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THE WEEKLY GRAPHIC

T. E. SUBLETTE, Proprietor
KIRKSVILLE, MO.

FRIDAY, JUNE 27, 1902

THE S. S. STILL SCHOOL.

A Graphic Reporter Visits That Famous Institution.

Dr. Still of Des Moines was in Kirksville the early part of June and gave us a cordial invitation to visit the college if business should ever call us to that city. Fortunately we did not have long to wait as a business deal caused us to visit Des Moines recently. We found the doctor as agreeable as ever and his kind manner reminded us of the days when he was professor of anatomy in the

ing room to a layman. . . . in which they do their dissection. We found thirteen bodies nicely arranged on tables and a number of students finishing up their term's work in this department. Dr. Lenora Carpenter had charge of the dissecting room and had her work completely in hand. Dr. Still told us that requests from graduates of other schools had been so frequent and so urgent that he had decided to hold a summer school during July and August to accommodate those who had been unable to get dissection in their own schools.

The terms for the July dissection, which includes one quarter and lecture on other subjects, is \$15. The August dissection, which includes the other quarter, is \$6.25. The Still college at Des Moines has been so fortunate in getting material for dissection that no student has ever been graduated without having had a full lateral half, and no student has ever been compelled to

THE OSTEOPATH

BILL TO CREATE STATE BOARD OF EXAMINERS UP WITHOUT RECOMMENDATION.

Monday 12/03
Representative L. C. Stevenson's measure creating a state board of osteopathic examiners and regulating the practice of osteopathy in Minnesota is one of the important bills which will come before the senate this week.

The bill has been reported by the judiciary committee without recommendation. It provides that the board shall consist of five osteopaths appointed by the governor. Applicants will be examined in anatomy, histology, obstetrics, pathology and chemistry. The examination fee is \$20. Any person practicing without a license will be punished by a fine of from \$50 to \$100.

Senator George P. Wilson's measure establishing a state board of charities and corrections to superintend the actions of the state board of control will be on general orders today. Several members of the committee on corporations, to which it was referred, are opposed to the bill, but consented to its being reported without recommendation. The bill provides that the board shall consist of six, to be appointed by the governor. Its duties are principally advisory, although it has a veto power over the decisions of counties and municipalities relative to the adoption of plans and specifications for jails, poorhouses, hospitals and asylums.

Senator J. G. Schutz's measure abolishing the normal schools at Duluth, Moorhead and Mankato is on general orders, notwithstanding the fact that the committee on normal schools recommended it for indefinite postponement. Senator Schutz says that if he can get the bill through the senate it will pass the house without much difficulty. The representatives from institution towns are opposed to the bill, but some of the other members are of the opinion that if the normal schools confine their work to instructing teachers in St. Cloud and Winona or

... beyond the most sanguine expectations of its founder. The fine building... The fine... strongest... osteopathic school in the...

Dr. Still can ask for a financial statement from all the colleges in the Association of Colleges of Osteopathy, of which he is president.

The low price for dissecting indicates that the S. S. College of Osteopathy is not being run to pile up money, but to turn out men and women skilled in the art of healing.

... between ninety and a hundred. The last September class was the largest that has ever matriculated. The

college has eighteen professors, every one of whom does active college work. President Still does forty hours lecturing per month, besides treating a large number of patients. Every officer of the institution, who draws a salary, does his full quota of college work. The secretary, Col. A. B. Shaw, a most genial gentleman, makes a specialty of X-radiance. The college possesses one of the finest machines in the world and patients are sent to the college for X-ray examination by medics and osteopaths from many towns beside Des Moines.

Kirksville people are always glad to hear of Dr. Still's success, as he was at one time one of us, and he still delights to speak of himself as a "former of Kirksville."

Des Moines is a beautiful city, and students will find it an ideal place to spend the summer months and pursue their studies. The S. S. Still school is the pride of the town and is

❖ Surgery Cheats Death After Bullet Pierces Heart ❖

E. H. Fisk Is Brought Back from the Brink of the River Styx After His Pulse Had Stopped, After He Had Quit Breathing and While His Face Was Taking on the Bluish Palor of the Dead.



Dr. GEO STILL
M.S., M.D., D.D.,
SURGEON A & C O
HOSPITAL,
KIRKVILLE, MO.

OUT in Helena, Mont., E. H. Fisk is enjoying life. E. H. Fisk is 21. His health is good, his hopes are high. He faces the world without fear or worry. Now, the fact that E. H. Fisk enjoys life in Helena, Mont., is not in itself a startling bit of news. But the case of E. H. Fisk is made remarkable by the fact that a little more than a month ago he sent a bullet from a revolver through his heart. Today he is as good as new.

kill himself. But surely, too, it is romantic that a doctor should bring a man back from beyond the portals of death to live again on this old world of ours.

Here is the case of Fisk: He was a student, 21 years old, at the American School of Osteopathy at Kirksville, Mo. In a fit of despondency on December 6 he shot himself through the heart.

He had been dining in a boarding house at Kirksville with a number of fellow-students. Suddenly Fisk arose and made his way to his room. There had been no hint of tragedy throughout the meal. The conversation had been frivolous. But suddenly a shot rang out. Fellow-students, rushing to Fisk's room, found that he had placed the muzzle of a revolver against his left breast and had sent a bullet speeding through his heart.

Some one, more cool-headed than the rest, telephoned to the American School of Osteopathy Hospital and notified Dr. George A. Still, the surgeon in chief, that Fisk had attempted suicide. Dr. Still had a brief few moments to prepare before Fisk's apparently lifeless body was brought in.

At this point of the narrative the doctor's own words are valuable:

"We had been notified," said Dr. Still, "that we must expect a gunshot wound. When Fisk was brought in on a litter and the location of the wound explained, I immediately cut the clothing from his chest. Fisk was unconscious and apparently dead.

"His chest was exposed to me, and attending physicians and nurses, and there were none of the usual signs of life. We found no pulse in the wrist or in the neck. Respiration had stopped. Cynure, that peculiar blue tint that seizes at once on the faces of the dead, was very noticeable.

"Here was a man who beyond the cavil of doubt was dead. Your ancient philosopher would say that his soul was already in Limbo. Rigor mortis could be expected to set in within a brief space.

"I seized a scalpel and cut in between the fourth and fifth ribs. The blood that had accumulated in the pericardium, which is the sack around the heart itself, was allowed to flow out. This pressure of the blood relieved the organ. I massaged the heart, and, slowly, hesitantly, it commenced to beat. Intently I watched that man's heart resume its duties.

"Five minutes before and its owner had been seemingly lifeless—the heart's functions through forever. Now the spark of life was slowly being fanned. As we watched—nurses and physicians—the action of the heart became stronger. In five or ten minutes it became apparent that the first stage of our battle with death had been won. Fisk, who had been dead, was living."

Fisk's return to life was fraught with agony. Two male attendants were needed to keep him quiet in bed, and for several days after the wonderful operation he endeavored to kill himself by tearing the bandages from his person. However, his mother had been notified and hurried from her home in Helena, and her presence on the third day of his convalescence encouraged Fisk to live.

The rarity of a successful operation on the heart can be judged by the fact that medical science carefully records every instance in

*"Then with eyes downward cast, and fill'd with shame
Fearing my words offensive to his ear,
Till we had reach'd the river, I from speech
Abstained. And, lo! Toward us in a bark
Comes on an old man, hoary white with eld,
Crying 'Woe to you, wicked spirits! Hope not
Ever to see the sky again. I come
To take you to the other shore across
Into e'ernal darkness, there to dwell
In fierce heat and in ice And thou, who there
Stardest, Live Spirit! Get thee hence, and leave
These who are dead.'"*

—From Dante's Inferno.

which a human being survived—and the number of instances are few. Similar cases of heart wounds where the patients have lived for several days, or have recovered completely, are reported by Dr. John B. Murphy of Chicago, in his monograph on this subject; Dr. A. P. C. Ashurst, professor of surgery in the University of Pennsylvania; Dr. James G. Mumford, professor of surgery in Harvard University; Dr. Albert Carless, professor of surgery in King's College Hospital, London, England; Dr. R. A. Witthaus of Cornell University; Dr. Walter G. Spencer of the Royal College of Surgeons of England.

But in a huge majority of the instances reported the patients suffering from wounds in the heart survived only a few days the operations designed to cure them.

Fisk hung between life and death for days. Then, gradually, his strong constitution began to assert itself and the tide turned in his favor. Two days before Christmas, seventeen days after he shot himself, he was sufficiently recovered to sit up in his bed at the Osteopathic Hospital and make presents for fellow-inmates of the hospital.

On December 28, or twenty-six days after he had inflicted on himself a wound that would in 999 cases out of 1000 have been certain and instant death, Fisk made the thirty-six hour trip from Kirksville, Mo., to Helena, Mont., with his mother and survived it.

That a man should shoot himself through the heart and survive an operation on that organ is in itself exceedingly rare, as the medical records attest. But that a man should be brought back from beyond the brink—that he should have died and then be made to live again is almost without parallel in the annals of science.

But Fisk was dead. Dr. Still carefully calls attention to the fact that the pulse, respiration and the action of the heart had ceased. These phenomena mean that life is no more. Also, one of the first of the post-mortem signs had made its appearance—a blueness of the face.

Half a dozen attendants at the American School of Osteopathy Hospital, besides Dr. Still, noted that the gunshot wound had been made in the left side of Fisk's chest. After the clothing had been cut away they saw that the bullet had ranged obliquely into the chest. A hurried incision of Dr. Still's scalpel exposed the heart, and it was seen that the bullet had first pierced the pericardium, or sack around the heart; then had passed through the left and right ventricles near the middle of the heart.

The bullet then ranged downward and pierced the lower part of his right lung and the liver. The bullet was removed two weeks after the wound had been made. It was found by Dr. Still near the eleventh rib against the flesh.

Dr. Still admits that the success of the rare operation on Fisk was due, in great part, to the fact that so little time elapsed between the moment he shot himself and the moment he was laid on the operating table. Dr. Still estimates that five minutes after Fisk fired the shot, his body was on the operating table, the incision in the chest cavity had been made and the action of the heart had been artificially stimulated.

However, it seems certain that the bullet stopped heart action almost immediately after it passed through the organ. Which means that during the five minutes that elapsed before Dr. Still again started the heart, Fisk was dead.

Science balks at explaining such a case. If Fisk was dead for five minutes, could he have been brought to life? Religion tells us that it requires a miracle to bring the dead to life. Science scoffs at miracles; it claims to be able to perform none and doubts they can be per-

formed. Science puts its faith in the immutable laws of nature. Science says that we have only to learn these laws and to obey them.

But according to science's own laws, Fisk was dead. For his pulse, his heart and his respiration had stopped. Then here is a man who was raised from the dead.

Religion, which does not attempt to deny science's definition of death, is amazed that a man should die and be brought back to life again.

For religion says that when a man dies he faces judgment and is consigned to a heaven or a hell.

However, cases have been related in which men were dead, and were raised from death by the Savior. In these cases it is believed that their souls went, for the period of death, to a Limbo where they awaited recall to earth.

Such a place Dante pictured when, from his weird imagination, he wrote his "Divina Comedia." Was it to such a place that the soul of E. H. Fisk went while his body lay on the operating table in the American School of Osteopathy Hospital? Did his soul wander

through the shades of a Limbo, while Dr. Still massaged his heart and persuaded it to again take up its duties, while attendant nurses and physicians looked on, awed, at the miracle that was being done?

No one will ever know. For the shock of the

Why Nations Fear to Arouse Swiss

SWITZERLAND is a wonderful little country.

In the midst of warring nations it is maintaining its neutrality. Not by suffering insults and worse, for the Swiss do not believe in turning the other cheek when smitten on one, but by mobilization and by the fear the other nations have of trying to encroach on Swiss rights.

Just how wonderful this little nation is no one knows until he has studied its history.

It is called a nation of hotel keepers. And as a matter of fact the principal industry is keeping hotels, which cater to tourists. But back of this is the spirit of William Tell, the spirit of absolute independence, a warlike spirit, which admits no encroachments by superior powers.

Not one of the warring powers has tried to persuade Switzerland to enter on its side. The country wants nothing. It asks no concessions, and the powers have been wise enough not to waste time in offers. They knew that the nation is sufficient in itself.

Who would dare invade the country? It has been tried in ages past, but no one gained anything by it. The Swiss, with their country occupied by a foreign foe, could fight for a hundred years and not be conquered.

There are no spoils to be gained by a foreign foe. But each of the warring ententes could

operation and the resultant days of anguish robbed Fisk of any recollection of those five minutes when his soul had passed through the portal. In this far, science is unfortunate—that a man who has passed to the great beyond and has been brought back, is unable to tell what he experienced there.

But, then, science concerns itself but little with the supernatural. It is enough for science that a human engine has been stopped and started again. Science had its triumph when the skilled hands of Dr. Still seized the passive heart of E. H. Fisk, gently massaged it and watched it slowly resume its functions.

gain vast strategical means of communication if Switzerland were on their side. But both the ententes have realized the futility of trying to gain the country to their side in the conflict.

Hundreds of years ago monarchs of other countries had their Swiss guards, great handsome men, known the world over for their faithfulness to their employers. For hundreds of years the guard of the pope has been Swiss. Visit the Vatican, and everywhere one sees these huge men in the gaudy uniform designed by Michael Angelo.

One of the most beautiful and impressive monuments in the world is that lion at Lucerne carved in the rock of a huge cliff which towers over a spring in the center of Lucerne and is dedicated to the 220 Swiss guards who gave their lives in defense of Marie Antoinette when the French mob stormed the Tuilleries.

Somehow or other this monument impresses the stranger, more than anything else, with the bravery, the tenacity of the Swiss. The lion, emblem of Lucerne, dying with an arrow through its shoulder, with the lilies of France beneath its paws, is typical of the Swiss spirit, its bravery and its tenacity of purpose, whether employed in the service of others or in the service of its native land.

