewhere in Massachusetts on the banks of the Merrimac, but denying any further acquaintance with banks of any description, a sort of literary cuss with a trunk full of diplomas and carrying half of the alphabet with degrees. In fact, his coming to C. O. P. S. was only by degrees, as he tried about everything else before yielding to the lure. His military record (all Phi Sigs have one) is of the old school. He served in the Spanish-American War at Matanzas, Cuba with the 8th Massachusetts Infantry. He entered C. O. P. S. 1917, but dropped out a year in sympathy with the student volunteers. He has taught school, played football, preached and otherwise made mistakes. At present he is president of the Sophomore class.

JOHN C. KNOWLTON (Jack).—Another throw-back to the Pilgrim Fathers, for Jack was born in Chelsea, Mass. Jack couldn't get enough from one academy, so he graduated twice, once from Dean in Franklin, Mass., and again at Heborn, Maine. Like friend Tripp, he wasted a year in Boston College of Osteopathy before learning about C. O. P. S. Before entering this college Jack spent 19 months with the 301st Infantry, ten of which were occupied in cleaning up at Brest and St. Amend, the other nine on K. P.

FRESHMEN

ROBERT F. KOLTS (Bob).—Born in Grand Rapids, Michigan. His high school days were spent at Glendale High and later at U. S. C. His army service, as that of other freshmen, antedated his coming to our institution. With other C. O. P. S. men he helped to stem the tide of Vin Rouge, Cognac Hill, and Rhum Shode, which otherwise would have engulfed La Belle France. While specializing in chemistry, he hopes to synthesize the wonderful concoctions which he helped to annihilate while in France with the 157th Field Hospital.

LAWRENCE W. BERLIER (Leuc).—One of our few native sons, born in Los Angeles, graduated from New Mexico Military Institute before entering C. O. P. S. He spent seventeen months in the 90th Division with the 345th Field Artillery. For one year he was actively engaged at the St. Mihiel and Argonne front. Though he has been in school but a short time, he shows wonderful ability to keep abreast the situation, having publicly announced the fact that he is majoring in surgery, and rather privately admitted that he intends to take up work with Dr. Lillian Whiting.

REGINALD L. SECORD (Holy-Smoke).—Was born in Fort Collins, Colo., and graduated from high school at that town. His army record is rather impressive for a mere freshman, having spent 26 months with the 148th Field Artillery for eighteen months in active service at Chateau Thierry, St. Mihiel, The Argonne, and the Marne, and six months with the Army of Occupation.

HOWARD M. MCGILLIS (Mac).—A true Southern gentleman, "Yessah, bohn" at Savannah, Ga., and proud of it. Before entering our sacred precincts Mac performed various and sundry services with the United States 2nd Anti-Aircraft Battalion for twenty-one months. For seven months he labored hard in the land of the parley-voo, and was at at the front in the thickest of party for 64 days.

G. RUSSELL SHAEFFLE (Russ).—The second Native Son, this time a preacher's son. He graduated from the L. A. High School and spent one year at Los Angeles Junior College. Russ is sometimes known as the Singer Boy, and his fine tenor voice is a great asset to the Phi Sigma Gamma.

EARL T. ANDERSON (Andy).—Andy was blown in by the wind at Grand Forks, North Dakota. From there he migrated to Watts, the town of Kolb and Dill fame. He graduated from Compton Union High School, entered C. O. P. S. 1919, spending most of his time in school trying to tame other parts of the wild Anderson family, who occupied a part of his austacious class.



Alhambra *Advocate*—George North, one of our local boys, badly wounded at the front is reported doing well at the rear.

Hall—Gee, Kelly is surely complimentary. She just told me I was a blot on the face of the earth which ought to be erased.

PHI SIGMA GAMMA



COSMOPOLITES



THE SQUATTERS



SEBEN-LEBEN



OUT ON EXTREME REAR



AMEN



BETTER DAYS



SEIZES
ATTITUDE



OUR LITTLE ANGEL



JUST A GOB

DELTA OMEGA

Founded at Kirksville, Mo., 1904.

Publication, "The Alpha."

Colors, Green and Gold.

Flower, Yellow Chrysanthemum.

CHAPTERS

- 1904—Alpha.....American School of Osteopathy
- 1908—Beta.....Still College of Osteopathy, Des Moines
- 1915—Gamma.....College of Osteopathic Physicians and Surgeons

GAMMA CHAPTER

Active Members

February, 1920

- | | |
|----------------------|------------------|
| Orilla Evans Bigelow | Marie Mason Lord |
| Mary L. Le Clere | Zelda H. Sheldon |

June, 1920

- | | |
|---------------|---------------|
| Thelma Milnes | Pauline Munro |
|---------------|---------------|

Lillian Whiting

June, 1921

- | | |
|----------------|-------------------|
| Esther May Fox | Georgia Miller |
| Maud Mae Mason | Katherine Whitten |

Beatrice Kelly

June, 1922

Muriel Flint

June, 1923

- | | |
|----------------|----------------|
| May Callison | Winnie Fleming |
| Janet Anderson | Lyda Scott |

OTHER SOROES IN VICINITY

- | | |
|------------------------------------|--------------------------------------|
| Dr. Ada Achorn.....Alpha | Dr. Olive Price.....Gamma—Hon. |
| Dr. Bernice Bennett.....Gamma | Dr. Eula Harris.....Beta |
| Dr. Estella Buck.....Gamma | Dr. Hester Tripp Oleweller.....Gamma |
| Mrs. Louis Chandler.....Gamma—Ass. | Dr. Cora Ellen Coghill...Gamma—Hon. |
| Dr. Louise P. Crow.....Gamma—Hon. | Dr. Jessie F. Streeter.....Alpha |
| Mrs. Morris F. Decker...Gamma—Ass. | Dr. Marie Thorsen.....Alpha |
| Dr. Mary Gatton.....Gamma | Dr. Lottie Graves.....Alpha |
| Mrs. Arthur Wallace.....Gamma—Ass. | Dr. Ora Webb.....Gamma |
| Dr. Caroline Lord.....Gamma | Dr. Lillian Whiting.....Alpha |
| Dr. Elsie Marshburn.....Gamma | Dr. Louisa Burns.....Gamma |
| Dr. Grace Packard Comer.....Gamma | Dr. Helen Lyda.....Alpha |







IOTA TAU SIGMA

Founded 1903

Publication, "*The Gozzle Nipper*"

CHAPTERS

Alpha Chapter.....	American School of Osteopathy
Beta Chapter.....	Des Moines Still College of Osteopathy
Gamma Chapter.....	College of Osteopathic Physicians and Surgeons
Delta Chapter.....	Philadelphia College of Osteopathy
Epsilon Chapter.....	Massachusetts College of Osteopathy
Theta Chapter.....	Kansas City College of Osteopathy
Zeta Chapter.....	Chicago College of Osteopathy

FRATERS IN COLLEGIO

Herbert M. Schafer	Richard Schaub
Lorenzo D. Whiting	George Hazeltine
Jack Goodfellow	Webster J. Daly
Wallace W. Lord	

POST GRADUATES

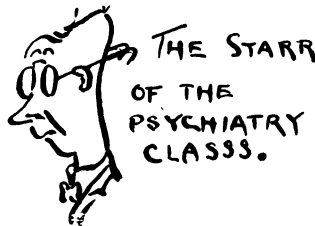
Charles C. Talliaferro, Jr.	H. Elton Harris
Daniel S. Dickinson, Jr.	

FRATERS IN FACULTE

R. W. Bowling, M. D., D. O.....	Gamma Honorary
T. J. Ruddy, D. O.....	Beta 2
C. H. Spencer, D. O.....	Beta 6
W. V. Goodfellow, D. O.....	Beta 8
H. B. Brigham, D. O.....	Gamma 44
R. H. Crist, D. O.....	Gamma 75
John A. Comstock, D. O.....	Gamma 88
Edward S. Merrill, D. O.....	Gamma 98
Robert D. Emory, D. O.....	Gamma 99
Albert Weston, D. O.....	Gamma 89
Charles C. Talliaferro, Jr.....	Epsilon 71

IN MEMORIAM

Marion L. Burns.
Ury Madison Epperson.



Izzy Crazy



SERIOUS SIDE OF IOTA TAU SIGMA FRATERNITY

WE TRIED to resist. We hated to do it. We realize that we should not have done it. It was going too far. Somebody will be hurt, but we could not help it. The impulse was too great. We are compelled to present to you some graphic representations that will convey to you some idea of the activities of the members of our highly esteemed fraternity.

1.

First, we will present to you our next great representative to go forth and proclaim whatever he is to proclaim. We present him here earning cigarette money on Saturday night. We have no proof of this except his word for it. Anyone knowing Shafer knows that he would not spoof us. You see him selling shoes. "Shafe" was also in the army, but this is the closest he ever got to Fiume(s). Knowing also that he is married, you can readily see how he can live the rest of the week in luxury and ease.

2.

Whiting is of a very different type. Brilliant, industrious, energetic, and many other good words must be wasted to express our fullest opinion of him. What we cannot see is how he can show so much energy and get so little done. Many times Zo has left a perfectly good movie early and raced several blocks to meet a patient, only to find said patient long since departed or having a few minutes previously blown his head off with a trusty revolver. This is the truth. Whether the patient knew Zo was coming or whether he feared the treatment Zo was to hand him we know not. We only suspect the patient was tired of waiting. But looking on the brighter side of life we portray him helping his mother on a case. Mother Whiting has not yet arrived. Zo has an expectant look on his face. We are the only one knowing what he is expecting and will not divulge our secret. You guess.