Bounded by Italy, France, Germany and Austria, the person unacquainted with the Swiss finds it hard to understand why the little nation has kept out of the great war. But those who know its people and its history know—it is the fear of arousing the Swiss spirit of independence, more than anything else, which has kept Switzerland neutral and made the warring powers cautious.

Need of Standardization

HERBERT BERNARD, D. O., DETROIT, MICH.

The theory of Osteopathy is becoming fairly well known among the laity and they think very well of our claim that disease is the result of disorder at some particular point of the anatomical structure. *Some particular point*, mind you, for even the Osteopathic physician who gives general treatments usually informs his patient of some lesion he has found in the patient's anatomy. So the laity are becoming fairly conversant with our theory, but the practice, ye gods! The laity doesn't know whether the practice is specific, general or what not. Twenty-one years ago when there were but few Osteopaths in the United States a patient could go to everyone of them and get the same diagnosis and the same treatment. You know what he gets now—it isn't necessary to go into it. In the early days of our profession someone, somewhere, somehow conceived the crazy idea that if he moved every articulation to the limit of its area he would surely hit the right one, or the articulation that was in le-

sion. This man was a JUDAS to Osteopathy and probably did not know it. He was too infernally lazy to keep up the study of anatomy and physiology in order that he might become thoroughly acquainted with the human structure. I am sorry to say that this re-discoverer of Swedish movements has many followers among our profession. Therefore I am becoming firmly convinced that if we do not standardize our practice Osteopathy will die. We must return to our original procedure in treatment—return to those days when the method of treatment was entirely specific.

Then there is this everlasting argument as to whether the Osteopathist is a real physician or not. Whether Osteopathy means a purely mechanical treatment or embraces medical adjuncts. I believe Osteopathy to be a LAW, or at least a means to assist ORDER and we know order to be an immutable law. I also believe, and have proven it to my satisfaction, that all disorder of the human machinery may be eliminated by a

mechanical treatment such as Osteopathy or surgery. I do not mean to say that I as an Osteopath can put the human machinery in order in every instance because I cannot. I do not know enough of Osteopathy yet for that. In fact I know very little about Osteopathy in comparison to what we may yet learn of it. To learn the full scope of the Osteopathic principle will take many years of research and for that research it takes men or women who know those two great sciences—Anatomy and Physiology. Physiological research is Osteopathic research. At the present time I defy anyone to tell me that Osteopathy will not do a certain thing unless that one knows more anatomy and physiology than I do. The Osteopath who believes that Osteopathy embraces medical adjuncts thinks he is right although it's a safe bet that he couldn't tell the tissues surrounding a joint with their nerve and blood supply to save his life. But he thinks he is right, so we won't quarrel as to what Osteopathy will do or will not do, especially when we need unity of action more than we have ever needed it. We must standardize Osteopathic procedure.

Shreveport "Times"
May 12 1917

ROTARIANS MIX THEIR PROGRAM

Club Affairs, Highway, Osteopathy, Endow- ment Included.

The high cost of living hit the Rotary Club members in a new spot Friday, when the price of the weekly lunch was raised from 50 cents per plate to 75 cents. The club chose to pay the increased price for a hot lunch as an alternative of paying the original figure for a cold one. Notice was given at the last meeting that because of the increased cost of all food products a hot lunch could scarcely be served at the original figure, to say nothing of being served at a profit.

The club also voted to change the method of electing officers for the ensuing year, and instead of one nominating committee, as heretofore, there will be two. A more democratic form of nomination was desired, but as the constitution would have to be amended to do so, and as the time is short, the alternative provided by the existing constitution and by-laws was chosen. The committees will be appointed at the next meeting and the election will follow a week later.

Dr. P. W. Geddes and Mrs. J. Kimbell were the speakers on the program, Dr. Geddes making a talk on osteopathy and Mrs. Kimbell a speech in behalf of a big demonstration on the occasion of the Jefferson Highway Association sociability run. The Cad Parish Highway Association is anxious to have 10 miles of automobiles an escort for the four official cars in the run between Shreveport and Mansfield.

The run will reach Shreveport Monday at 6 p. m. The tourists will stay here all night and leave the next day for Mansfield on the way to New Orleans. Five miles of autos was the record escort for the official cars last year, that many entering Winnipeg the conclusion of the first sociability run from St. Joseph to the northern terminal. A committee of five will be appointed at the next meeting, to represent the Rotary Club on the reception committee.

Since so many Rotarians are also members of the committee in charge of the Centenary College endowment campaign, the luncheon of the two bodies was held jointly.

The International Rotary Association's bowling contest will take place Wednesday evening. The Shreveport Club has a team entered, the average score of which in practice games has been 2,600. The game will be bowled at Saenger's and all members and friends of the club are invited to attend.

Dr. Geddes' talk on osteopathy was once a history of the science, the story of its origin and development.

and a definition of what it is, and was decidedly interesting.

History of Osteopathy.

"Osteopathy," he said, "had its inception in the dissatisfaction of a doctor of the old, or allopathic, school in the system of medicine which he practiced. It has, in the past few years, made such strides, has become so widely known as a healing art, that I will only briefly mention its history. That its place in science is assured from a clinical, as well as a theoretical, standpoint is demonstrated by its thousands of patients and practitioners in this and in foreign countries.

"The osteopath is a well-grounded, all-round physician, fitted by his 36 months in laboratory, clinic and classroom to handle any kind or class of disease. He is trained in hygiene, dietetics, sanitation, the use of anesthetics and antiseptics, and in the so-called 'emergency medicine,' such as the hypnotics in certain cases. His hospital experience is one of the best institutions in the middle west and under one of the best surgeons in the country, Dr. George A. Still, is large and comprehensive. There are now, in several locations, notably at Macon, Mo., strictly osteopathic sanitariums for the treatment of nervous and mental diseases.

"The domain of osteopathy in disease is solely that of freeing obstructed circulation of blood and nervous force. Knowing the minute anatomy of the spinal cord, its nerve centers and ganglia, the osteopath, by his educated, skillful touch, locates and corrects the inhibition, and the organ begins again its natural, normal duty.

Course of Study.

"This 36 months course of study comprehends all that a graduate in medicine is required to study, except materia medica, pharmacology and practice of medicine, or therapeutics; in place of these, the osteopath is required to study principles of osteopathy, comparative therapeutics, practice of osteopathy, applied anatomy and X-radiance. The principle difference in the mode of teaching the same truths rests merely on the difference in theory of the causation of disease. Osteopathy is based on the fundamental proposition that health depends on the structural integrity of the body, and that disease of practically every character is caused by bony, ligamentous or muscular lesions, and their interference with the circulating fluids of the body.

"In order to present a proper resume of the subject, it is desirable to know some part of the romantic history of its founder, Dr. Andrew Taylor Still, and look at him in his capacity as one of the great original thinkers and reformers in medical science. He was the first to state in unequivocal terms, the theory of the immunity of the body; he was the first to announce the fact that the sacro-iliac joint was a moving, not a fixed articulation; to him belongs the credit of bringing all disease under one great law, that of body resistance.

Origin of Science.

"It was about 40 years ago that Dr. Still announced that he was done with drugs and had elaborated a successful method of drugless healing. The struggle which followed was long and bitter; he alone knows what that eighteen years of apparently hopeless fighting against all manner of odds meant. He was ostracized by the medical profession, deserted by friends and relatives, and lived in abject poverty. The business people of the town delivered his goods after darkness to keep from losing customers; the churches of the town, which was afterward put on the map through his healing art, convened in a union prayer meeting to pray that God would take away from their midst this man who was doing the devil's work amongst them.

"After his years of dishonor, toil and disappointment, fame and honor came to him, and the town of Kirksville, Mo., became a Mecca for the ill and infirm from all over the world.

"To the uninitiated, osteopathy and osteopaths and their methods seem strange, but the individual with the slightest mechanical sense can appreciate the logic of this science with a brief, pointed explanation, suited to his or her individual case. The osteopath is, in fact, a physical engineer; he does not claim to be infallible, he does not claim to do the impossible, or that which is organically not feasible, he does not claim to bring life back to a dead cell or perform miracles; but he does claim that he assists Nature in her work of up-building, nourishing and stimulating the body to its highest efficiency, as no other system of healing has ever done before. The fundamental principle on which osteopathy is based is: 'The Integrity of any organ depends on its nerve and blood supply.'

The osteopath's aim is to restore function by means of proper circulation; when this has been accomplished, nature, which has made the body self-sustaining—an entity in itself—completes her work unaided. A splendid definition is as follows: 'Osteopathy is a science which teaches that the human body is capable of producing within itself all substances necessary for the building and repairing of human tissues, providing there is no mechanical interference with the circulatory or nervous systems. Correction of such mechanical interference permits a free flow of forces and nourishment between the parts, which restores normal tissues and re-establishes the harmony of conditions and action known as health.'

CLIP THIS AND PIN

Tracings Showing Some Physiological Effects of Vertebral Movements Experimentally Produced

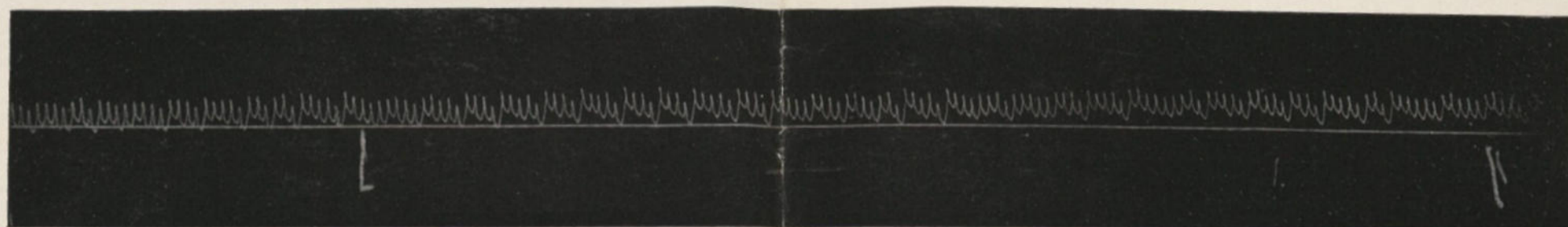


First part.

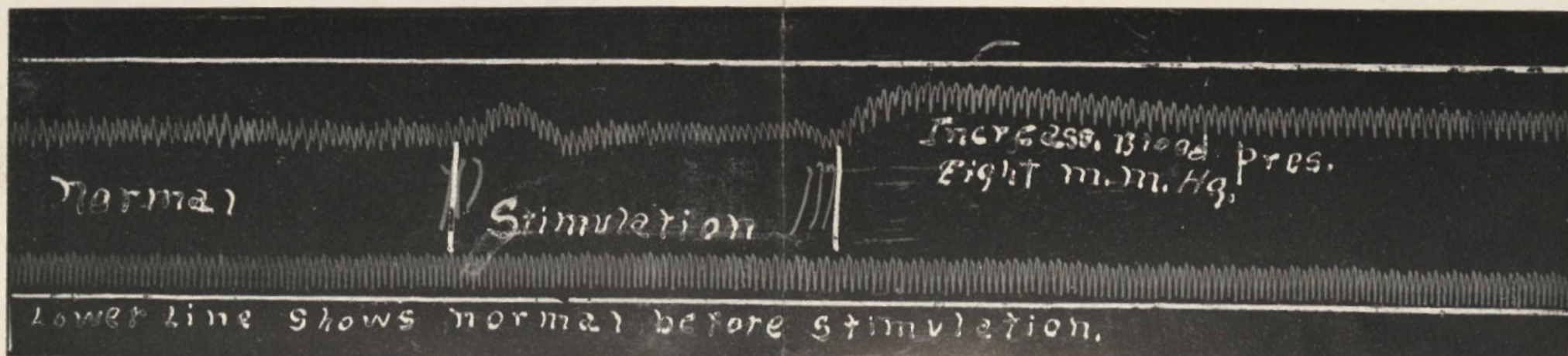
Normal tracing.

Second part.

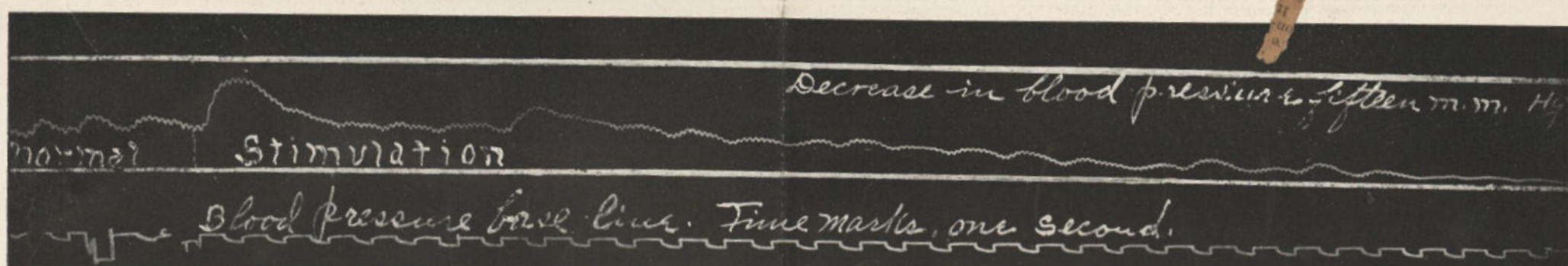
TRACING No. 1.—Showing effects of movements of limbs without fixation.



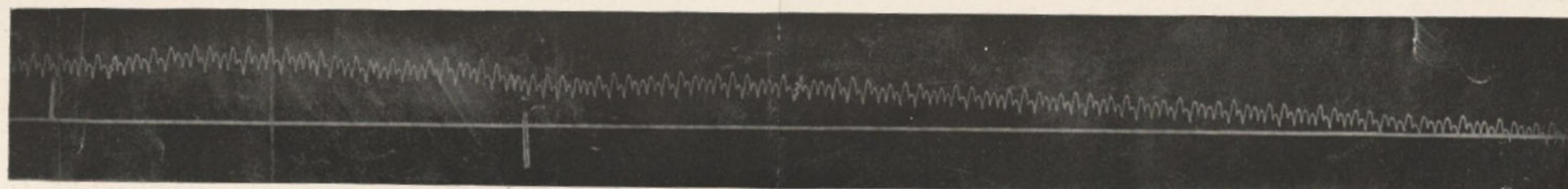
TRACING No. 2.—Showing effects of flexion without fixation.



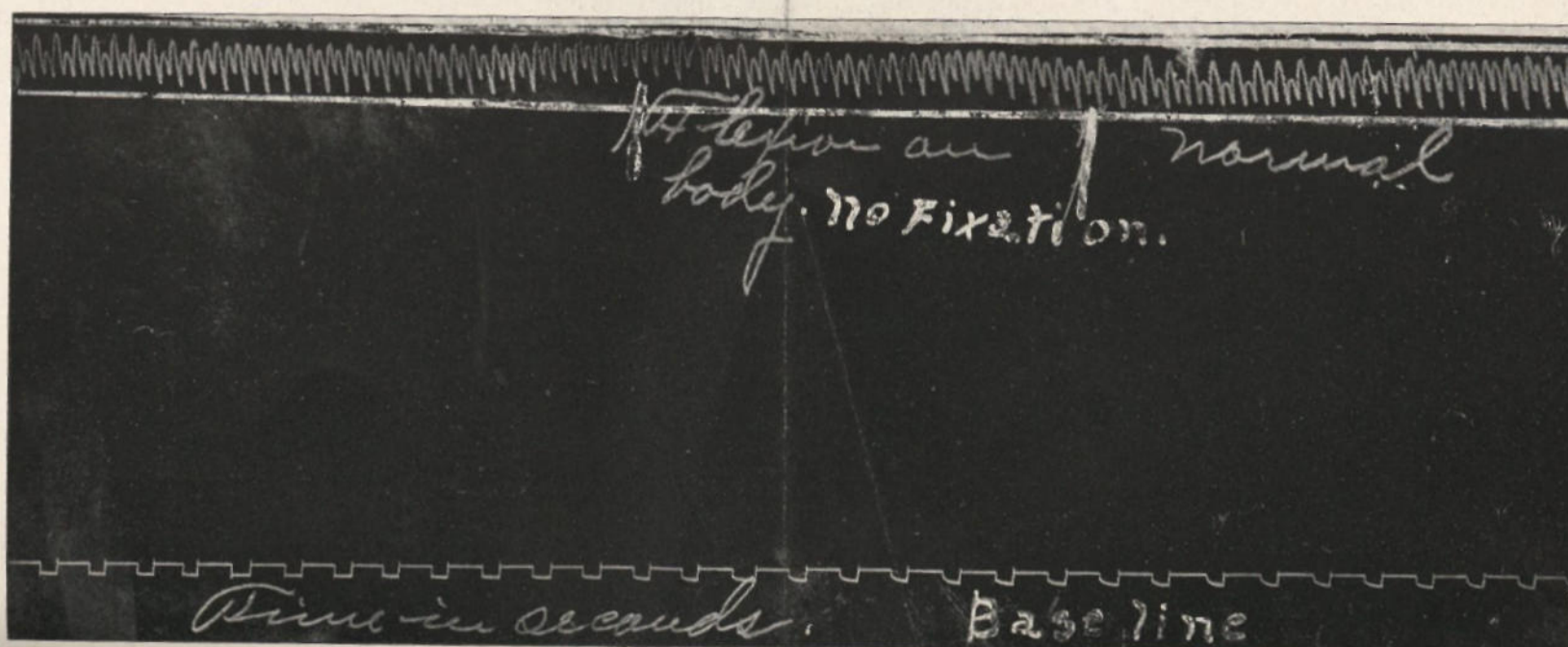
TRACING No. 3.—Showing effects of hyperextension of spine with fixation in mid-dorsal region.



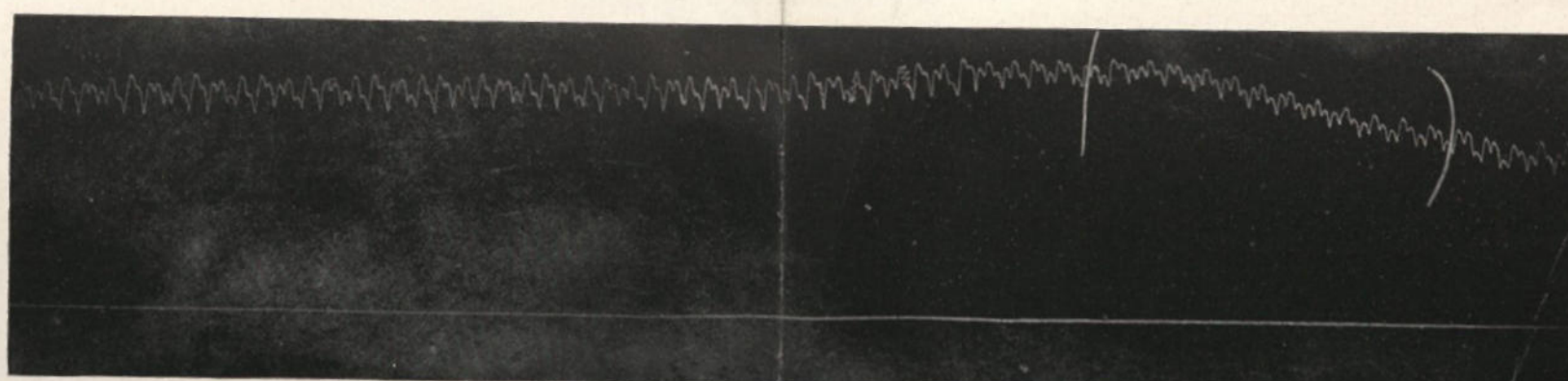
TRACING No. 4.—Showing effects of hyperextension with fixation at 12th dorsal.



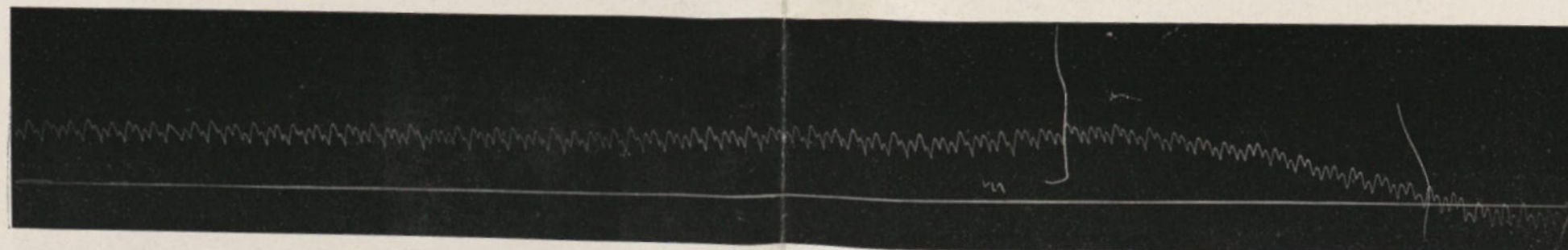
TRACING No. 5.—Showing effects of constant pressure applied to upper lumbar region.



TRACING No. 6.—Showing effects of constant pressure applied to mid-dorsal region.



TRACING No. 7.—Showing effects of rotation of caudal end of animal with fixation at 6th lumbar.



TRACING No. 8.—Showing marked decrease in blood pressure as a result of rotation of caudal end of animal, with fixation at 3d lumbar.

LAW OF JOINTS

In the degree that the flexibility and activity of a joint (including spinal joints) falls below normal, so will the blood supply to that joint and adjacent tissues (including the segments of spinal cord in relation) be impaired.

J. V. McManis, D. O.



Memorial to Dr. A. T. Still

Dr. F. G. Cluett

Fellow Osteopaths and Friends:

We are gathered here this morning to pay our tribute of love and affection to the memory of our departed leader, Dr. A. T. Still, one of the world's noted benefactors of the human race, and the founder of the Science of Osteopathy.

In order to obtain a true perspective and to fully appreciate and understand the causes which impelled him to renounce drugs, as well as to give us an insight into the character of the "Old Doctor," let us briefly review the early history of this dear old man and of the science he founded.

Dr. Still was born August 6, 1828, in Virginia, his parents being Abram and Martha Still. His father was a physician and a Methodist preacher, being appointed, in 1837, as the first Methodist missionary to North Missouri. Dr. Still's education during the early years of his life in Missouri is said to have been uncertain and primitive in character, owing to the pioneer condition of the country at that time, and he was forced by these circumstances to imbibe what knowledge he did gain largely from his contact with nature.

He grew to young manhood here, was married, and in 1853 went with his first wife and his father to Kansas and located among the Shawnee Indians, where he assisted his father in doctoring the Indians, his only preparation for the work consisting of the instruction he received from his father and reading the few books available, his success as a practitioner being about the average of that time. Dr. Still, however, was always interested in the mechanics of the human body, and it was this fact, no doubt, which later led him to eschew the use of drugs and become the founder of the Science of Osteopathy.

In 1857 he was a member of the Kansas State Legislature, and in 1861 we find him a surgeon in the Ninth Kansas Cavalry of the Union Army, being honorably discharged in 1862. He then joined the Kansas State Militia and served as major until 1864.

In 1865-66 he attended the Kansas City Medical College, although even at that early date he had begun to lose faith in drugs, until in 1874 he formally announced his discovery of the principles of Osteopathy. At this time he was living in Baldwin,

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Trusses, Apparatus for Elevated Feet and Shortened Limbs and all kinds of Brace Work for Deformities. Crutches and Elastic Goods.



312-314 W. Seventh Street, DES MOINES, IOWA

Kansas, but so great was the opposition there to his new doctrine that he left Kansas and went to Kirksville in 1875, where he found a few friends who believed in him and helped him. He continued to practice his new system of healing, traveling from place to place, lecturing and treating those in the audience who were afflicted. In 1887 he finally settled in Kirksville permanently, but continued to make trips to the surrounding territory, expounding the principles of the new system. These trips and the many remarkable cures he made gave Dr. Still such a wide reputation that patients began flocking to Kirksville for treatment.

In May, 1892, the American School of Osteopathy was incorporated, opening in a little one-story frame building, the faculty at first consisting of Dr. Still and Dr. Wm. Smith, of Edinburgh, Scotland. This, in brief, is the early history of our revered leader and of Osteopathy. But during these early years of the founding of his new system of healing, Dr. Still met with a great deal of hardship. He was denounced by the medical profession of that time, and deserted by friends and relatives, even his own brothers, who were

medical doctors, denouncing him and calling him a crank and a dreamer. But Dr. Still, true to the faith that was in him, kept steadily at the task of developing his science, until at last fame and recognition came to him.

Dr. Still lived the allotted three score years and ten, and added thereto nineteen years more, in which he saw the science of Osteopathy being practiced by thousands and its principles accepted by millions. At his death resolutions of sympathy were passed by the Commercial Club of Kirksville, the faculty of the Normal School, the Masonic Lodge, a large number of newspaper editors, and also by several medical journals, which but a few years back were calling him crank, fanatic, humbug and other pet names. And the mayor of Kirksville at the time of his death, requested that the business men generally close their places of business during the funeral, speaking of him as one of our foremost citizens.

But it was not always thus. I recall a little incident that happened over twenty-three years ago. Dr. Still was demonstrating some point on the blackboard before the class,

when he turned around and with his quaint smile said: "I was invited to a banquet last night." He then turned to the blackboard, and after making a few strokes, he turned around to the class again and said: "Ten years ago they had a banquet here. I wasn't invited then."

Incidents without number are told of the generosity of Dr. Still, and many students and patients have been helped by him. He had a heart that fairly overflowed with charity and love and kindness for his fellow man. Some of these benefactions I have personal knowledge of, having met and talked with the recipients.

In 1895 I was in Kirksville on a visit for a day. In the afternoon, before leaving the Infirmary I met the "Old Doctor" in the hallway. I told him I was going back to St. Louis that night; that I had been looking over the school, and that I had about determined to enter the class and study Osteopathy. With that same quaint smile of his he held out his hand and said: "Well, Cluett, it's just as easy to be a fool as a philosopher." And I am not quite sure what class he meant to put me in.

On another occasion, after I had

entered the school, I was compiling a pamphlet for the use of one of the graduates who had gone out to practice. In those days there was no literature on Osteopathy such as we have now. Every practitioner had to furnish his own. There was one statement I had made of which I was not quite sure. One day I met the "Old Doctor" on the street and asked him about it. He read the statement and said it was all right as far as it went, but that I should add these words: "That Nature furnishes within the body all the remedies necessary to cure disease." I have often wondered how many of us realize the deep significance of that fact, which to the "Old Doctor" seemed so plain.

And Dr. Still seemed to have had that rare gift of what is spoken of as the "sixth" sense. Such individuals are rare, but they have been known to exist in every generation. He has been known to diagnose obscure cases without even putting his hand on the patient, and without even being near the patient or hearing one word of the history of the case. But in most cases his diagnosis was made after a most careful and painstaking physical examination, and that is the

method he taught his students. He realized full well that not everyone was gifted with the psychic sense, and he also realized that he could teach everyone to make a careful physical examination, regardless of the psychic sense, and it is this fact that made possible the practice of Osteopathy by anyone who has eyes to see and ears to hear.