3.

This bird that looks like a chauffeur or a porter or something is really expecting to be a doctor some day. He is seen here filling Dr. Bashor's delivery car with his favorite medicine—castor oil. This will enable it to pass anything on the road. With a good remedy like this, he says there is little need of hard work in the Osteopathic practice. Goodfellow's excuse for living, outside of school, is automobiles. But, like Shafer, he is married and limits his efforts which incline toward manual labor.

4.

We never did like to talk about Shaub. "Sunkist" usually speaks for himself. We depict here a graphic study of Comparative Anatomy. Not being taught in school now, Shaub studies at Redondo, not wanting his education to be neglected. We do not wish to mention the lady's name, but it will suffice that we would be willing to take calculus to study figures like hers. Sunkist is a good chooser, and it really hurts us to have to print this picture.



5.

Daly is so busy we couldn't corner him long enough to find out what he was doing. Somebody tipped us off on the side and gave us this picture. This is the first time anyone has ever seen even a picture of this wonderful machine. It is Daly's new invention, an electrically operated motion-picture X-ray camera with periscope attachment. With this machine the tiny harmone that leaps from the stomach wall into the blood stream after the slightest whiff of beefsteak, can be seen rounding up its hoard of pancreatic soldiers and invading the duodenum to digest expected protein from said steak. Now we hope you understand what Daly is doing to this unsuspecting gink. Let us pass on.

6.

We hesitate to insert this paragraph, but the Junior class requested it, so here goes. It involves a very honorable and upright young gentleman whose name is Hazeltine (changed from Finklestein). He says he is from Boston, but we searched the records and found that he was formerly in the clothing business in New York. He has one failing, this young man has, that of leaving his hat and coat in a locker. No fault in that you say? No! But he makes dates downtown with a sweet young dame and he makes them on the half hour which necessitates the breaking up of three classes for said sweet baby doll. Bring us this dame and we will correct the fault or put the locker near the elevator. We can assure you the young man is honorable. Anyone who keeps a date with a dame three times a day must be.

7.

This represents our latest achievement. You all need a bath. Occasionally. So do we. So we took into our corporation an upright young upstart in the Freshman class. Name: Bob Lord. He is a masseur. Not knowing what this is, we will tell you. A masseur rates somewhere between a Chiropractor and a Medical doctor and scrubs backs. Bob has a long way yet to go to become an Osteopath, but he will get there like he did in our Fraternity. According to the last reports from him, he has taken the fatal leap and become an Osteopath by marriage.

8.

We must needs go easy on our P. Gs. They are Eye, Ear, Nose and Throat men which is an honorable position to be in for most anybody. Harris has only been stumped once this year, and being a nose specialist this seems unusual. We figured the money paid our high-salaried cartoonist well spent when he showed us this picture. The expressions are wonderful, yea, beautiful in flora. The usual rosy color in Brother Harris' cheeks is gone and to look at the patients' face you see at once a beautiful example of turgescence and intumescence, a case of external rhinitis. We want to leave the thought with you. No wonder Harris is dumfounded. The etiology of a case like this would stump anybody these days.

9.

Can Talliaferro remove tonsils? We see no chance of stopping him here. Yes, anything is possible when one uses Dr. Ruddy's new gardening implements. But Taly is a worthy fellow and we predict his early return to the practice of law when one of these straps breaks. Further than this, we hate to hurt Taly's feelings.

10.

There is but one great thing left for us to mention and that is the great new Osteopathic discovery, a medicine more potent than TNT, easier to take than aloe, and with no more odor than hydrogen bisulphide. It is Dr. Ruddy's "Nodolor." Brother Dickenson is particularly fond of it and prescribes it for all throat cases as you see. Hey, Eddie, bring the stomach pump and turn off the gas! we're going out!! Quick, Watson!!!

11.

The Atlas Crown stood in the breeze
All shivering in their B. V. D.'s
Before the photo man could shoot
They had to don the one-dress suit.

IT MUST BE TRUE

The best and finest doctor
In all the country 'round
Is that young Dr. Gizzem,
Who lives at Jerrytown.
It does beat all how many folks
He snatched from grim death's door;
Since he's been there the folks don't fear
The fever any more.
Some of his patients die, of course,
But you may rest assured
If they had done as Doc had said
They leastways had died cured.
You take his dope a little while,
And you'll soon get your health.
How do I know all this is true?
Why, Doc said so, himself!

THE GOZZLE NIPPER.

Berlier, Berlier, where have you been?
"Out in the hallway to talk to a queen."
Berlier, Berlier, whom saw you there?
"A maid with blue eyes and with short golden hair."
Berlier, Berlier, what told she you?
"Just the same sort of lies that all other girls do."



ATLAS CLUB

Founded in Kirksville, Missouri, in 1898.

Colors, Red and White.

Publication, *The Bulletin*.

CHAPTERS

The American School of Osteopathy.....	Axis 1898
The Chicago School of Osteopathy.....	Hyoid 1914
The College of Osteopathic Physicians and Surgeons.....	Cricoid 1916
The Des Moines Still College of Osteopathy.....	Xyphoid 1916

CRICOID CHAPTER**MEMBERS IN FACULATE**

W. Curtis Brigham, D. O.	P. T. Hoeffler, D. O.
Geo. F. Burton, D. O.	T. J. Ruddy, D. O.
Louis C. Chandler, D. O. (Hon. Mem.)	Carl H. Phinney, D. O.
G. H. Copeland, D. O.	D. L. Ransom, D. O.
W. P. Dresser, D. O.	Norman F. Sprague, D. O. Hon.
J. Lynn Goode, D. O.	

MEMBERS IN COLLEGO

P. A. Anderson, D. O.	L. C. Hewitt, D. O.
W. A. Andrews, D. O.	W. W. Howard, D. O.
E. C. Brann, D. O.	W. S. Kingsbury, D. O.
Louis Q. Dyer, D. O.	J. W. Murphy, D. O.

ACTIVE MEMBERS

1920 Class

Elmer S. Clark	Ralph A. Hix
Geo. L. Hampton	Clarence E. Hopkins
Lloyd E. Tilbury	

June, 1921

Walter Elrath	Carl W. Lind
Chester F. Foster	Thomas F. May
Horance A. Hall	William C. Nelson
Charles E. Erwin	C. E. Oleweiler
Bion Warner	

June, 1922

Clyde I. Gockley	Walter C. Stairs
Benj. Payward	J. C. Steele
E. A. Morgan	

June, 1923

Clifford L. Archer	Paul Jameson
Edwin W. Davidson	Paul Mildren
R. M. Davis	Lorraine A. Ostrum
Horace M. Grow	Kenneth E. Palmer
Lawrence H. Haecock	J. G. Painter
Frank M. Hildreth	Arthur Rosenburg
Raymond J. Huff	







THE ATLAS CLUB—ITS HISTORY

THE history of an organization usually centers around some one individual, but the history of the Atlas Club cannot be said to center around any individual.

With the opening of the school year in the Fall of 1898, we find H. S. Bunting starting the fraternity with a few of his friends. As a result of his persistent work, a few men gathered in the evening of November 27th and talked the matter over. Tentative plans were gathered for presentation to other men whom it would be desirable to have in the new organization. The plans as then outlined to the prospective members were that the organization should some day become national, with the social features of the usual college fraternities that its members should have the intellectual requirements of the Phi Beta Kappa Fraternity.

The meeting held soon after was more of an organization meeting, and at this time the names of Dr. Still and Dr. Laughlin were added as charter members. From this group of men was appointed a committee on names and emblem. The temporary organization was at least assured, it was to become a Greek letter society following an ancient custom of college fraternities, and it did so for a time, but was later changed to its present name.

The evening of December 10th, 1898, was the most memorable of all the club. On that evening the permanent organization was completed. The committee on emblem reported at the meeting with the recommendation that the Atlas bone be used as emblem. At a later meeting the letters Psi Omega were chosen for the club's name, which decision was later reversed, and the name Atlas Club chosen.

The first permanent constitution was completed and adopted during these first few meetings. Although revised several times, as the change in years demanded, the main articles have remained unchanged. Twenty-two years have wrought but little change in the original thought and ideas as expressed in our constitution.

In the change of phraseology and in the change of the name from Psi Omega to Atlas Club, is an index to the first marked change in the policy of the club. Organized at first along the same lines as an ordinary college fraternity, with the social advantages emphasized, the first month showed marks of the change from such an organization into a professional association whose influence was to extend wherever its members should go, and whose emblem should be a guarantee of Osteopathy at its best.

Several years later the Atlas shield was adopted. Under the shield proper, which carries the Atlas bone, is engraved a well known motto in Greek, which is, "To the world health, to ourselves prosperity."

With the adoption of the new constitution the club took its first step into the world by the creating of the Hyoid Chapter in the Chicago College of Osteopathy on January 5th, 1914. On May 15th, 1916, the Cricoid Chapter of the College of Osteopathic Physicians and Surgeons became an articulated member of the grand skeleton. In forming this chapter the Calumet Fraternity, both active and field members, was absorbed. The initiation and installation of the Xyphoid Chapter of the Des Moines College of Osteopathy took place on October 16th, 1916, and as in Los Angeles the Calumet Fraternity was absorbed.