And in promulgating the then new theory of the etiology of disease, the theory which proclaims the fact that "structural irregularity produces and maintains functional irregularity," Dr. Still brought down upon his devoted head the scorn and ridicule of not only the medical fraternity, but also that of his friends and even his own relatives. He was laughed at, denounced as a fanatic, a crank, but he persisted, despite these adverse criticisms. And then began his fight for this child of his brain, Osteopathy, a fight that at times reduced itself to the serious question of providing the bare necessities of life for his growing family. Gradually, however, the fact that cases of long-standing illness were cured began to assert itself, and his financial troubles

(Continued on page fifteen)

Accession No. 64919

Memorial to Dr. A. Still

(Continued from page eleven)

became somewhat lessened, but it took long years of struggle to reach this point, and a still longer time before his theories were generally accepted. And through all this bitter fight he remained the same sweet, gentle personality that we knew in later years. When he was reviled, he reviled not again, but seemed to say as did that other historic character, who, when He was reviled said: "Father, forgive them, for they know not what they do."

And the "Old Doctor's" words and actions seem to prove beyond a doubt that he believed in the future life beyond the grave. Only a short time before the death of Mrs. Still he expressed in plain words his belief that death was but the fulfilling of a natural law; a change from mortality to immortality, and bade his "boys and girls," as he liked to call us, not to worry because of the impending loss of his wife. To him the age-old question "If a man die shall he live again?" had been answered in the affirmative. He had not fear of the change called death. To him it was simply a natural law, and as

such he accepted it.

In the passing away of our beloved Leader, we, his followers, feel a distinct sense of loss, and yet, we should realize that it is only the body that has passed away. If we believe in the promises of the Bible, his spirit still lives, and is with us today and always. And in passing on, he has left with us not only the priceless heritage of Osteopathy, but also his example of persistence against heart-breaking discouragements, as well as his oft-repeated admonition to ever "carry on" the work he had but begun. May we ever be faithful to the trust reposed in us.

And in bidding good-bye to all that is earthly of our beloved Leader, let us do so with the fervent hope that all is well and that the parting for awhile, and that when the great which now seems so hard, will be but change called death shall come to each of us, we shall, as willingly as did the "Old Doctor," "go not like the quarry slave at night, scourged to his dungeon, but sustained and soothed by an unfaltering trust, approach the grave like one who wraps the drapery of his couch about him, and lies down to pleasant dreams."

F. G. CLUETT.

JOURNAL OF OSTEOPATHY.

VOL. I.

KIRKSVILLE, MISSOURI, AUGUST, 1894.

NO. 4.

DR. A. T. STILL AND OSTEOPATHY.

BY P. F. GREENWOOD.

There are men who seem created with a peculiar adaptation to some particular branch of science and to follow it as if by instinct. Yet there is enough in store to employ all such men as may ever live. Each plant has its parasite and each created thing its lover and poet. It would seem as if each waited, like the enchanted princess in fairy tales for a destined human deliverer. In the history of discovery each ripe and latent truth seems to have fashioned a brain for itself. Each material thing has its celestial side; has its translation through humanity into the spiritual and necessary spheres where it plays a part as indestructible as any other. Another beauty of science is that its range is unbounded, that there is room enough in its broad field for all discoveries that can ever exist. Not only does science give all scope for the imagination, and possess all the sublimity which belongs to poetry and eloquence, but its practical good is immeasurable and to its devotees we are indebted for all the conveniences and elegancies of life.

We cannot escape difficulty, whither we travel we have obstacles to meet. Difficulties invigorate the soul—I do not mean the difficulties of indolence and disobedience—these are withering, blasting curses; but the difficulties of industry and obedience.

That the brain of Dr. A. T. Still was fashioned for the purpose of unfolding, developing, practicing and teaching the science of Osteopathy, I have no doubt. To him the struggle has been hard and long. Difficulties have been present to confront him all along his journey, but he has from them gathered strength; concentrated all his forces and pressed forward and onward. Poverty, professional jealousy, doubting, distrustful public opinion, have all stood in his pathway. Despite all these he has given to science a discovery in the healing art heretofore unknown.

Whatever may be your opinion as to the merits or demerits of this healing art, does not alter the fact that there are many intelligent ladies and gentlemen who boldly affirm that they have been restored to health by him, without the use of medicines and that too, after their cases have been pronounced incurable by the best and most scientific prac-



DR. A. T. STILL.

tioners of the best medical schools.

Twenty years ago Dr. Still was scarcely known in this community. He can to-day count on his fingers ends the friends upon whom he then could call as friends with any assurance, that his requests would be granted. At that time poverty beset his pathway, but by hard study and perseverance he forged ahead; by reason of his great will power and determination to succeed he overcame all obstacles; little by little he climbed the rugged road. Dismayed at nothing, courting rather than shunning opposition from his professional brethren, he applied himself more assiduously to the practice and study of his favorite theme. At first he had not the means to furnish even an office, he practiced this great art in rather a peripatetic manner, visiting different localities in Missouri and Kansas. Soon his name began to be called by some in derision, by others in a doubting tone, and by a few in praise. Finally a few remarkable cures were made by him; some at his home and some abroad. By degrees he began to be appreciated, soon he found himself able to buy a home to shelter himself and family in Kirksville. Steadily and gradually has the reputation of Dr. Still grown and his practice has increased from that small beginning when the patients came to the house and were treated on the porch, on the lawn

or wherever a place could be found. Many an unfortunate has had a shoulder or a hip set, or need against a tree, and gone on his way rejoicing. It is related of a poor woman who came with a dislocated hip, that she had her hip set as she lay in the wagon which brought her.

As time went on he succeeded in arranging a few rooms in a cottage across the way, in which he and his sons could treat the sufferers who came to him. Others gathered around him to learn this new method, and soon a school was established. As the numbers were increased more assistants were required, until an efficient corps of operators have been educated to successfully carry on the business.

Another year passed by and the rooms first occupied were inadequate for the work; another move was made across the street to a larger cottage which was rented and additions made until there were ten rooms which are kept in constant use. And yet today they are over crowded—the necessities of the practice require more room which will soon be supplied.

On the 6th of August 1894, the 66th birthday of Dr. Still, the ground was broken for a large and commodious building which is now being pushed to completion as rapidly as men and money can do it. The new building will be constructed of brick, two stories high and a basement. The interior furnishings will be of natural wood. It

is to be furnished with a hot water heating apparatus, hot and cold water throughout, electric lights and all modern appliances for comfort and convenience. The building will be 38x88 feet. The first floor will be divided into office, reception and operating rooms. The second floor will be made into a large lecture room for general assembly purposes with smaller rooms for class use.

This building which may well be called the Temple of Anatomical Engineering, will be a fitting home for the future development of this great science.

While Dr. Still has secured by his industry, perseverance and application, a reputation in the healing art, that will live on through the cycling ages to come, yet he cannot be accused of using his special and peculiar knowledge for the mere purpose of accumulating wealth. While he has accumulated enough to lift him above want; he is in moderate circumstances only. Having overcome poverty himself, he has never forgotten the lesson it teaches. The suffering of a fellow being excites in his generous nature and manly heart, sympathy and kindly feeling—his hand and heart are always open to the poor. Situated as Dr. Still is and has been for the past five years; the ordinary man, would today count his wealth by hundreds of thousands. Yet it is true he cannot calculate his wealth beyond the first ten thousand.

In twenty years of his life, this one man has wrought a great change in our little city. Kirksville is known today by thousands who would never have known it had it not been for Dr. Still. He is doing more for Kirksville today through Osteopathy, to build it up and call people into our midst, than all other institutions combined. More money comes to us through this channel than all others. Do we properly appreciate this man? I fear not. Genius can only be distinguished from other gradations of mind by what is necessarily peculiar to it by the greatness of its powers.

The foundation of Osteopathy is solid, its cornerstone is truth, its superstructure is relief to afflicted and suffering humanity—without these it could not exist. For what he has done and the relief he has given to the human family, he has the thanks of his grateful patients and students. For what he has done and is doing for the home of his choice, all good citizens of Kirksville, ought ever be ready to accord to him and his discovery at least a truthful statement of his integrity, honesty and fidelity in all he professes to do.

'Tis a general fault "in physis" unhappy men as we are, we spend our days in unprofitable questions and disputations, intricate subtleties about "moonshine" in water, leaving in the meantime those chiefest treasures of nature untouched. The best medicine for any disease is to be found in a year.

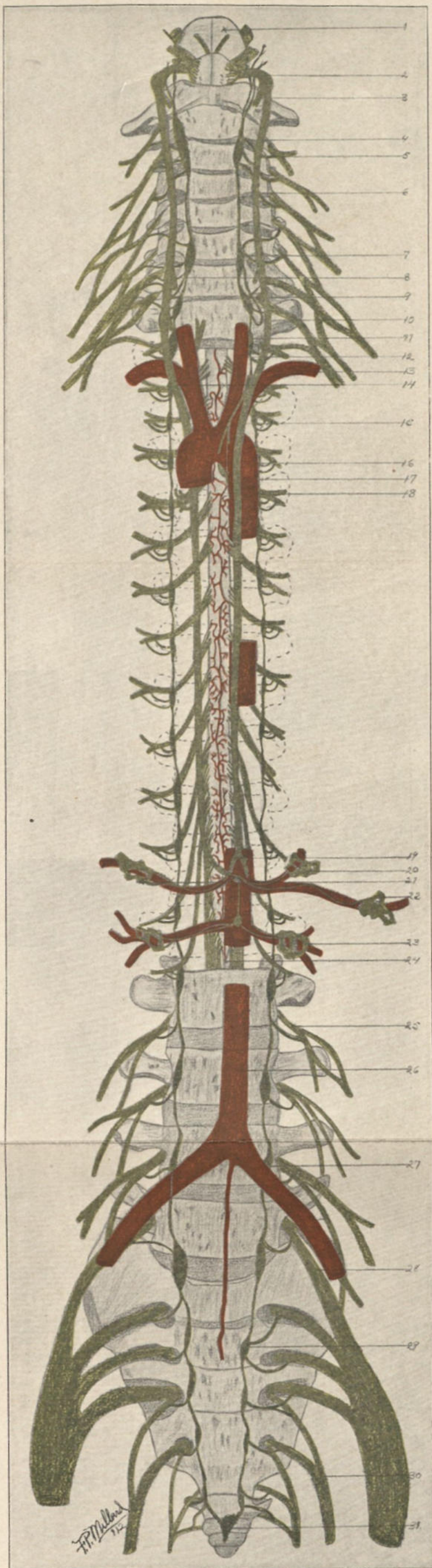


PLATE II.—PNEUMOGASTRIC CONNECTIONS. 1, Medulla; 2, ganglion of trunk of the pneumogastric; 3, superior laryngeal branch; 4, superior cervical ganglion; 5, second cervical nerve; 6, left pneumogastric; 7, middle cervical ganglion; 8, superior cervical cardiac ganglion; 9, inferior cervical ganglion; 10, pneumogastric; 11, first thoracic; 12, left common carotid; 13, left subclavian; 14, right recurrent laryngeal nerve; 15, inferior cervical cardiac branch; 16, aorta; 17, cardiac branch from left recurrent laryngeal nerve; 18, pulmonary plexus; 19, coeliac plexus; 20, gastric branches of vagus; 21, hepatic plexus; 22, splanchnic plexus; 23, renal plexus; 24, termination of spinal cord (filum terminale); 25, second lumbar nerve; 26, abdominal aorta; 27, left common iliac; 28, lumbo-sacral cord; 29, sacral ganglion; 30, small sciatic; 31, ganglion impar.

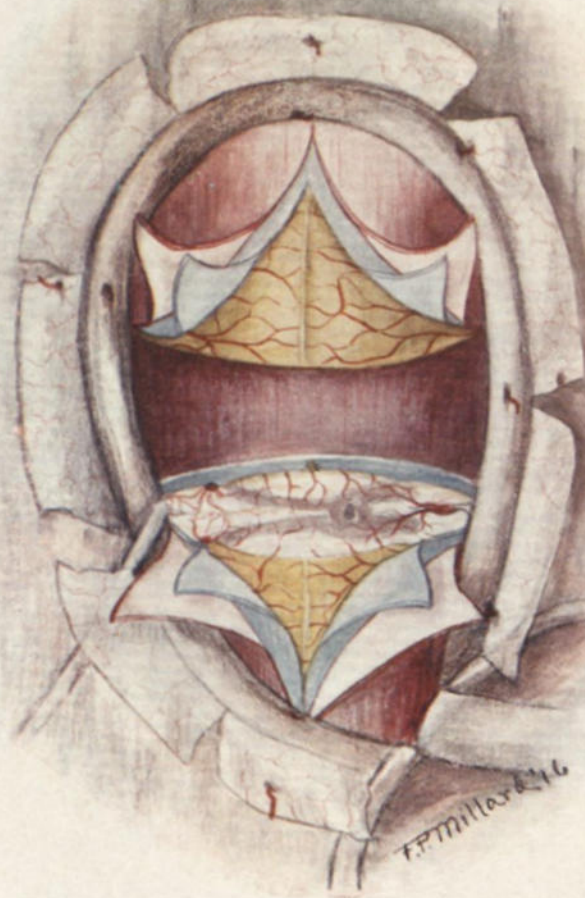


Plate II

Intervertebral foramen with the periosteal lining extending into the vertebral canal peeled back. The membranes are also rolled back to expose the cord. A cord segment is removed to show the vascularization of the white and grey matter. (Schematic)

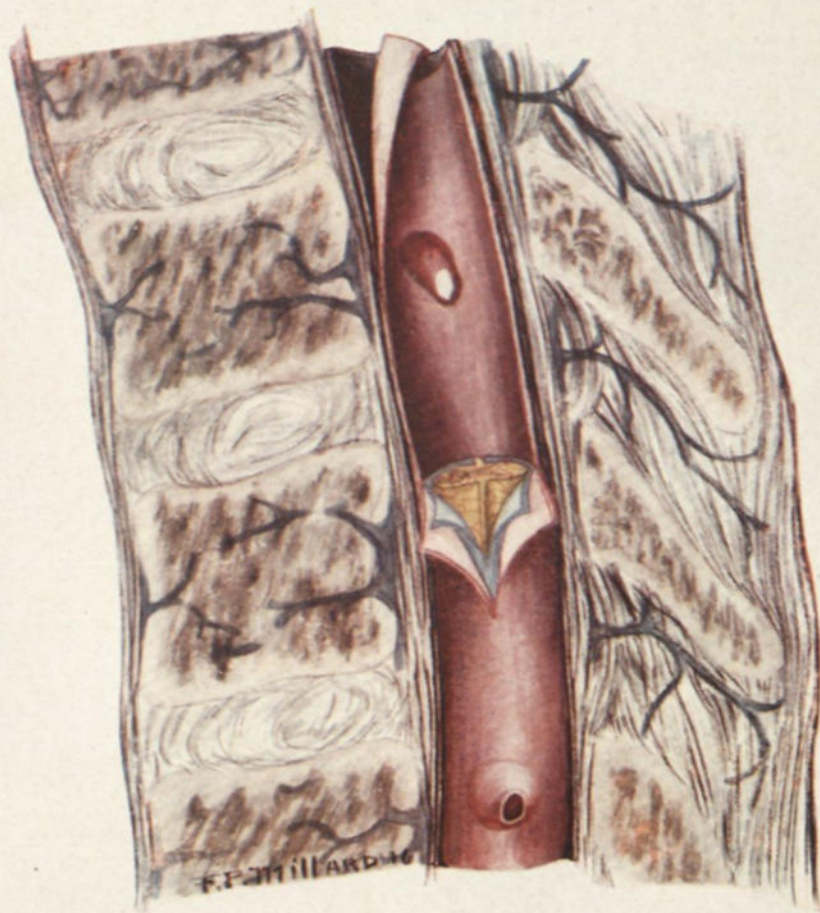


Plate III

Vertical section of the vertebral canal with the periosteal lining shown in the upper portion. The dura has been drawn away slightly. The vertebral ligaments and venous arrangement may be seen.

In the lower portion the membranes are drawn aside to expose a section of the cord. Still lower a spinal nerve with the dural sheath.

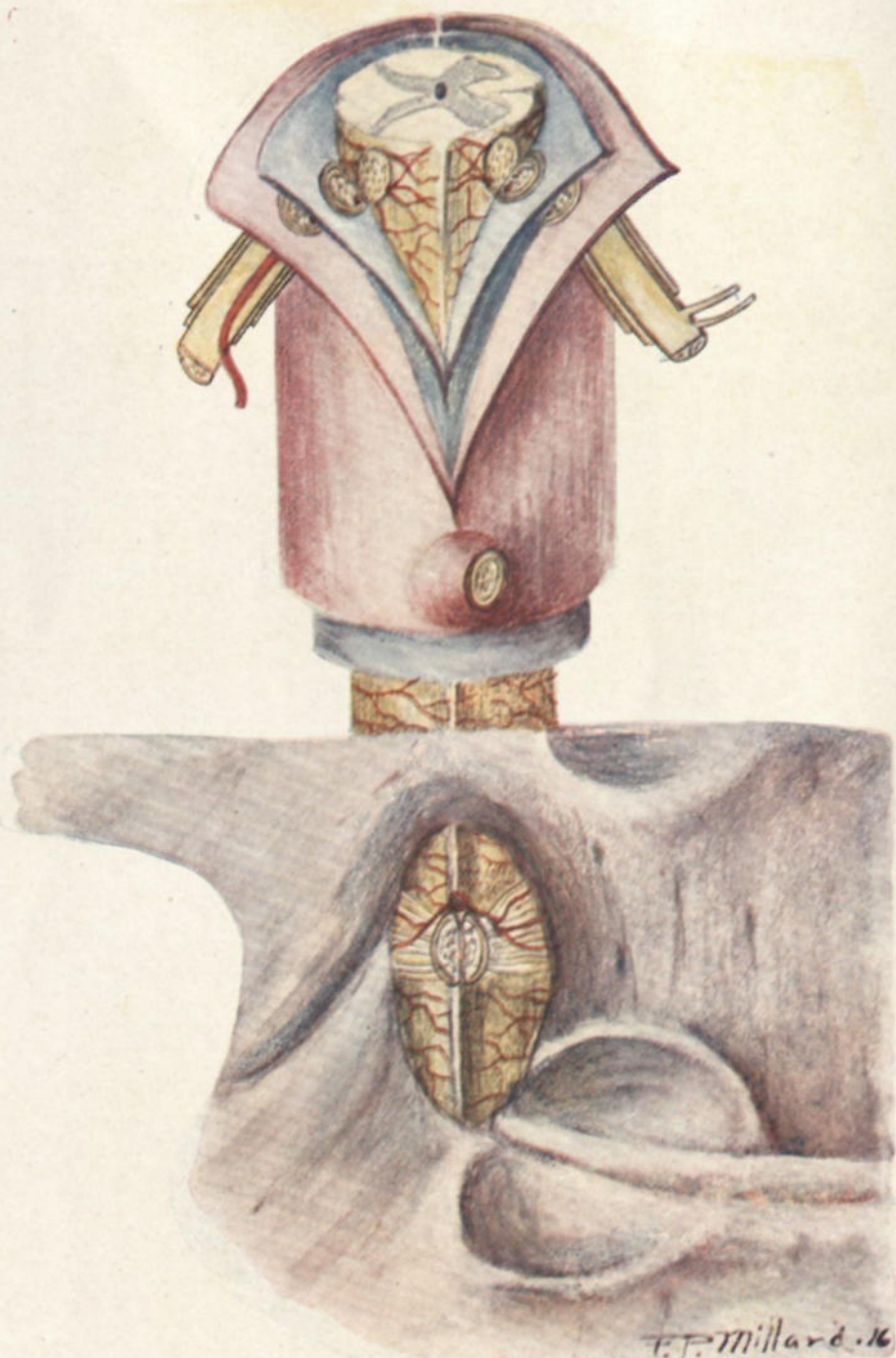
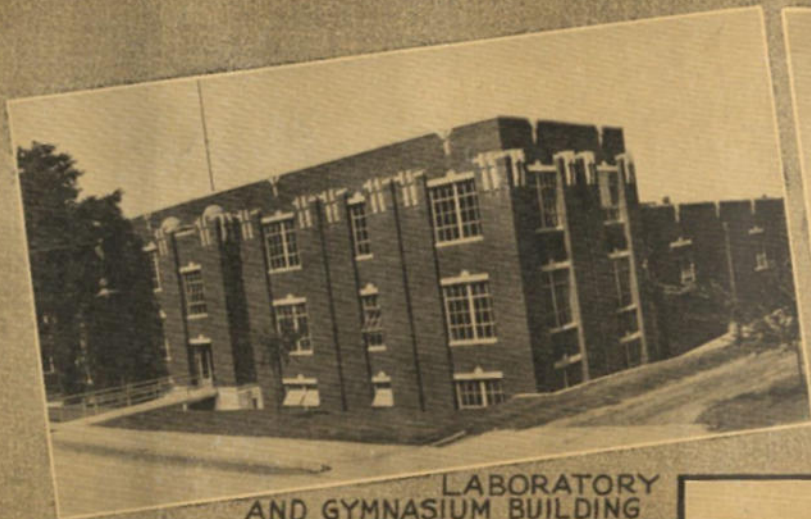


Plate. I

Upper portion; the spinal cord and membranes with the spinal nerve roots
 Lower portion, the intervertebral foramen (5th thoracic) showing the spinal
 cord in the vertebral canal, with the anterior and posterior roots. (The vasculariza-
 tion of the pia is also shewn. (Schematic).



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DR. A.T. STILL
FOUNDER OF
OSTEOPATHY



DR. GEO. H. LAUGHLIN
PRESIDENT



LAUGHLIN HOSPITAL

THE OSTEOPATHIC MAGAZINE

Vol. III

No. 9

In This Issue

Infantile Paralysis

R. KENDRICK SMITH

A. SYLL CRAIG

The Improved School Bag

ILLUSTRATED

F. P. MILLARD, D. O.

As the Twig is Bent

KATHERINE SMITH HOBBS

The Kitchen

ALICE LARBY

SEPTEMBER, 1916

Entered as second class matter February 2, 1911, at the Post Office at Chicago, Ill., as Magazine,
under the Act of Congress of Oct. 3, 1917.

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A. O. A., Orange, N. J.

Orange, N.J.
October 3, 1916.

DOCTOR:- We are preparing each month from the Journal and Osteopathic Magazine and favorable newspaper comments, an Editor's Clipping Sheet. Other large organizations get pages of publicity every week by these means. We will send the clipping sheet, and the publication where requested, to such editors as will make use of it.

If you know your local paper to be fair minded will you not see the editor, tell him of this offer, and if he wishes to be included in our mailing list send us the form appended hereto?

This is a great field if we cultivate it. If your paper uses the clippings from time to time, you profit most but all profit some.

Yours faithfully,

H.L. Chiles, Sec.

.....
American Osteopathic Assn.,
Orange, N.J.

Mr.....

of the (Name paper).....

address.....

wishes to receive press clipping sheet referred to in your letter of October 3.

Please place him on mailing list.

Very truly yours,

.....D. O.

(Address).....

Does the appointment of Osteopathic Examiners by Insurance Companies interest you?

Ans.
Do you represent any insurance company - Old Line or Fraternal? If so give names.

Ans.

FRATERNAL INSURANCE

Do you belong to any Fraternal Insurance orders? Give Names.

Ans.
Would you care to become local Examiner for any of these companies?

Ans.
If so, would you be willing to solicit the local members as to their views on your being appointed an Examiner?

Ans.
If you could get a favorable expression from your local members and we can get several hundred osteopaths active in this matter we will accomplish something worth working for.

OLD LINE COMPANIES

Have you personal or professional relations with the local agents of companies in which you carry life or accident insurance? Name Companies.

Ans.
In case you could interest friends in taking insurance, health, accident, or old line life, on condition that an osteopath were appointed local examiner, could you get Agents' help in appointing you such examiner?

Ans.
If we could interest several hundred in the effort, would you try to get a bunch of insurance that could be written if you, who know them as risks better than any other person, were appointed examiner?

Ans.
This field offers immense returns if enough of us will pledge our active support.

EMPLOYERS OF LABOR

Did you ever investigate whether the railroad, street car line, or public service corporation, or large employer of labor which has physicians and surgeons on its staff, would consider appointing an osteopath? If so give names.

Ans.
The time has come in these days of efficiency tests when such organizations will employ osteopaths on their staffs if we convince them that the osteopathic examination and treatment saves them money.
Would you be willing to join in the movement to convince them?

Ans.
If enough pledge their support the campaign will be on. We will furnish data to aid you. Are you willing to fight for a full recognition of your profession?

DOCTOR:- If interested in any or all of this work fill in the blank accordingly and return to the A. O. A., Orange, N.J.

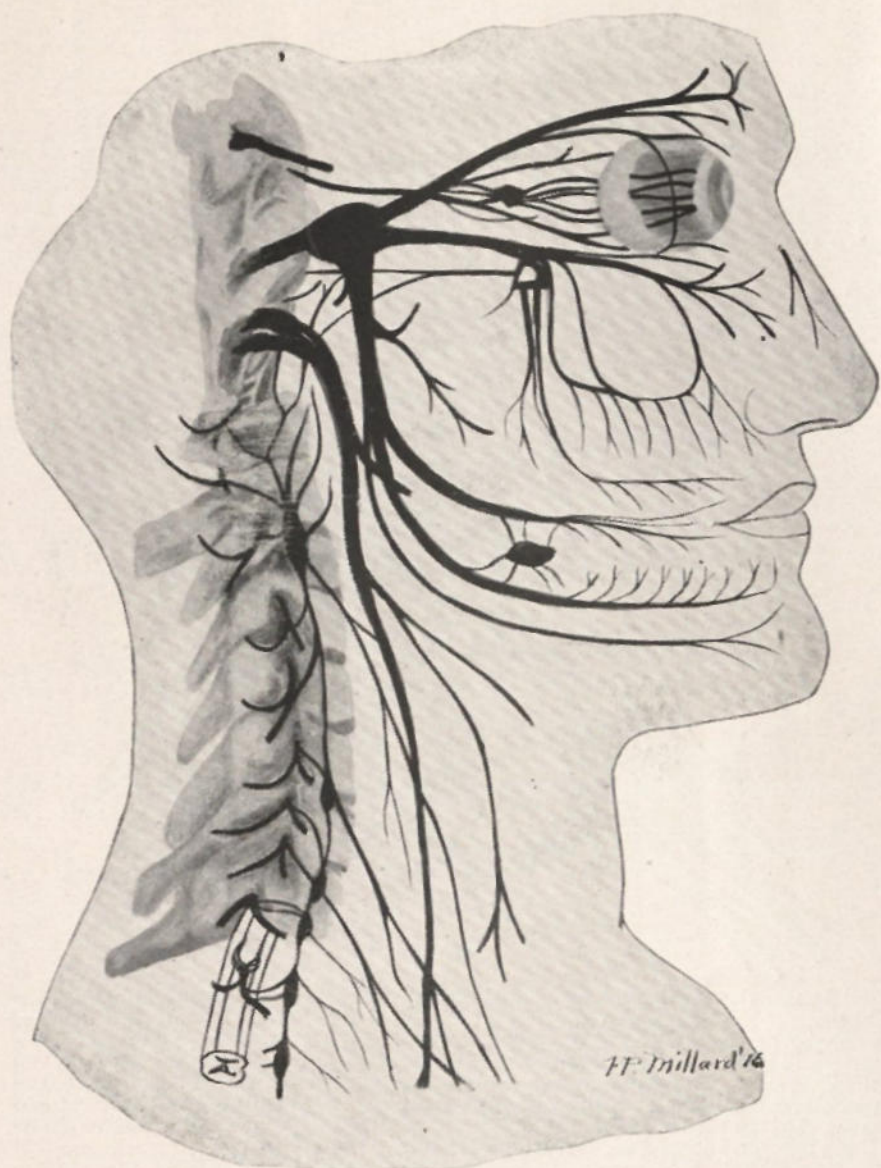


PLATE I.—The second thoracic vertebra has been removed to show the spinal cord and the first and second thoracic nerves with their rami. The sympathetic chain with its branches and carotid plexus extension affords a path for the nerve impulses referred to in the text. Some of the cranial nerves with their special ganglia attached, allow the tracing of nerve tracts to the various portions of the face and head. The vagus with its cardiac branches, as well as the cardiac sympathetic branches, are also shown.