Today the Atlas Club stands as the oldest men's organization in the Osteopathic world, and it is the largest in number and doing the most for the advancement of Osteopathy. According to the directory of 1916, there are 818 practicing field members, 34 deceased members and 144 active members in the four chapters.

We are proud of the history we have made, and know that our future years will show the same strong characteristics that make for the true Atlas man—the follower of Andrew Taylor Still.



“THE FOREIGNERS’ CLUB”

- 1—R. W. PUTTICK, premedical student, London, England, Lieutenant in the Royal Navy.
- 2—JOSE DE JO GONZALES, premedical student, Guadalajara, Mexico, son of a medical practitioner.
- 3—MRS. B. W. BROWN, Sophomore, Alberta, Canada, graduate of Provincial Normal School.
- 4—BENJAMIN HAYWARD, Lausanne, Switzerland, Sophomore.
- 5—BERNARD ROGERS, Junior, London, England, Leaford College, Sussex, England.
- 6—N. C. LITT, premedical student, Toronto, Canada.
- 7—W. OSTROWSKY, Junior, Pinsk, Russia.
- 8—MRS. ADELLA ROGERING, Freshman, Odessa, Russia, student of University of California.
- 9—D. GARCIA TOLEDO, B. S., Sophomore, Oaxaca, Mexico, medical work at the University of Oaxaca, Mexico, son of the Mayor of Oaxaca City, Mexico.
- 10—DAVID ZELIKOWSKY, premedical student, Warsaw, Poland.
MABEL ANDERSON, Senior, Glasgow, Scotland.

- Editorials -



“A STORK’S EYE VIEW OF OBSTETRICS”

LISTEN, folks, you can't imagine what a rare treat I have had. The other morning at 2:30 A. M. I was trying to get into Gless Street Clinic but, alas, I had no keys, so sat on the doorsteps for awhile to think what to do, when who should be flying overhead but Sir Stork! He happened to spy me, and called out, “All is quiet along the Potomac.”

He then actually came down to chat with me for a while. He said, “Well, Blaky, according to your colored friends, you belong to de baby ward ob de city health department again, do you? This is the first time that I have seen you since you and Steiny were on your way to the junk man's at 1:30 A. M. and met the two policemen. Just then the Hebrew friend appeared and said, excitedly, ‘Vell, if de doctor didn't come pretty soon, I vas going to call de policeman to come.’ (Too bad for Steiny's sake that she didn't get a set of twins) on that case.”

The old bird chuckled. “Ha! You folks think you have a live job when you start on my trail. Between Drs. McNeile, Caylor, Godshall, Bashor, Weltman, and I, you receive sufficient stimulus to keep your mind on the job. Campy answered the phone once or twice in her sleep. Gladys Anderson got completely dressed one night, then didn't know whether she had received a call or not. To cap the climax, I wish you could have seen Gladys in her sleep palpating Zora's Abdomen. Let me whisper something to you about Dolce. You have never seen her with gentlemen friends, but, believe me, she is a good sport. I once saw her perched upon a wagon of bottles beside the driver; another time she inveigled the Rosslyn bus driver to take her to her destination. The most romantic sight of all, though, was in an ambulance which was racing about on dark streets, and there on the front seat, in a man's lap, sat Dolce; his arm was so placed that she could not possibly have fallen out, as they shot around the corner, I know.

“By the way, sometime ask Mabel Anderson to describe the expression on Hurt's face the time he was making out the birth certificate in a colored lady's

house on Christmas day. In his usual businesslike manner, he was asking for the husband's name, birthplace, etc., when the woman said: 'But, doctor, he ain't de fader ob de chile.' I was just about to deposit a fine new boy in an Italian home once; Hurt suddenly realized that there was so much noise he couldn't hear himself give directions; upon turning around he discovered that he was the center of attraction of a good-size audience. It was a dramatic moment. He seemed to summon all of his powers—then, Oh, Boy! what a bellow he let out. Immediately the scene changed. All excess persons simply vanished, and the atmosphere of professional decorum pervaded the room.

"Some of you think I am a capricious bird. Perhaps so; even the older Obstetricians can't always judge me correctly. Do you remember the time you had the patient all prepared on the Kelly Pad, etc., when the Interne told her to get up and walk around? He prophesied nothing doing for three or four hours, and then left. Inside of twenty-five minutes a new girl cried out, 'Ya, Ya!' The woman was not near the Kelly Pad, either.

"Pat Ireland thought I kept him guessing once. His patient was all ready for delivery. She looked as though there might be something doing any minute, but she was a primip. I was about to enter, but hesitated at the window for a moment. Oh, for a kodak just then! Pat had evidently reached the limit of his endurance without food. So there he stood with sterile gloves in mid-air and mouth wide open, while Mrs. Zeigler was fast filling it with home-made bread and baked ham! Mrs. Zeigler always acted as a bromide. Pains were sure to stop as soon as she appeared.

"I was amused at one of your boys out on a call. He made a rectal examination. The little one said, 'I'll not be down tonight.' The interne waited awhile—then made another examination. This time the little one said, 'Now, Billy, you might as well run along home, for I am *not* coming down tonight.'

"There was a case of false alarm which I didn't get around to see—was too busy—but heard the student telling about it afterwards, thusly: 'Patient was in pain; prepared patient for delivery; good hard contractions caused bowels to move; another contraction; bowels moved again. Darn it! that's the only thing that did move.'

"The most surprising thing that ever happens is when the membranes rupture and some unfortunate person is standing in the way. This once happened to a foreign-spoken man who had on a new suit of clothes and was witnessing a birth for the first time. Turning to the doctor in charge, he asked, 'Do dey always do dot vay?'

"The embryo doctors have struggled most manfully with the foreign languages, especially Spanish. In fact, you will hear the occasional incidents. One night a poor woman was moaning, 'A-y, Dios! Muero, muero. Mucho dolor, A-y, Dios!' A conscientious doctor tried to comfort her with these words: 'La caba viene,' instead of 'La cabeza viene.'

"Pauline doesn't think anything funny happened to her, unless you think sleeping on three chairs in front of a wood stove is funny.

"Floyd Hanes claims that Obstetrics is out of his line. The best use he found for a sterile box was to dress the wounds of an injured man. He did an artistic job. He tied one vulva pad around the man's head, another around his chin, one on his broken leg, and stuck cotton plegets wherever there was

any bleeding. The next day the boys at the Receiving Hospital had a circus picking the cotton out of the wounds. I guess Floyd will have to snap a clothes-pin on his nose the next time he goes out. He claims that the air in a room is not breathable when one section of the stove pipe is missing and the smoke is not capable of jumping the gap."

Friend Stork lifted one foot as he continued: "Some of these young chaps take their lives in their own hands when they try to beat me. Herbert Shafer is still nursing the bruises he received the day he hung on the rear end of the Redondo car as the motorman shot on the juice till Herb decided it was time to let go if he wanted off in that neighborhood. It was lucky for him that there was plenty of room to land in, for he doubled up into a small ball and rolled till he didn't know whether prohibition was in effect or not. Oh, what a pretty spill that was.

"Tripp learned that not all labors are conducted exactly according to DeLee and Williams, etc. He rushed into a dark room with his spotlight, half expecting to find a precipitate, but he found his patient sitting on a foot stool. Her attendant was one of these obsese persons who—well, if she were to sit down the buttons would surely burst off her clothes. With each pain said attendant would vigorously embrace said patient. They say, 'All is well that ends well.' Tripp soon mastered the situation, and the new girl arrived safely.

"Speaking of assistance at delivery, I had on one case two Loma Linda students, one U. S. C. boy and two Osteopathic students. While on another case baby came while hubby was at the neighbor's telephone. The first person on the job was a stout motherly woman who waddled from room to room with a small piece of string in her hand, ready to tie the cord, and jabbering about her 'feefteen foine shtrong boys andt dey gafe effery wan off dem a lettle mite o' sugar at frst to act as a catarkic.'

"Jack Goodfellow was quite puffed up when someone called to him while he was making his calls, and asked if he was a city doctor. Jack straightened up, assumed all the professional dignity, answered in the affirmative, entered the house, found it necessary to assure the lady that she was all right, leave some C. C. pills and continue on his way.

"Mrs. Percival got a good one on Caylor. He dropped in on a case she was delivering, but did not make his presence known until satisfied that all was well. When he spoke she was so surprised she said, 'Why, I thought that you were the husband.'

"Win thought the whole service was a joke, from start to finish, including the private that she examined when she was not supposed to. Nearly everybody else thought, and still thinks, that it was all tragedy, especially making out those terrible records and then have them returned blue-penciled. Really, the city should have mercy on the students and hire a few trained stenographers and have them do that work for them.

"How the lady doctorettes hate to be called 'nurses' and how they do love to call the boys 'orderlies.'"

Suddenly my visitor prepared for flight, stated that he was due at East 75th street, reminded me that I had better "call in" as soon as I could find a phone. Then he departed over the housetops through the clouds with a friendly parting "Honk, Honk!"

THE OSTEOPATHIC SURGEON

By ROBERT D. EMERY, D. O.

OVER and over again the thought presents itself for my consideration: Is there a valid reason for the continued existence of the Osteopathic school at this time? Are the Osteopathic schools and is the Osteopathic profession fulfilling its greatest possible service to humanity.

I have heard these matters discussed freely by the leading members of our profession, and my own views agree with those of the majority. These views briefly stated are that there is a real need for a distinct Osteopathic school and that the Osteopathic profession is serving humanity wonderfully and nobly.