(These two plates are loaned by the author.)

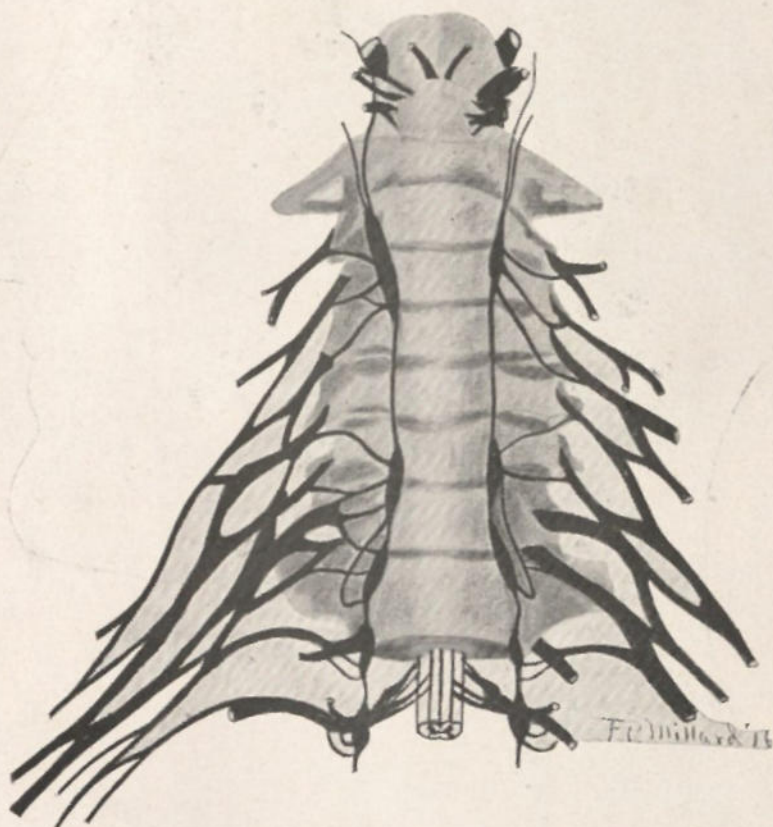


PLATE II.—Anterior view of the cervical, and first dorsal vertebra. Again the 2d thoracic has been removed to show the spinal nerve formation, and rami with the sympathetic chain. The formation of the brachial plexus with the Nerve of Wrisburg, and its communication with the intercosto-humeral of the 2d thoracic is seen on the right side. The gray rami in the cervical region connect the spinal with the sympathetic chain. The first white rami found are connected with the first thoracic and down through that region including the first and usually the second lumbar. Sometimes the first thoracic white rami are absent.

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The Osteopathic Physician

VOLUME XII

WAUKEGAN, ILL., JANUARY, 1922

NUMBER 1

Is Dr. Albert Abrams the Tenth Wonder of the World?

By J. D. McManis, D.O. Who is Now Investigating at Dr. Abrams' San Francisco Laboratories

You request that I give The OP some direct information relative to what I have learned in my investigation about Dr. Albert Abrams and his new Electronic Diagnosis and Treatment. Osteopaths know of Dr. Abrams' other research work from the name he gave it, "Spondylotherapy." This newer research of his is, indeed, a mighty big subject, one upon which I could write for many hours and still not tell half the story. Also, I have only as yet a very superficial knowledge of the subject.

In talking or writing about this subject, I have found it very difficult, indeed, to follow the advice or suggestion mentioned by a doctor whom I heard lecture in Chicago recently. He said that in reading a paper before an audience one can avoid overdoing the matter by trying to follow the advice of a lady who was having a dress made. At the time the lady was taking this matter up with her dressmaker, the dressmaker asked her how long she wanted the skirt. After studying a minute, she replied, "I want it long enough to cover the subject, and yet short enough to be interesting."

How Dr. McManis Got Interested.

Last summer, Mrs. McManis and I spent a little more than a month in San Francisco, at the time that the Stillman case was being agitated and the San Francisco papers had many articles in them regarding Dr. Abrams' blood test to determine parentage. My understanding is that he was mixed up in some way in this Stillman case. Whether this is true, I do not actually know; but I do know that quite a bit was said at the time about his blood test to determine parentage. It was reported that he could take the blood of a man and the blood of a child and tell whether the man was the father of the child. I have been informed from a reliable source that he did this in connection with a divorce suit in Frisco, and in another case in Georgia, and in both cases, his diagnosis was accepted as evidence. It occurred to me that a man who could make a test of this kind was able to do something that I did not know anything about.

Decided to Call and Investigate.

I knew that Dr. Albert Abrams was a regular allopathic physician and a man of considerable

prominence. I wondered how he would receive me as an osteopath. I thought I would go up and see. As soon as I handed my card in Dr. Abrams came right out and asked me if I was "the McManis of the McManis Table Company." I told him I was. He said, "Doctor, you have a wonderful table and I am glad to meet you—come in." We went into his private office and talked for ten minutes and I was surprised at the intelligent questions he asked me relative to Osteopathy, to the progress the Osteopaths were making, etc. Finally he said, "Is there anything in particular you have in mind that you would like to see me about?" I told him there were just two things that I wanted: I wanted to become acquainted with



DR. J. V. McMANIS

him personally, and I would like to see some of his work. He said, "That's fine, I am teaching a class now and I would be glad to have you come in and 'sit in' and observe the work."

Dr. Abrams Paid Osteopathy a Pretty Compliment.

He took me in and introduced me to his class in this manner: "Folks, this is Dr. McManis of the McManis Table Company, an Osteopath." Then he added: "I will add that an examination was held in Philadelphia, in which thirty-five medical doctors took the examination in anatomy, thirty-one of whom flunked. The examiner called the

four before him who had passed and said to them, "How is it than you four men are so well posted in Anatomy?" They replied they were graduates of the osteopathic school."

This naturally put me in a comfortable position. A little later I found that I knew a couple of his students, having met them several years before, in Chicago, at an official meeting. I had not been in the room but a few minutes when the nurse came in and told the doctor that the patient he was to examine was out in the waiting room. Dr. Abrams said, "Bring her in; it will give us an opportunity to show Dr. McManis how I make a diagnosis."

Here Starts the Story of Wonders.

He requested the nurse to take a sample of her blood, which was taken on a small piece of white filter paper, a splotch about as large as a half dollar. This sample of blood was placed in a little round instrument on a table, called the Ohmmeter. In the bottom of this instrument there was something that looked to me like magnets. I observed this before placing the blood sample on top of this machine. The doctor then drew a small magnet across the bottom of this instrument; then he placed the blood sample in this instrument and screwed the top down tightly. From this instrument there runs an insulated wire about fifteen or twenty feet long, at the end of which was an Electric plate.

Dr. Abrams has a young man who is supposed to be perfectly healthy and he acts as a subject or "control." This young man had no clothes on from his hips up and Dr. Abrams stood him facing west, telling me this was necessary because of the polarity of the earth. The young man stood upon metal plates that were grounded—that is, there was an insulated wire leading from each plate to the faucet or gas fixture. Dr. Abrams sat close to the man and suggested that I get up close, where I could see and hear well. He then percussed the abdomen, (a procedure in which he is a past-master). Turning to me, he said, "Doctor, what does that sound to you like?" I said, I did not really know, but if I were going to guess, I should say, "normal belly tone." He said, "You are exactly right." Turning to me later, he said, "Doctor, I suspect this young woman has tuberculosis."

I had observed that she had an anaemic appearance and was somewhat underweight.

His Blood Test for Tuberculosis.

He said further, "We will now test this blood for tuberculosis." Then he explained to me that blood is within itself a form of energy. In other words, it has radio-activity. My guess at it is there is an electrical energy connected up with this Ohmmeter and that the current or energy developed from whatever electrical or magnetic connection it may have, is transmitted down this wire; that in the transmission and before it leaves the Ohmmeter proper, the energy or current passes through the blood sample and if the patient, from whom the blood has been taken is tubercular, the

blood in some way modifies in energy.

Now, the electrode on the end of the wire, leading from the Ohmmeter is placed on the boy's spine; then the Ohmmeter is "turned on", as they call it. Before this was turned on, however, Dr. Abrams took a flesh pencil and marked out an area somewhat below the umbilicus and saying to me, "Doctor, this is what I call the tubercular area. I do not mean that the girl is tubercular in this part of her abdomen, or that the boy is, but this is the area through which I make the diagnosis for tuberculosis."

Then, as I said, the Ohmmeter was turned on and, as I understand it, the energy from the Ohmmeter was transmitted through this blood sample down this wire through the electrode into the boy's body.

In less than five seconds from the time the Ohmmeter was turned on, there was a change in the percussion note. In other words, it became dull.

The doctor turned around and asked me if I had noted the difference. Then he repeatedly turned on and off this Ohmmeter. As he did so, the dullness would appear and disappear, requiring about five seconds for the change to take place. He now turned to me and said, "Now, doctor, you see the girl has tuberculosis." And I told him while I saw what he did, I did not understand it. He said for me not to mind that, I would see later on.

Tests for Degrees of Advancement of Phthisis.

He added, "Now we want to know how far advanced it is." Then he explained to me that tuberculosis is a form of energy, that he had found in the advanced stages of this disease it measured as much as 15 Ohms. He then turned the Ohmmeter dial to 15 and the dullness disappeared through the boy's abdomen. He turned it back to 12, 10 and 7 and when he reached 7, the dullness reappeared. Then he said to me, "The girl has tuberculosis 7 Ohms!"

Dr. Abrams continued, "We want to know now where it is" and he made several little marks on the abdomen, three as I remember. He said, "Now, if this first area turns dull, we may rest assured it is 'bone tuberculosis.' The other two areas were referred to as 'intestinal' and 'lung tuberculosis' respectively.

You may imagine my surprise when the only one that showed dullness on percussus was the lung area.

Determines Which Side Is Involved.

Now, I have forgotten just how he proceeded to tell which side of the body the girl's trouble was on, but this also was quickly accomplished, in somewhat the same manner as the other methods described above.

Are you interested, Osteopaths?

Do I hear you say, "McManis must have gone plumb nuts!" No friends, I haven't. Keep on reading.

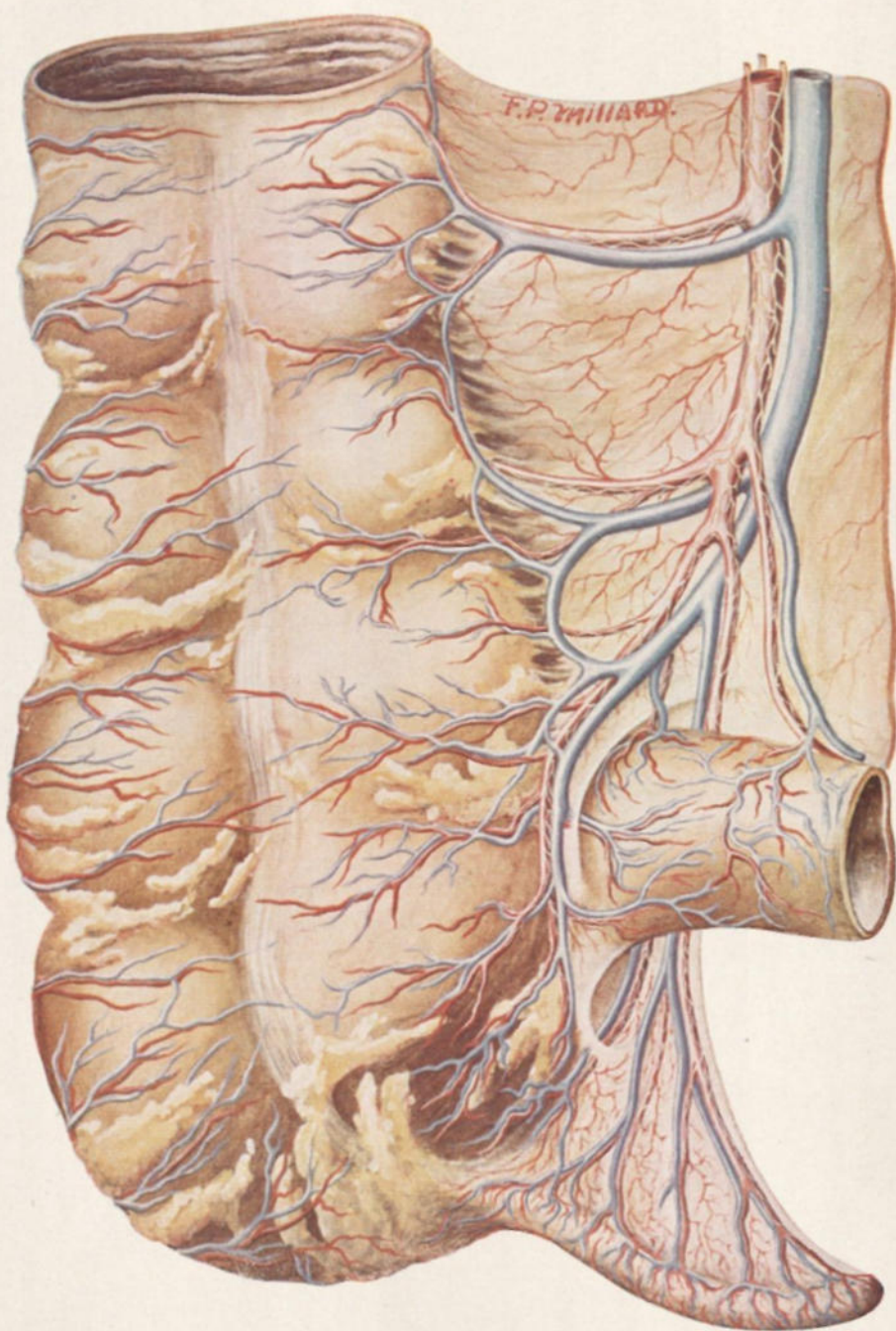
List of books, photographs, etc., a part of the exhibit illustrating the principles and history of osteopathy, received by the National Museum from Dr. George A. Still, Kirksville, Mo.