Furthermore, it is the opinion of the majority that even if there is some time to be a consolidation of the Osteopathic school of medicine with the older schools of medicine that such consolidation cannot, should not and will not take place for many years to come. We are serving too useful a purpose as a sectarian school to wish to lose our identity now.

There is more than a slight touch of sadness in our thoughts, however, when we survey the field and observe that some of our bright young men and women who have graduated from Osteopathic colleges are not using methods of mechanical adjustment in their practice and do not wish to be known as Osteopaths, but as physicians and surgeons. These men and women wish to do surgery, obstetrics and give drugs, but do not wish to be known as members of the Osteopathic profession or of Osteopathic organizations.

If this spirit prevailed to a universal degree, we would surely say that our colleges should cease to exist, and we should terminate our existence as a profession. But this fortunately is not the case. Only a small percentage have this feeling and the most enthusiastic members of the profession today are the ones who have served longest.

It is now twenty-one years since I graduated in Osteopathy, and I am a much stronger advocate of Osteopathic principles at this time than at any former time in my career. My own experience is the experience of all of the older and most successful men and women in our profession. That is why they are successful. And speaking of success, we must realize that to properly commercialize Osteopathy serves two useful purposes. It creates respect on the part of the public, and, therefore, successfully serves a greater mass of people, and it also insures a fair remuneration to the physician who untiringly devotes himself to his professional advancement and to service to those needing his skill and wise counsel.

Believing firmly, then, in the real need for the Osteopathic physician, my next inquiry is as to the advisability for having Osteopathic surgeons. Do we need them? Are they filling a different field from that covered by the old school surgeon? My answer is in the affirmative—with certain reservations.

It is true that there is a wide degree of over-lapping of the work of the Osteopathic surgeon with that of the old school surgeons. This is and must be so because our obligations in medicine and surgery, as in art, literature and science, are universal. The most successful surgeon is the one who has gathered his surgical principles and experience from the four quarters of the globe and adapts them to meet his personal needs in each and every case. It is because of this that the Osteopathic surgeon is so successful. The more intimately he is in touch and in harmony with the Osteopathic idea, the more he is

going to give his patients. He knows what Osteopathic treatment the patient should have before operation, and how much, and he especially knows the character of the post-operative Osteopathic treatment and when to give it. It is not uncommon to see failure following well-planned and well-executed surgery where the failure has been caused by the surgeon not being able to give adequate post-operative Osteopathic treatment. This is as true in tonsil cases as in hysterectomies, in gall bladder troubles as in rectal work. The proper follow-up treatment frequently spells the difference between success and failure, and the technique of this post-operative work is peculiarly the property of the Osteopathic physician and surgeon. If we do not convey to the world the importance of this technique we are falling far short of our full mission in our chosen field.

The question is often asked: How much should the Osteopathic physician know about the post-operative technique in surgical cases? That this work is of a nature that requires special training no one can doubt, and those undertaking the work should be willing to serve a reasonable apprenticeship before trying to cover this field. But granting the truth of this statement, it is an incontrovertible fact that the Osteopathic physician with the above special training is peculiarly and most happily educated and trained for just this class of work. There should be a goodly number of Osteopathic physicians taking this training constantly, for the busy Osteopathic surgeon will never be able to give adequate post-operative care to his cases, and his work must be supplemented by that of well-trained Osteopathic physicians working with him.

I do most sincerely hope that these facts will be fully realized by the profession and that advancement in this direction will be even more rapid than in the past.

The special training of the Osteopathic physician who desires and expects to handle the post-operative care of surgical cases should be of two grades. First, a training for those who are working constantly with or under the direction of the surgeon, and, second, one for those who take full charge of the post-operative treatment, as for example, where a surgeon goes into a field outside of his ordinary jurisdiction to operate some special case, and then leaves the post-operative care entirely to the local physician. It is perfectly obvious that the physician who assumes the responsibilities of this second grade must be thoroughly equipped to handle such post-operative complications as hemorrhage, collapse, shock, and must know the early signs of post-operative ileus and other complications which may arise in surgical cases.

Part of the failure of surgical procedures in the past has been this lack of knowledge of post-operative technique, and the feeling on the part of some of the younger Osteopathic physicians that they are fully equipped to take care of post-operative cases, as well as the surgeon can, when they really do not possess the fundamental knowledge or experience to be successful in that field, is very unfortunate.

It must be fully realized that surgery is on trial, that the claims of Christian Scientists and of many members of the various schools of medicine as well as the general public claim that surgery is not successful, and that operations should be avoided. Admitting that many operations are needless, the fact still remains that real constructive surgery is one of the greatest boons to the human

race, and if surgery is to maintain its useful position in the world, the end results of surgical procedures must be gratifying to the patient. One of the large factors toward the production of beneficial end results is adequate post-operative treatment by the competent Osteopathic physician and surgeon.

SIDE BY SIDE WE WALK ALONG TOGETHER

Our college is a lofty spot;
With campus fine, endowed we're not.
But though we work, we play some, too,
For Cupid has his stunts to do.

Our trysting nooks and shady lanes
Are fenced about by window panes,
For chumming spots and campus "lab"
An empty class-room we must nab.

Though men and women, to be sure,
We're boys and girls and nothing more;
And you will find just heaps of pranks,
From Freshmen through the Senior
ranks.

This is a co-ed school, you know,
And sex distinction got a blow;
For men and women are agreed
That both are needed to succeed.

In "lab" and classroom you will find
That neither wills to be behind
With books and pencils and ideas,
Working together, you should see us.

And then there will be other times,
With "spences" mounting over dimes,
In companies of two or more
We dance across the ballroom floor.

At monthly meetings, much absorbed,
We gather 'round the laden board,
To learn of science's advance,
And glean a thought or two perchance.

The Field Days come just twice a year,
On them we swim and fill an ear;
Play ball and row with etiquette,
And then partake of the banquet.

Thus in this hurry, scurry life
We beat the drum and blow the fife;
For there must be some sport, you know,
To make this social life a go.

M. E. C.

As I was going to Saint Ives
I met a man with seven wives;
Each wife was seven times insured;
(His doctor's an allopath, I've heard).

Boston Times: Wanted—A small apartment by a young married couple with no children until October. (Drs. Bashor and Caylor, please note.)

"IS THE COLLEGE OF OSTEOPATHIC PHYSICIANS AND SURGEONS ALIVE TO MODERN EDUCATIONAL METHODS OF TEACHING?"

THIS is getting to be a vital question and will be regarded as still more vital in the near future, as "scientific business management" is applied to all education.

As to the history of the case: individual instruction prevailed for a long time in cities, but was displaced almost completely during the nineteenth century by a method of simultaneous class instruction (the lecture method). This method, however, involves enormous waste of time both for the especially slow and the especially bright students. This fact was pointed out by a few educational leaders at the end of the nineteenth century, but little sentiment was aroused in favor of adequate variations in instruction to suit varying capacities until statistical proof of the differences in capacity and the amount of waste in ordinary class instruction was presented by E. L. Thorndike and others. There is now a general interest in avoiding this waste, and various types of schemes to combine class instruction with variations to meet the needs of individuals are being tried, the idea being to give the minimum essentials for slow students and supplementary assignments for bright students. This gives the bright student something to do besides "mark time." Courses in how to think and how to study have been planned, and the plan finally adopted was the Batavia plan—that of supervised study; the appointing of monitors to aid those needing help. These advisors lessen the work of the teachers and get in closer touch with the students, thereby assuring the best possible results. We are in America and all should have a chance, not merely the bright students.

The teacher generally pre-supposes a habit of study which does not exist and fails to appreciate the student's difficulties. Much of the difficulty of the student is due to lack of knowledge as to how to study and how to use time to advantage. We must secure concentrated study through interest; the principle of reflective thinking being to stimulate reasoning; we want reflective mastery—not merely verbal memorizing.

The more detailed or immediate aims of instruction include, Health, Information, Ideals and Abiding Interest; we are conforming to all of these general aims of education through special lectures and especially in the courses of Osteopathic technique now being given which involves psychology in every-day life and everything worth while now being taught along the line of physical education.

Failures are to our profession as drugs to the medical profession. We can not, or think we cannot, get along without them. But these are well-nigh drugless days. The medicine cabinet is smaller than it used to be. I do not look to see failureless days; yet the time may come, and soon, when near failureless days, and near failureless Osteopaths will be the mode.

With this laudable purpose in mind let us set out to accomplish the near impossible, and let us scorn to shame the professor who in the twentieth century believes in "wholesale flunking." Let us help the professors to make our classes interesting so that they may not be considered as "mild forms of punishment." We don't want "lock-step" in education.

A great obligation rests upon the teacher, and, according to modern psychological principles of teaching based upon "time-saving," if a class of forty should waste an hour, or have it wasted for them, it should not be considered as one hour lost, but forty hours lost, as there are forty members in the class.

Professors, we are for you, and we want you to know we are in sympathy with you and with your methods of teaching and that we are trying to help out in every way possible. You are not making your courses a case of "dreary grinding," as in medical colleges. We appreciate this; we need drill, but it need not and should not be divorced from interest. We are loyal and true to C. O. P. S., and the doctors who represent it. We realize that one of the acid tests of a man's sincerity is the fact that he is willing to work for nothing, or near nothing, as you doctors are so unselfishly doing. We are working overtime to secure results and to make results more satisfactory. May we be able to reach a perfect understanding and co-operate for the biggest, best and most representative C. O. P. S. in the world, as we have the time, the place, and the representative material.

OUR FRESHMAN ROUND TABLE

So much for history and our sentiments, but, be it known that C. O. P. S. Freshmen of Los Angeles are not asleep, as you are possibly aware; in fact, we are wide awake to all of these changes in methods of teaching, and what we miss in class, each other we teach.

In line with this supervised study plan which is being adopted by hundreds of schools this year, in addition to daily afternoon group study, we have organized a Wednesday "round table" meeting where all Freshmen collect to discuss and secure valuable information and suggestions from those more proficient ones of the class—each week a new helper is chosen, fact of the matter is, it is a mutual improvement association—it is a case of reciprocity and good fellowship.

The proof of the value and popularity of such a movement is whether or not it will survive. It has survived! and is like a moving snow-ball gaining in strength. We have set out to make a record for the class and we mean to make good. If we can aid a dissatisfied, discouraged, disgruntled student, and if we can reduce the number of failures to zero, or nearly zero, have we then made good? We are not "knockers" but "boosters," and the class sentiment is so strongly opposed to fault-finding and narrowness that "kicking" is tabooed. We have passed through a war and thanks to the lesson we learned of sacrifice and service. We are living in a new age, a golden age of open-mindedness and sympathy. May all of the Osteopathic family catch the spirit of service and co-operation and may we realize that democracy spells unselfishness, self-sacrifice and service.

RAY RUSSELL.



THE GAME
THAT NEVER
CRIBS.

"A MIDNIGHT MUSING"

Sometimes when folks complain about the way the world is running,
 And fuss and fume and fret and pout until they are a bore,
 It makes me want to rant and shout and do some verbal gunning,
 Or ship them on a tiny raft a thousand miles from shore.

Who wants to listen all day long to crabbing, whining sinners,
 When just a little change of base would right all fancied wrongs,
 Who wants to stand for all the faults of ill-digested dinners,
 And let the wails of misanthropes drown out the world's sweet songs?

The chances are that half the cause of doldrums, dumps and blues
 That these poor simps are falling for until they make us sore,
 Are due to self-inflicted pains from whence all trouble brews
 And could be cured by honest thought which such folks most abhor.

So, Mister Out-of-Joint with things that make most good folks happy,
 If you have any longing for the best that this world holds;
 Just harness up with Sunny Jim, the kid that's fresh and snappy,
 And brighten up your think-tank before it rusts and moulds.

Just change your knock into a boost—a sure cure for digestion,
 And try to laugh, or make at least a stagger at a smile;
 It may be that your brain is clogged and needs a new suggestion,
 A grin or two won't hurt you, and it beats the dumps a mile.

It may be that the world is right, at least it keeps on moving,
 And finding fault and hurling slugs won't get you anywhere;
 Try keeping step with progress once, 'twill be an aid in proving
 That honest effort to get on is better than hot air.

Know what you really want to get from life, which seems a tangle,
 Keep after it, don't stop to fret and hold the world at bay;
 Success, content and happiness are far divorced from jangle
 And when you win them hold them fast, and gloom will fade away.

G. W. WOODBURY.

DEAN BOWLING

Who is it every student knows
 Will always listen to his woes,
 And give him courage as he goes?
 Dean Bowling.

Who makes each student long to do
 Who is it battles for the right,
 To give humanity more light,
 And calls on us to help the fight?
 Dean Bowling.

With steadfast honor, strong and true,
 His level best before he's through?
 Dean Bowling.

Who never falters to the end,
 On whom we all of us depend;
 Who is that gift of God, a friend?
 Dean Bowling.

A FRESHMAN'S REASONS FOR NOT PAYING HIS TUITION

Mr. R. W. Miller, Business Manager, College of Osteopathic Physicians and Surgeons, Los Angeles, Cal.—Dear Sir:

For the following reasons I am unable to send you the check asked for:

I have been held up, held down, sand-bagged, walked on, sat on, flattened out and squeezed. First by the United States Government for Federal War Tax, the Excess Profit Tax, the Liberty Loan Bonds, Thrift Stamps, Capital Stock Tax, Merchandise License and Auto Tax, and by every society and organization that the inventive mind of man can invent to extract what I may or may not possess.

From the societies of John the Baptist, the S. A. R., the Woman's Relief, the Navy Leagues, the Red Cross, the Black Cross, the Purple Cross, the Double Cross, the Children's Home, the Dorcas Society, the Y. M. C. A., the Boy Scouts, the Jewish Relief, the Belgian Relief and every hospital in town. Then on top of it all comes the Associated Charities.

The Government has so governed my business that I don't know who owns it. I am suspected, inspected, examined, re-examined, informed, required, and commanded, so I don't know who I am, where I am, why I am here, or how I got here. All I know is I am supposed to have an inexhaustible supply of money for every known need, desire or hope of the human race, and because I will not sell all I have and go out and beg, borrow or steal money to give away, I have been cussed, discussed, boycotted, talked about, talked to, lied to, lied about, held up, hung up, robbed and nearly ruined, and the only reason I am clinging to life is to see what in hell is coming next. Respectfully, A. FRESHMAN.

WITH APOLOGIES TO KIPLING

"What is that low and rumblin' roar?" said Clinic on Parade.
 "It's just that gay Pre-Medic bunch," the Friendly P. G. said.
 "Why do they make such awful noise?" said Clinic on Parade.
 "They're studying biology," the Friendly P. G. said.
 "Now if you listen closely you can hear the Dead March play,
 'Tis for a murdered angleworm they've pinned down to a tray
 That they may investigate it in a scientific way,
 While they're studying Biology in the morning."

"What is that dame a-gaspin' for?" said Clinic on Parade.
 "She's gaspin' for a bit of air," the Friendly P. G. said.
 "Why does she look so pale, so wan?" said Clinic on Parade.
 "'Tis seldom now she sees the sun," the Friendly P. G. said.
 "In the interests of science she must study Chemistry,
 For sixteen solid hours in the basement there, you see,
 And she's overcome by CO₂ or H₂SO₃
 After working in the Lab. from night till morning."

"What is that sad and gloomy bunch?" said Clinic on Parade.
 "The Osteopathic Physics Class," the Friendly P. G. said.
 "Why do they look so bloomin' blue?" said Clinic on Parade.
 "They wonder if they're going to flunk," the Friendly P. G. said.
 "In pursuit of information they must rush to U. S. C.,
 To seek the coy electron and discover what it be;
 I suspect the shock they've had is not from electricity,
 But they'll all be feeling happier in the morning."

L. G. H.

OSTEOPATHIC PHILOSOPHY CONCERNING TYPHOID FEVER

GEO. F. BURTON, D. O., 220 Story Bldg., Los Angeles, Cal.

ALL the descriptions of typhoid fever are unanimous that the clinical manifestations in this dread disease are unmistakably diagnostic. Pathology is clearly consonant in each type of case.

It is not the purpose of this article to give a resume of the etiological, symtomatical, or pathological factors which comprise this disease, but rather to refer the reader to the reliable texts for this information.

Under allopathic jurisdiction, typhoid fever always runs a normal course of twenty-one days. There may be one or more relapses or recrudescences.

The circulation is so stifled in numerous places that many dire sequelae may result. Directly, stagnation of the venous circulation may produce in the glands of the intestine, inflammation, ulceration or even hemorrhage. Indirectly, venous stasis frequently may cause lobar pneumonia; but the gravest effect is the stasis of the circulation to the spinal nerve cells and brain cells.

The stasis of the venous circulation to the spinal cord is obviously indicated by the extreme rigidity of the spinal column from the very onset of the disease. One can readily understand that if this marked rigidity of the spinal column is not properly cared for, vast systemic damage must ensue.

Hence, the dreadful attendant sequelae. The nerve cells are starved; the brain cells are dizzy. The electrical impulses that travel along these now leaky lines fail to record their messages distinctly. The digestive apparatus is too impoverished to prepare for absorption the necessary nourishment for the immediate need of the hungry and stifled cell life. Again the jerky call for food. Now it becomes desperate, spasmodical, demoniacal. The symphony or poise of the most complex and intricate piece of vital mechanism is a jargon of inharmony, a writhing, seething swish of incompatibility and altogether an incontestible incongruity.

No wonder there is restlessness, pain; sleeplessness, worry; abnormal appetite, loss of hair, illusion, delusion and even wild raving. No wonder the period of convalescence covers such an area of time. Look at the repair needed in this wrecked vital mechanism. Self-repair and self-recuperation have surely met their supreme test. Intake of food is regulated by direction rather than by natural instinct; there is a feeble and intermittent salivation; unprepared food enters the stomach, hence gastric digestion is far from perfect; further, final faulty intestinal handling is so weak and so imperfect that only a limited per cent of the product can be utilized by the lymph and blood streams as assimilable. And all this because the vito-electrical forces of the brain and spinal cord have been starved for want of proper nourishment. Further, because a mechanical venous stasis has arisen like a rock-ribbed wall of granite to obstruct the free flow of the blood stream, to force undue absorption of poisonous products, and to materially handicap the excretory elimination of all the deleterious waste-products.