- X ✓ 8 Bound volumes of the Journal of Osteopathy, 1897-1904.
- X ✓ 6 American School of Osteopathy annuals, leather bound, 1909 and 1915-1919.
- X 6 American School of Osteopathy cataloges, 1913-1920.
- X ✓ One book "Osteopathic Diagnosis and Technique" by M. H. Bigsby.
- X 13 Pamphlets concerning Osteopathy.
- X One I.T.Z. Magazine, Memorial Number.
- X 2 A. T. Still Research Institute Bulletins, Nos. 4 & 5.
- X 2 A. S. O. Hospital Bulletins, Volume 1, Nos. 1 & 2.
- X ✓ One book "The Household Osteopath" by F. J. Feidler.
- X ✓ " " "Principles of Osteopathy" by Charles Hazzard.
- X ✓ " " "Practice of Osteopathy" " " "
- X ✓ " " "Concerning Osteopathy" by Dr. G. V. Webster.
- X ✓ " " Autobiography of A. T. Still.
- X Newspaper and manuscript articles by Drs. F. G. Cluett, Asa Willard and Asa Gordon Walmsley.
- 114 Photographs of prominent Osteopaths, with short biographies, as follows:

1. Abegglen, C. E.
2. Airey, Grace Stratton
3. Amos, Virginia Lee
4. Andrews, L. V.
5. Andrews, Mabel E.
6. Arand, Charles A.
7. Baird, Nora B. Pherigo
8. Baum, John D.
9. Bean, Arthur Sanders
114. Blackman, Wave Wilbur

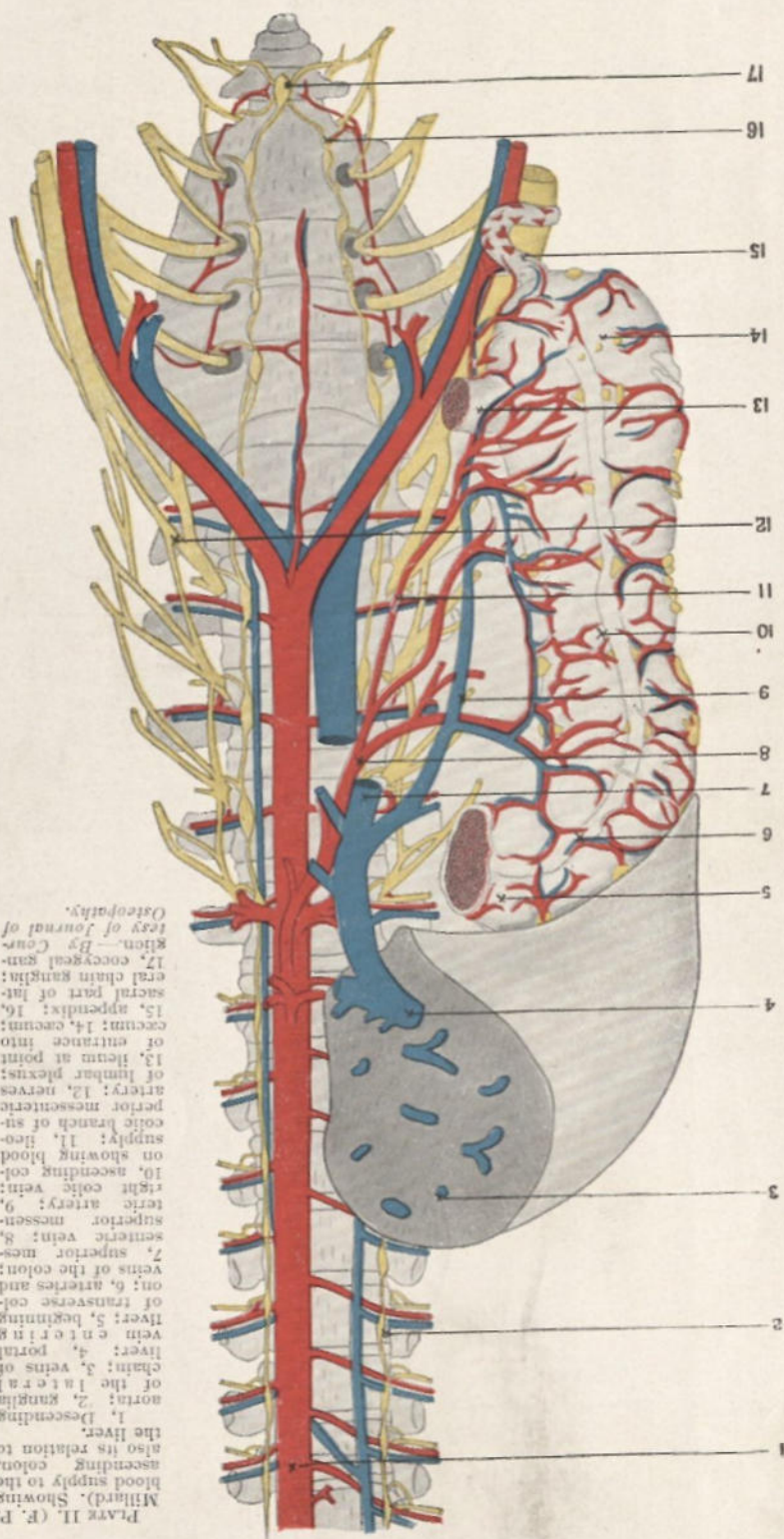
10. Bechly, F. W.
11. Beckler, Herbert S.
12. Bell, L. J.
13. Bernard, Herbert Ellis
14. Bingham, Lewis Jay
15. Bolles, Jenette Hubbard
16. Brigham, W. Curtis
17. Bumpus, John F.
18. Bush, Ida Ellis
19. Byars, William R.
20. Calvert, A. K. S.
21. Cameron, E. M.
22. Carney, E. B.
23. Cave, Francis A.
24. Champlin, Charles A.
25. Cherril, Katharine
26. Chrestensen, C. J.
27. Christiansen, C. P.
28. Clark, J. F.
29. Cluett, Frank G.
30. Collier, Carrie Butler
31. Collier, Charles H.
32. Collyer, Frank A.
33. Corbin, P. T.
34. Cox, Martha Saunders
35. Curry, Etta Elizabeth
36. Dove, Chester Earl
37. Downing, John Everette
38. Downing, John Trumbull
39. Edwards, James D.
40. Ewing, Ernest
41. Favell, Ernest J.
42. Friend, J. H.
43. Fryette, H. H.
44. Fryette, S. J.
45. Geddes, Paul W.
46. Glascock, Harold W.
47. Graves, Millie Estelle
48. Gravett, H. H.
49. Haight, L. Ludlow
50. Haley, Ruth Keown
51. Hardy, Arthur C.
52. Hawkinson, J. W.
53. Henderson, Robert B.
54. Hicks, Ella R.
55. Hildreth, A. G.
56. Ilginfritz, Melville E.
57. Johnson, John K.
58. Jones, E. Clair
59. Jorris, Albert Ursin
60. Juvenal, Howard Ralph
61. Kerr, Janet M.

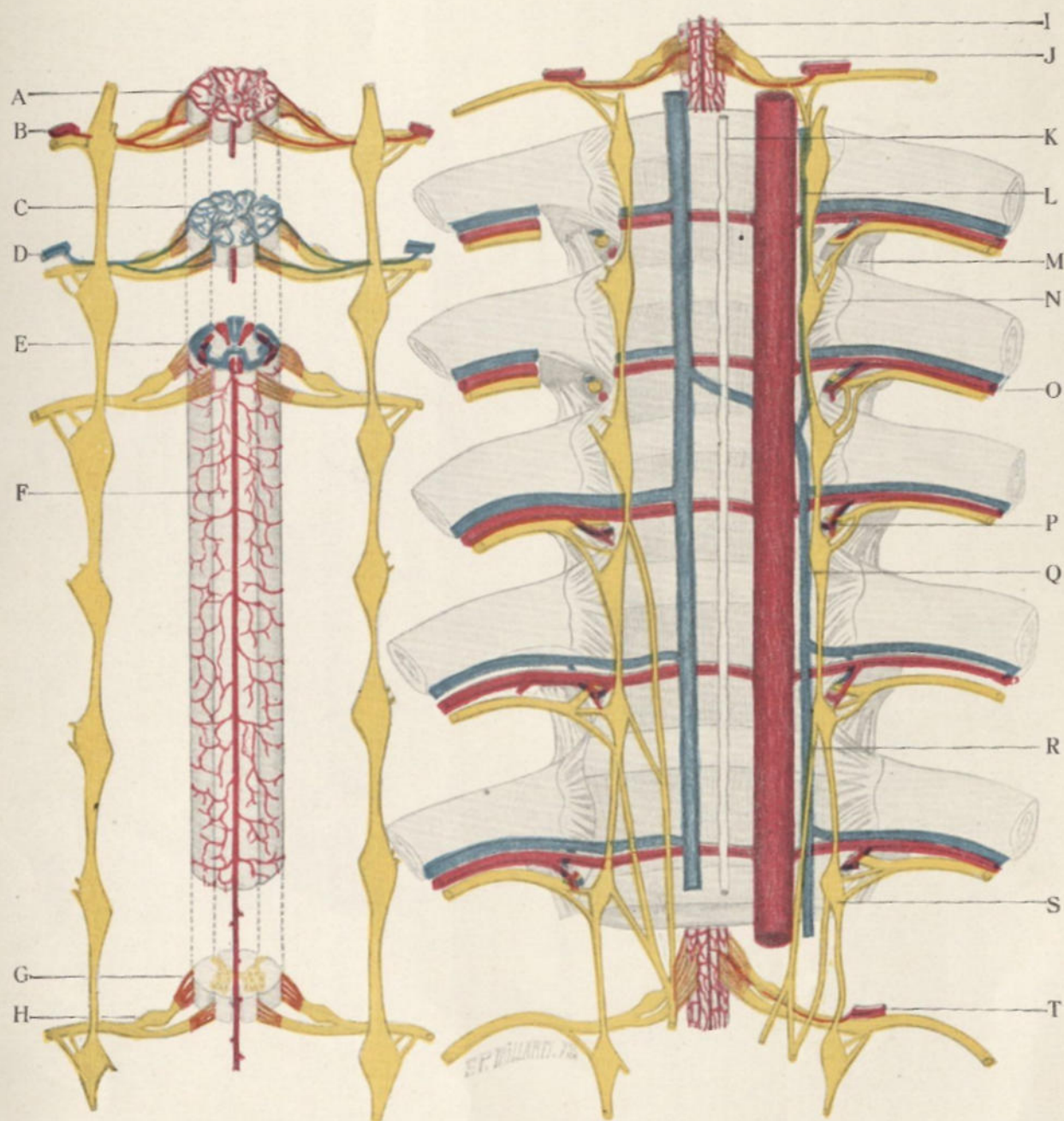
62. Kilgore, J. M.
63. Kincaid, Julia Nay
64. LaRue, Charles M.
65. McAllister, Byron F.
66. McLean, Harry Rogan
67. McManis, J. V.
68. Moore, Fred E.
69. Moore, Riley D.
70. Morgan, Lallah
71. Moriarty, J. J.
72. Nevius, Zeula Alice
73. Noland, George L.
74. Noland, Lou Tway
75. Noordhoff, L. H.
76. Nuckles, R. H.
77. O'Hagan, J. Dennis
78. Olney, Belle P.
79. Opp, Sherman R.
80. parsons, C. L.
81. Paul, Theodore
82. Petree, Martha
83. Phelps, Mabel Blake
84. Pitts, Eugene
85. Potter, Minnie Florence
86. Purdom, Zudie P.
87. Record, Blanche B.
88. Reid, Charles C.
89. Scothorn, Samuel L.
90. Shifflett, Ella Edwards
91. Slaughter, Hattie Garrod
92. Slaughter, James Taylor
93. Smith, Orren E.
94. Snyder, O. J.
95. Stewart, Frank J.
96. Still, A. T.
97. Struble, Carl K.
98. Stern, Rose Tepper
99. Thompson, C. L.
100. Thompson, Margaret S.
101. Trabue, Josephine
102. Triplett, Neva T.
103. Ulmer, Florence Alice Covey
104. Ussing, Agnes
105. Veazie, Ella B.
106. Wakeham, Jessie A.
107. Walmsley, Asa Gordon
108. Wanger, Viola Perry
109. Welch, R. R.
110. West, William
111. Wheeler, Gilman A.
112. Wilson, Norman D.
113. Wilson, Perrin Thacher



KEY TO PLATE I. (F. P. Millard). The blood and nerve supply of the appendix. The ileocolic branches of the superior mesenteric artery are shown dividing into an anterior and posterior caecal, after giving off the ascending colonic branch. From the posterior branch the artery to the appendix is given off. After passing behind the ileum this artery gives off four or five branches to the appendix and terminates at its tip. These terminal branches divide and pass around the appendix. From the posterior ileocaecal trunk a branch goes to supply the junction of the caecum and appendix. The veins follow the course of the arteries. The nerves of the appendix are shown surrounding the arterial branches. This plexus of sympathetic nerves comes from the superior mesenteric and divides with the arteries until they reach the border of the intestine and appendix. After penetrating the various coats the plexures of Auerbach and Meissner are formed.