Under the driving way of mandatory allopathic supervision, how can there be anything but tempests and furies of sequelic storms? Is it any wonder that convalescent patients are like persons drowning, or lost on the desert, or buried in the thick of dense forests? Is it any wonder that with one lung stifled, they

gasp for breath? Or with one limb maimed, they shuffle in walking? Or, with faulty digestion the cry for nourishment from impoverished spinal column centers and starving brain cells is harsh and unabating? How can any of these patients ever hope to return to the original or normal mental and physical stability? The greatest wonder of all is that the crippled are not more maimed; that the defective are not more weak, and that the vitally depressed are not more unbalanced.

Many of the dread effects of this disease are met with so long after their contraction that, to the very best we know how, we can only effect a partial release of the same; and it is very questionable if the sufferer can travel in his former accustomed sphere of activity and assume his original vito-electric command.

The Osteopathic profession should control the typhoid situation. First, because normal typhoid under Osteopathic supervision is readily controlled. It has been the writer's good fortune to obtain absolute control of every case of typhoid fever coming under his review, each separate case in the exact period of ten days. Conversation with other Osteopaths elicits practically the same information.

Second, because we can restore the patients to a normal and physical condition in a very short time. It is not necessary to wait for months for a convalescence. It is not necessary to become bald-headed. It is not necessary for the patient to become a roly-poly and then try to reduce fat to muscle. It is not necessary to have intestinal walls made non-elastic and the cells thereof destroyed. It is not necessary to allow continuous rigidity of the spinal column, which is the source of non-nourishment, infection by absorptive poisons and consequent deterioration both in function and vitality of cell-life.

There are three essentials to observe in the proper Osteopathic handling of typhoid fever. First, there must be a strict regulation of the diet.

Second, every effort must be for the prevention of any venous stasis. The veins of the entire system must be kept unimpinged, and the vaso-motor supply to the same at par.

Third, the cerebro-spinal nerve force must be kept in a perfect state of equalization. The diet is essential, the healthy function of the venous system requisite. But unless there is the even and steady control of the great central vital brain and spinal cell-life we can not preserve the noiseless whirl of the most intricate and wonderful piece of machinery known.

Senior, Senior, shave a pig;

How many hairs will make a wig?

"I should worry and crease my brow,

The State Board isn't asking that question now."



“THE TIDE IS COMING IN”

THEY have been saying about our school that we are gradually getting to be a class of “Hybrids,” so to speak. They say, “We are too lazy to practice or ever learn good old Osteopathy.” It has many times been reported that our graduates carry a medical bag full of a variety of drugs that would shame the worst “Pill Doctor” that ever trod this earth. You have heard yourself that the chiropractors have not only stolen our technique, but are getting our patients, because these patients want Osteopathy and can not get it from an up-to-date “Osteopath.” You have heard of these things, and more too.

Our profession has been slammed and slandered from all sides; and by whom? Most of this stuff comes from a dissatisfied student in the College, who has a particular grouch and wants to get rid of it. There is no one student to blame. We have all been knockers and have picked flaws in our institution. We sometimes miss classes and our instructors are compelled to do the same. It may displease you, but why spread your ill feelings by voicing them to others? Why not drown your sorrow in a Gray, a Cabot or a Starling?

Perhaps you are one who believes all the bunk said about Osteopaths is true. But if you are a good scout, be quiet for a minute and let me tell you that there is more and better Osteopathic technique being taught in this school now than ever before; and if you are not getting “in on” some of it, it is your own fault. There are more good reasons for you becoming an Osteopath right now and practicing real Osteopathy than ever before.

Every one of our instructors is true blue and giving you these reasons every day. It is your opinion that they are “spoofing you,” and you sneer at their remarks. You are the one that I am talking to. Let me tell you that ninety-nine per cent of our graduates, who are practicing at all, are practicing Osteopathy. I surprised a Junior in Psychiatry by telling him that our Psychiatry specialist gives manipulative treatments. “But that is just to a few of his patients,” he offered. “No, sir! Let me tell you that he treats every patient that is able to be treated; and they are not five or ten minute treatments either. I have seen him do it, and a patient that gets a treatment from him gets a real treatment.”

An Osteopathic surgeon in this city, who has a wide reputation, told me that he is satisfied that he could never have attained the skill with a medical school training that he has with his Osteopathic education. Think it over.

I went on a baby case with an Osteopathic physician not long ago. The patient had had several children under medical care. After the baby was born the mother said, “No more medical doctors for me, you Osteopaths are wonderful.”

It is the old story, you have heard so many times that you discredit them all. Get over it. Investigate a little for yourself.

JACK GOODFELLOW.



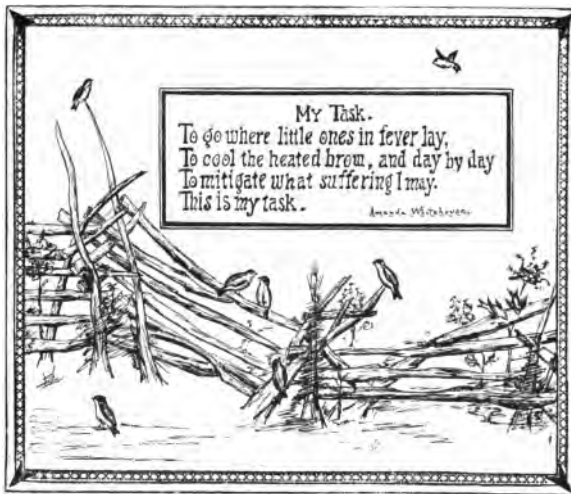
“TO THE GRADUATING CLASSES OF 1920”

YOU are about to leave us in our toil and determination. Those of you who are leaving this institution to go out into the field of practice will miss the chatter of corridor halls, the friendly greeting of the morning, and the good fellowship of the day, but are you going to forget and follow in the trodden paths of your predecessors? Have you enjoyed and cherished all of the work, and ups and downs of college life, to go into the field to forget the instructors, the lecture rooms, the friendship and helping hand? No! You are a part of the great machine which has helped start the power of Osteopathy to awaken. You are going out on a two-fold mission, to aid the sick and to keep the home fires burning, by sending on to the College of your graduation someone to fill your vacant chair.

You have the power of conviction, you know, and it is up to you. Was there not someone influential in persuading you to attend the College of Osteopathic Physicians and Surgeons? Are you not proud of being a graduate of this institution? Have you not formulated plans of what you intend doing? Then why not place yourself back just four years and see if you would not like to study Osteopathy.

There is lots of good material, real men and women who want to study a profession. It is up to you, your duty, to get them in touch with this College. Take an interest and show your true spirit of Osteopathy and keep this machine going.

THE COLLEGE EDITOR.



Patient—I have been referred to you as a hypnotic doctor.

Dr. Volkman—I guess that is alright. Every time I lecture I put half of them to sleep.

OSTEOPATHY FOR THE WORLD

By W. OSTROWSKY

OSTEOPATHY is out of its infancy. It has spread far from its birthplace, has left its home town and even gone to foreign countries.

Thousands and tens of thousands have been benefited by this system of therapy. It has gained the confidence of the laity not only in this country but also in Canada and even in Europe. One of the greatest minds of Europe, perhaps the most honest and able British fighter for the betterment of mankind, George Bernard Shaw, is strong for Osteopathy.

And this was gained almost accidentally. A lonely Osteopath went astray looking for his bread and butter. He settled down in a state or country where never before was Osteopathy heard of. Some time passed; Osteopathy proved its value and acknowledgment, at least by the laity, followed soon. This was its course until lately the war has changed the world situation. It has created an army of cripples; it has ruined the health of millions; it brought and perhaps will bring on yet, world epidemics. A greater supply of physicians is necessary, but political and economical wreckage in Europe and narrow-minded, cowardly-hearted trade unions of the A. M. A. in this country, are preventing even the pre-war rate output of physicians. Perhaps humanity is actually gaining by lessening the number of skillful pill shooters, but the Osteopath, and especially we, the Osteopaths in the making, ought to know the present situation, and advance before the world the principles laid down by Dr. A. T. Still.

Nations may claim their historical and political rights, or rights by might, on territories or lands, but the laws of nature are set for all mankind.

America may be for Americans, but Osteopathy must be for the world.





TICKLEE! TICKLOR!! TICKLISH!!!

HAVE YOU?

Read the Preface of this College Edition?
 Read the Introduction, and the Dedication?
 Looked over the reports of our Clinic Records?
 Read the Faculty rhymes; the names on our Honor Roll?
 Found any use for the names and addresses of the Alumni?
 Read "The Index of Professional Vitality," by Dr. L. C. Chandler?
 Found a million mistakes?—the Editor expected you to.
 You any criticism to make, or any compliments to offer?
 Read the "Why of the 23's" and the "Ways and Means of the Freshmen"?
 Read about our College activities and social events?
 Read the article, "Osteopathic Philosophy Concerning Typhoid Fever"?
 Read "Our Advice to the Lovelorn"? Don't miss it.

WHAT DO YOU THINK?

About our College in general?
 About our Faculty—Students—and Alumni?
 About the future of the College. Can you help it?
 About our Faculty and Student Bodies?
 About the WESTERN OSTEOPATH as an annual "CORTEX"?
 About the success of our Doctors and Students as practitioners?

"MEETING THE PROBLEMS OF EVERY DAY LIFE"

R-r-r-r-r, Oh that alarm! I quickly turned it off and tried to go back to sleep again, when a poke in the ribs from my roommate reminds me of many things to be done before eight. Let me see—Chemistry. Those last three experiments have to be written up in detail. My drawings in Zoology are not quite complete, and those Physics problems ought to be ready, too.

Cold H₂O, plus vigorous rubbing, produces a clear mind ready for work. Not a word is said by either of us until the hand of the clock points to a quarter after seven, and then—a hurried toilet plus toast and coffee; after which we must pick up and wash the dishes and get off to the College. People on the streets seem to be in just as much hurry as we. Whether or not we are late for class, all depends upon how long we have to wait at the crossings. We arrived at the College just two minutes late, and from the size of the class assembled, we judge that others must have been detained at the crossings.

Our lectures are a constant revelation to us. How very wonderful to think that everything, no matter how minute the plant, animal or particle of inorganic matter, it is built upon a certain definite plan and has a special work to do. Of these we learn and attempt to interpret and understand.

Chemistry lecture and "Lab" keep us busy for several hours every day. To learn all that is known and all that is left to be learned about this subject would take several lifetimes. Just now we are concerned about the reaction uses and properties of aluminum, but reactions to different kinds of stimuli are discussed as if they were "One of the problems of making ends meet."

From one student, "I made a dollar last night in about twenty minutes' time." "What doing?" "Running a Ford." "H'm, you haven't anything on me, I made a dollar and a half, and have the opportunity of doing so every night this week." "What doing?" "Nursing; I take care of an invalid lady from seven till nine every evening. I could make more than that if classes did not always come at the wrong time."

"I heard that Mrs. D., on Sixth street, wants someone to look after the baby on Thursday and Sunday evenings—I don't know what she pays, but imagine about fifty cents an hour. Anyone who can do stenographic work can get odd jobs of a few hours daily at the Underwood office. Good pay, too."

I will admit that it is hard work to be earning while we are learning, yet there is a lot of satisfaction in successfully meeting and overcoming the problems of everyday life.

Biology teaches us that only by increasing the demand for work will the capacity to do more work increase. Only he that uses shall even so much as keep. Unemployed strength steadily diminishes; ceasing to gain we begin to lose; ceasing to advance we retrograde.

MARY BECKER.

Bion S. Warner he sat in a corner
 Haggard and pale and thin;
 By special request he wore on his vest
 An Atlas fraternity pin.

QUESTIONS AND ANSWERS WITH ADVICE TO THE LOVELORN

Dear Editor:—I am a young girl twenty-three years of age, five feet, ten and a half inches tall, dark eyes and hair, and am accomplished in music and cooking, and a Senior in the Osteopathic College. I have been more unfortunate than most of my chums, inasmuch as I have not become engaged while I have been in school. I have lots of beaux, but they are all small men, and I don't want a little man for my husband. I have had five proposals this year, but all of them were small men. Can you tell me how I can meet a large handsome young man? I want to settle down, as I am tired of working, and my training in college will help me in raising a family. I met one young man who is attending school with me; we went together some this year. He was tall and rather good looking, and everyone seems to like him; but he only acted as a friend with me, and I could not get him to propose. Can you tell me what I shall do?
—A LONELY GIRL.

Dear Lonely Girl:—With your wonderful accomplishments you should have no trouble in getting married. But girls of your height very seldom find a tall man, for large handsome men usually prefer the small type girl; and, 'toid, think what might happen if you were to marry a tall man! You would be better contented with a small one, with light colored hair.—THE EDITOR.

Dear Editor:—I am a beautiful blonde twenty-three years of age, and have been going with a young man who recently graduated. We have both attended the Osteopathic College four years. Since he graduated he has returned to his home in Oregon, and it was ten days before he wrote to me. He was very attentive while we were in school, but I could never get him to propose to me, although I gave him many gentle hints. He has a young lady friend in his home town who knit him a sweater. I didn't like her nerve, so I took it away from him and wore it myself. Do you think that he has gone back to her and will forget me in a few months? My mind has been distracted from my studies since he left, and my roommate says I talk about him in my sleep. Can you tell me what I shall do?—G. A.

Dear G. A.—You can console yourself by thinking that old adage "Distance makes the heart grow fonder," and keep on wearing his sweater. Have you tried taking hot baths before retiring, it is a wonderful remedy for insomnia.—THE EDITOR.

Dear Editor:—I am a Sophomore in the Osteopathic College and am engaged to marry one of the Senior girls, in fact, the "belle" of the Senior Class. We had the date set for our wedding on June 20th, immediately after graduation. Now a certain doctor, who runs the City Maternity Service, says she must go on the service for two weeks more, beginning June 15th. There seems to be no way out of it except to knock his head off, which I have threatened to do. What would you do?—A MONROVIA STUDENT.

P.S.—I am good looking and quite an athlete, and the best tennis player in the College, so you see she is getting no lemon.

Dear Monrovia Student:—If I were you I would marry her on the 14th of June and go on the City Service with her. It would be good experience for both of you. Don't try to knock anybody's head off. Men with better judgment than you have failed in this same attempt before.—THE EDITOR.



Hartsook
Photographs

"ONE OF MANY"

He sat in the M. D.'s office
 Waiting his turn to be "doped."
 His nose was in need of a bucket,
 His tonsils about had him choked.

H's bronchie wheased at each outlet
 Of carbon dioxide gas.
 The stethoscope, did you hear it?
 Sang "Regurgitation," alas!

The dinner consumed last evening
 Was twisting and squirming about,
 For the lipase and pepsin were loafing,
 And nothing was fit to go out.

Already his dwelling seemed crowded,
 Not even a pill could find room.
 Why should he wait for the doctor?
 'Twould mean but an increase of gloom.

In desperation he started
 In search of a different cure.
 He lit in a D. O.'s office;
 Now, that was luck, to be sure.

He lay on the Osteo's table;
 Patient, but ill at ease,
 While the doctor questioned and queried,
 Extended and bended the knees.

With microscope test tube and fingers
 The cause of the trouble was sought;
 His eyes and his ears were a-tingle,
 With science assisted, he thought.

"Each life is a god-given treasure,
 My task to safeguard it," said he.
 "If I can assist in some measure
 Of service, I, too, will be."

'Tis this spirit of honest endeavor,
 Plus knowledge correctly applied,
 That heals all the patients forever,
 And makes them fight by your side.

—M. ELISE CARLSEN.

Dear Editor:—I am a student in the Osteopathic College part of the time, and work the other part. I expect to graduate next year. My uncle runs this school and I know he will let me by. I am the star pupil when I come, so I don't see why I shouldn't graduate even if I don't come much of the time. I don't have to study much, so I spend my time going with the sweetest girl in all the world. I have tried to get her to marry me, but as she is larger than I am she refuses. In all my courses here in College they don't teach me how to grow bigger. Can you tell me this so I can get her to marry me? She likes to go to school parties, but I don't like to take her to associate with rough-necks around the College; I know the kind of fellows they are, and they are not good enough for her. What should I do about this?—G. S.

Dear G. S.:—An unsophisticated little shrimp like you will never get any bigger; on the contrary men of your type soon shrivel up and blow away.

Take this young lady to one of the school parties and let her meet a real rough-neck, as that seems to be the kind she needs to meet. And after this pick out a girl of your own size, if you ever expect to get married.—THE EDITOR.



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Dear Editor:—I am a young man thirty-four years old, and in the past was very popular with the ladies. I have been in College three years, besides spending nearly two years in the army. Until lately I have had a difficult time gaining favor with any of the young ladies in College. Recently I have had the pleasure of the company of a very beautiful girl. I have taken her to all of the College functions, and we both dance well. I am deeply in love with her, but can not get up courage to propose. She associates with another girl, who is secretly engaged, or perhaps married. I have advised her against associating with this kind of girl, but she shuns me when I speak of it. What am I to do? We both graduate next year, and it would be nice if we could practice together.

We are both blondes, and she says she deeply loves dark hair. Another thing; mine is rapidly falling out, and what can I do to stop it? I have no bad habits. I smoke cigarettes but use a \$2 cigarette holder, so they don't hurt me. I had pleurisy with effusion in the army. Is smoking cigarettes liable to effect that? Please answer soon, as I don't sleep well.—O. T. G.

Dear O. T. G.—There is nothing for you to do about the other girl. If she is that kind, avoid her.

You might try dyeing your hair, and if it comes out you can wear a wig.

What do I know about pleurisy with effusion—you ought to, you had it.—

THE EDITOR.



DOCTOR !

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Dear Editor:—I am a young girl eighteen years of age, a very good looking blonde, and have attended the Osteopathic College three years. I am deeply in love with a tall handsome young doctor who has just graduated. We have been engaged for three months, but he hasn't given me a ring yet. He says that I should be satisfied with wearing his Frat pin, but I have just found out that he was engaged before, and gave his former fiancee a ring. Now I can't see why he shouldn't give me one. Can you account for lack? Do you suppose he is afraid of the students finding out about our engagement? I really believe they think we are engaged anyway.—G. M.

Dear G. M.:—Yes, I think I understand why the young doctor does not give you a ring. The trouble is that the first girl has not returned it yet. However, that may not account for the lack. This trouble can not be remedied. If you have been with him around College you needn't worry, for the students know that you are engaged.—THE EDITOR.