Plate II. (P. P.
 Millard). Showing
 blood supply to the
 ascending colon,
 also its relation to
 the liver.
 1, Descending
 aorta; 2, ganglion
 of the lateral
 chain; 3, veins of
 liver; 4, portal
 vein entering
 liver; 5, beginning
 of transverse col-
 on; 6, arteries and
 veins of the colon;
 7, superior mes-
 enteric vein; 8,
 superior mesen-
 teric artery; 9,
 right colic vein;
 10, ascending col-
 on showing blood
 supply; 11, ileo-
 colic branch of su-
 perior mesenteric
 artery; 12, nerves
 of lumbar plexus;
 13, ileum at point
 of entrance into
 cecum; 14, cecum;
 15, appendix; 16,
 sacral part of lat-
 eral chain ganglion;
 17, coccygeal can-
 nula. — By Con-
 stancy of Journal of
 Osteopathy.





VASCULARIZATION OF THE CORD.

FIG. 111. (F. P. Millard.) A, arterial anastomosis; B, intercostal artery; C, venous anastomosis; D, intercostal vein; E, spinal cord; F, antero-median artery; G, post. root; H, ganglion on post. root; I, spinal cord; J, ganglion on post. root; K, thoracic duct; L, vena azygos minor superior; M, superior costo transverse ligament; N, stellate ligament; O, intercostal vein, artery and nerve; P, rami communicantes; Q, vena azygos minor inferior; R, great splanchnic; S, lateral ganglia; T, intercostal artery. (by courtesy of "Deason's Physiology.")

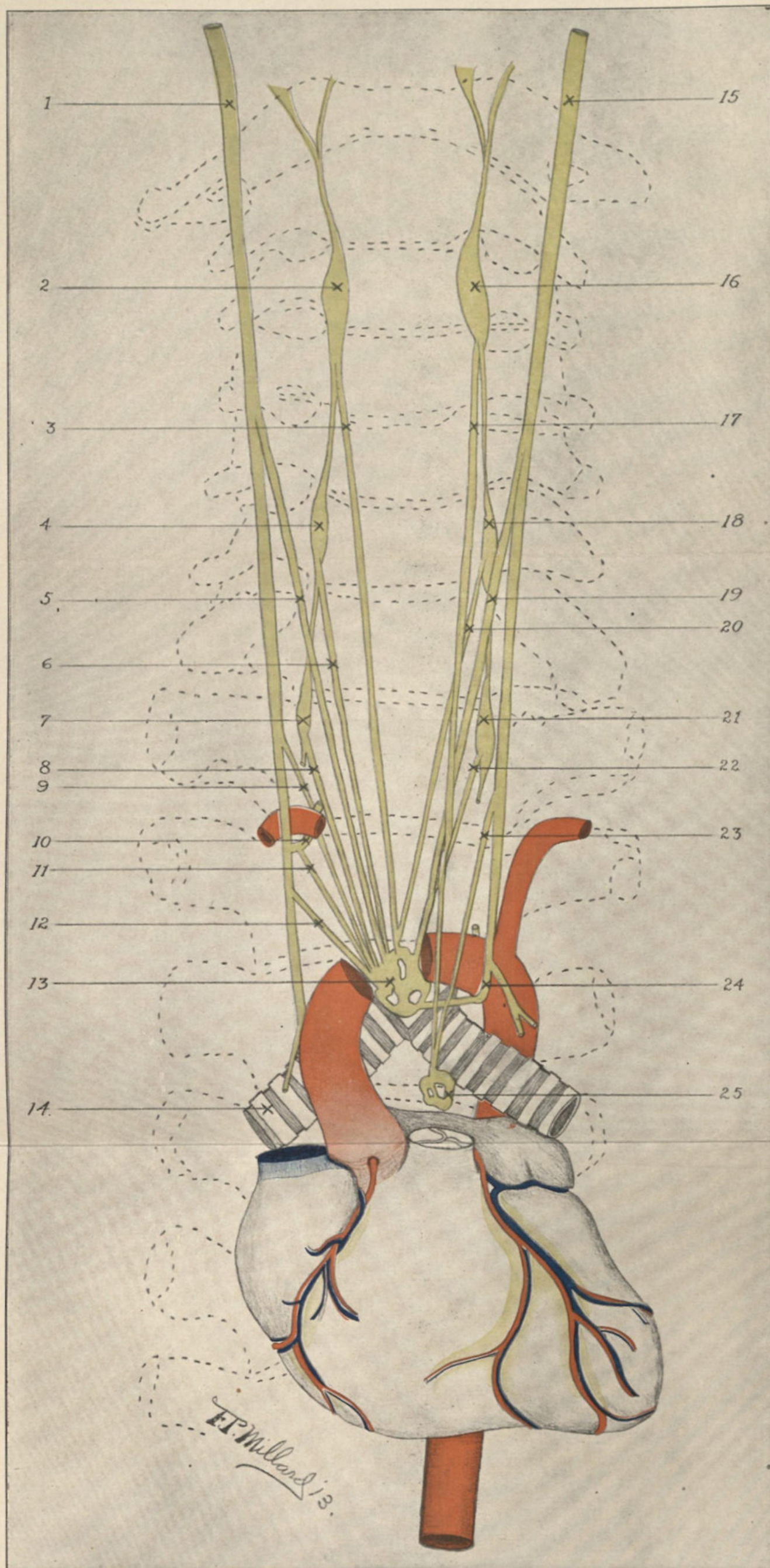


PLATE V.—NERVE SUPPLY TO THE HEART. 1, right pneumogastric; 2, superior cervical ganglion; 3, superior cervical cardiac sympathetic; 4, middle cervical ganglion; 5, superior cervical cardiac branch of the pneumogastric; 6, middle cervical cardiac branch of the sympathetic; 7, inferior cervical ganglion; 8, inferior cervical cardiac branch of the sympathetic; 9, inferior cervical cardiac branch of the vagus; 10, recurrent laryngeal passing back of the subclavian artery; 11, cardiac branch from recurrent laryngeal; 12, thoracic cardiac branch of the right vagus; 13, deep cardiac plexus; 14, right bronchus; 15, left pneumogastric; 16, left superior cervical ganglion; 17, left superior cervical cardiac branch of the sympathetic ganglion to superficial cardiac plexus; 18, middle cervical cardiac branch of the vagus; 19, superior cervical cardiac branch of the sympathetic; 20, middle cervical cardiac branch of the sympathetic; 21, inferior cervical ganglion; 22, inferior cervical cardiac branch of the sympathetic; 23, inferior cervical cardiac branch of the pneumogastric to superficial cardiac plexus; 24, left recurrent laryngeal; 25, superficial cardiac plexus.

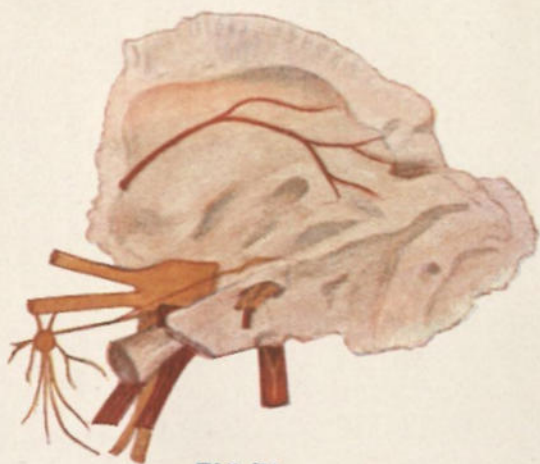


FIG. III

Drawings by F.P. Millard D.O.

Fig. 3. Right temporal bone with Eustachian tube in situ. The relation of the tube to the carotid and Gasserian ganglion is shown. The levator palati and tensor palati are attached to the tube and petrous portion. The otic ganglion lies on the inner side of the mandibular nerve, and to the outer side of the tube.

The vidian nerve supplies a portion of the tube, also the levator palati. The otic ganglion supplies the tensor palati.

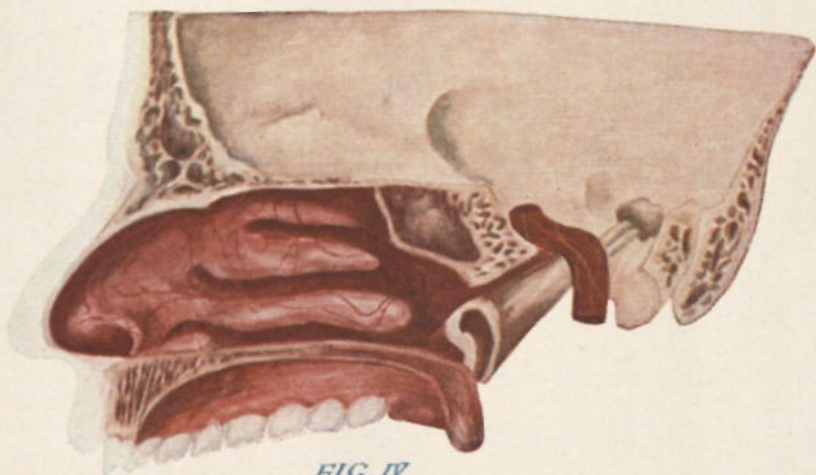
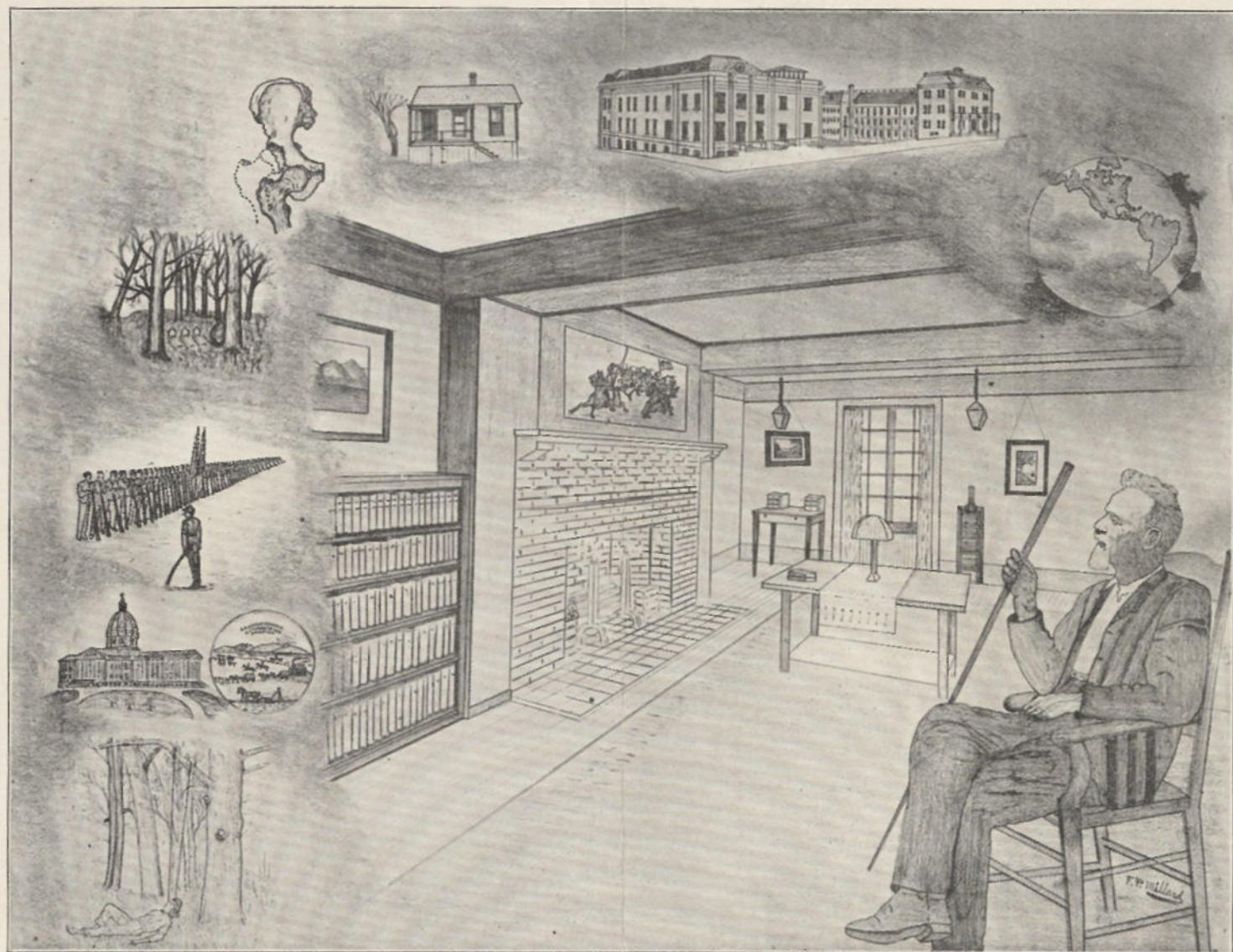


FIG. IV

Drawings by F.P. Millard D.O.

Fig. 4. Sagittal section, also cross oblique to expose the Eustachian tube. A portion of the petrous bone was chiselled away to expose the osseous portion of the tube. The tympanum was also chiselled into to show its position.

(Dr. A. G. Walmsley assisted me in making dissections II and IV.)



HIS DREAM REALIZED.