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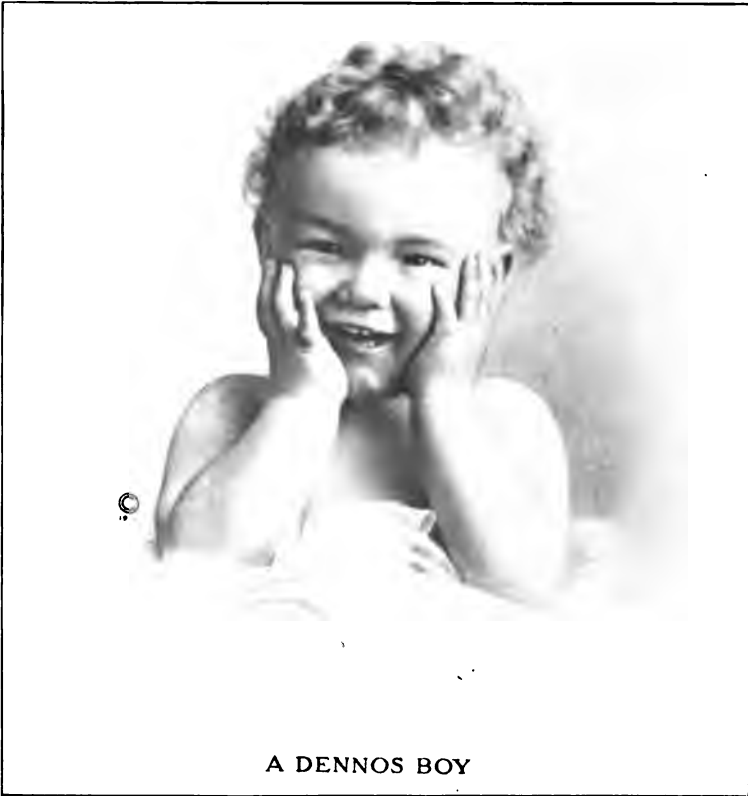
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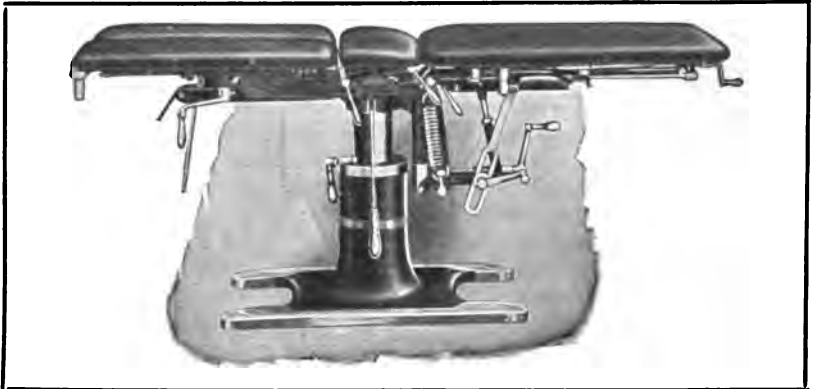


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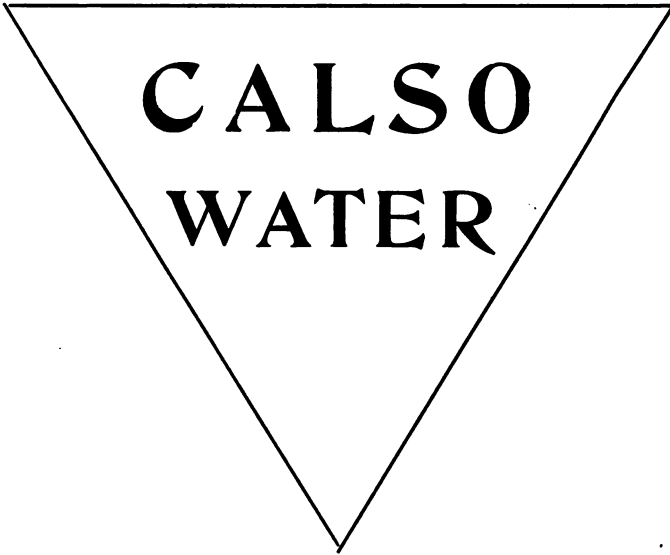
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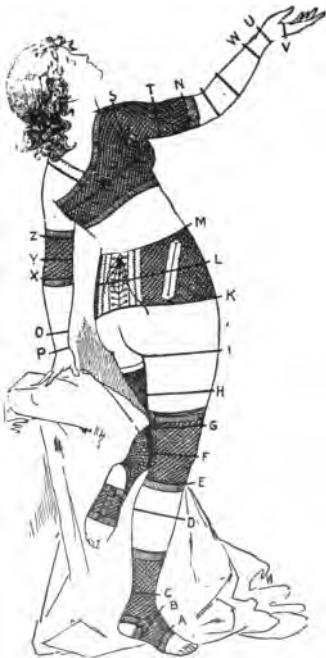
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A. That is not the same proposition.

Q. Isn't labor, time, and skill to be paid for whether in the form of examination, treatment or surgery, and should not the fees go to the man doing the work? What are fees for?

A. Isn't the case mine, my stock-in-trade? Where do I get off at?

Q. Oh, you have cases for sale, have you? A sort of broker, eh? What do you say about the cases referred to any doctor by a satisfied patient? Do you think that the doctor should pay a commission on those, too?

A. No, I don't. Most people go to a physician because of what they hear concerning his ability or knowing his success in given cases.

Q. Well, when you refer a case, do you not consider first the ability of the doctor to handle the case, or is your first thought to see "who will do the case the cheapest for you" or "who will be the highest bidder"?

A. I don't care to argue this question any longer. It is very evident you surgeons want it all and are not willing to give the general man a chance.

Q. Just a minute, please. Do you think that if I send a man on a call for me or to take charge of a case for me if I'm sick, or ask him to look after the "after care" of a patient that I would ask him to do it for nothing, or ask him to give me half of his fees?

A. I don't know what you'd do.

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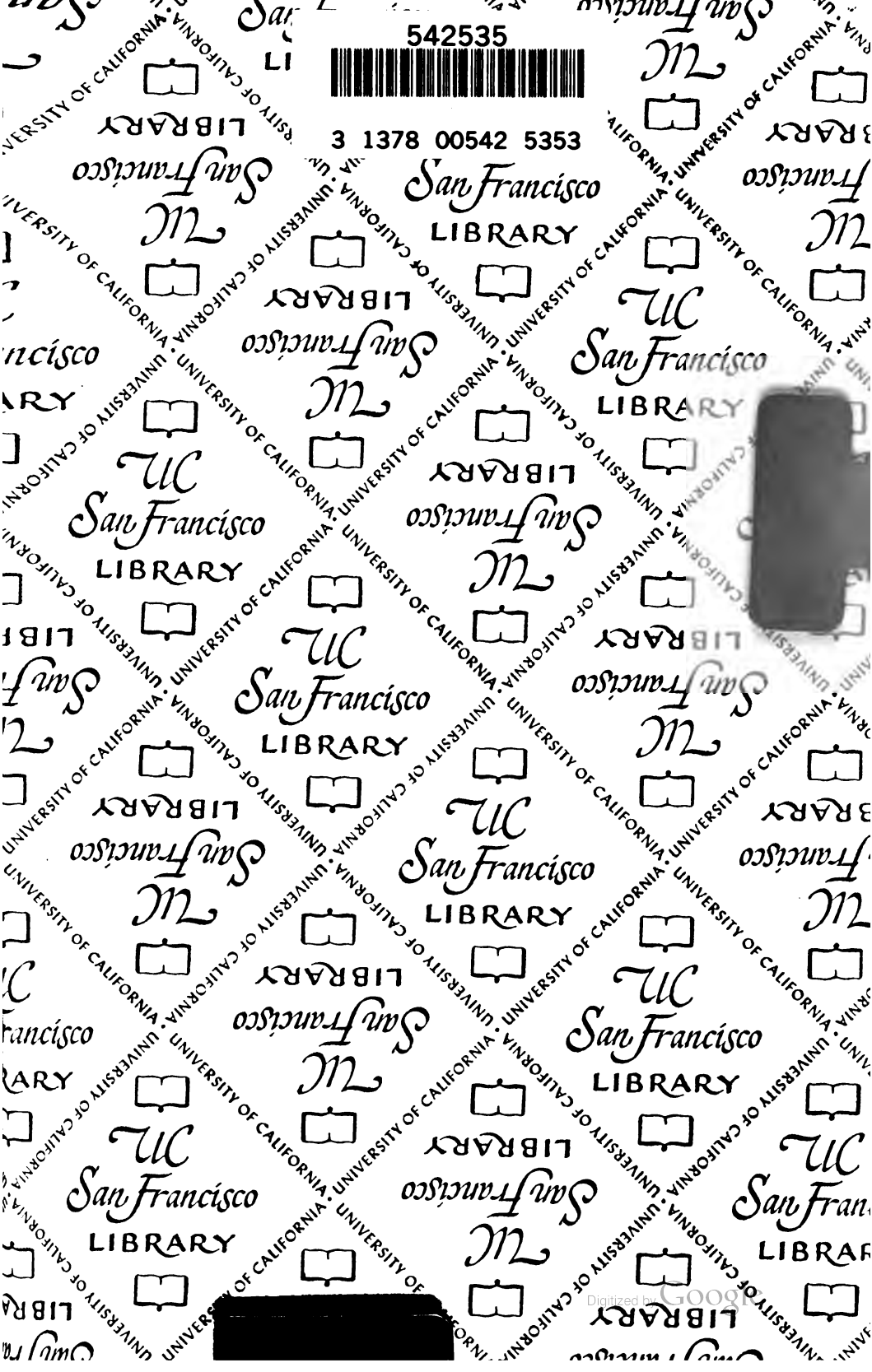
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