

# *Texas* **OSTEOPATHIC PHYSICIANS** *Journal*

Volume V

AUSTIN, TEXAS, MAY, 1948

Number 1



## *In This Issue—*

Duel in the Sun .....	3
Practical Application .....	5
Our Honorary Life Members .....	14
Texas Observations .....	16
Kirksville News .....	20
Texas Osteopathic Hospitals .....	21
Auxiliary News .....	22
News of the Districts .....	26
Editor's Page .....	31
Locations and Removals .....	32



# TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS

## OFFICERS

Dr. H. George Grainger, President, Tyler  
Dr. Lige C. Edwards, President-Elect, San Antonio  
D. James J. Choate, First Vice-President, Houston  
Dr. Robert J. Brune, Second Vice-President,  
Premont  
Dr. H. V. W. Broadbent, Executive Secretary  
and Treasurer, Austin

## BOARD OF TRUSTEES

Dr. J. R. Alexander, Houston  
Dr. Wm. H. Van de Grift, Austin  
Dr. J. T. Hagan, Longview  
Dr. J. L. Love, Austin  
Dr. R. H. Peterson, Wichita Falls  
Dr. George J. Luibel, Fort Worth  
Dr. Wiley B. Rountree, San Angelo  
Dr. Merle Griffin, Corpus Christi  
Dr. Keith S. Lowell, Clarendon

## PUBLIC HEALTH COMMITTEE

Dr. Phil R. Russell, chairman, Fort Worth  
Dr. William S. Gribble, Jr., Houston  
Dr. Sam F. Sparks, Dallas  
Dr. Everett W. Wilson, San Antonio  
Dr. Elmer C. Baum, Austin  
Dr. R. H. Peterson, Wichita Falls

## ASSOCIATE MEMBERS

Dr. Elmer C. Baum, Chairman, Austin  
Dr. L. V. Credit, Amarillo  
Dr. Robert E. Morgan, Dallas  
Dr. Russell L. Martin, Mt. Pleasant  
Dr. Jack Wilhelm, San Angelo  
Dr. Virgil A. Kelley, Waco  
Dr. H. M. Grice, Houston  
Dr. I. T. Stowell, San Antonio  
Dr. T. M. Bailey, Corpus Christi  
Dr. F. H. Summers, Corpus Christi  
Dr. Lloyd W. Davis, McAllen  
Dr. Willis L. Crews, Gonzales

## MEMBERSHIP COMMITTEE

Dr. Wm. H. Van de Grift, Chairman, Austin  
Dr. Wiley B. Rountree, Co-Chairman, San Angelo  
Dr. Gladys F. Pettit, Co-Chairman, Dallas  
Dr. Wm. Paul Roberts, Panhandle  
Dr. Edward M. Whitacre, Lubbock  
Dr. Hugh L. Betzner, Dallas  
Dr. George J. Luibel, Fort Worth  
Dr. Henry A. Spivey, Denison  
Dr. Ward L. Huetson, Denton  
Dr. R. H. Peterson, Wichita Falls  
Dr. Robert W. Norwood, Mineral Wells  
Dr. Milton V. Gafney, Tyler  
Dr. Russell L. Martin, Mt. Pleasant  
Dr. W. D. Blackwood, Comanche  
Dr. V. Mae Leopold, Odessa  
Dr. Virgil A. Kelley, Waco  
Dr. Loy Griffin Ballard, Granbury  
Dr. J. R. Alexander, Houston  
Dr. Archie L. Garrison, Port Arthur  
Dr. Gordon Beckwith, San Antonio  
Dr. R. E. Farnsworth, Austin  
Dr. Wm. H. Tinnerman, Aransas Pass  
Dr. Lloyd W. Davis, McAllen  
Dr. Merle Griffin, Corpus Christi  
Dr. Carl R. Stratton, Cuero  
Dr. Alan J. Poage, El Campo

## FEDERAL STATE COORDINATOR

Dr. George J. Luibel, Fort Worth

## SPEAKER OF THE HOUSE OF DELEGATES

Dr. Joseph L. Love, Austin

### Vice Speaker

Dr. George J. Luibel, Fort Worth

## BUREAU OF CONVENTIONS

Dr. J. R. Alexander, Chairman, Houston  
Dr. Louis H. Logan, Dallas  
Dr. Lester L. Hamilton, Fort Worth

## PUBLIC AND PROFESSIONAL WELFARE COMMITTEE

Dr. Robert E. Morgan, Chairman, Dallas  
Dr. Sam L. Scothorn, Vice-Chairman, Dallas  
Dr. J. F. Clark, Fund Chairman, Greenville  
Dr. Charles E. Still, Radio Chairman, Dallas  
Dr. Keith S. Lowell, Hospital Activities, Clarendon  
Dr. W. H. Sorenson, Speakers Bureau,  
Port Arthur

## VETERANS REHABILITATION COMMITTEE

Dr. Robert J. Brune, Chairman, Premont  
Dr. Robert E. Morgan, Dallas  
Dr. Robert C. Dean, Dallas

## VOCATIONAL GUIDANCE COMMITTEE

Dr. Horace Emery, Chairman, Lubbock  
Dr. Catherine Kenny Carlton, Fort Worth  
Dr. Archie L. Garrison, Port Arthur  
Dr. L. V. Credit, Amarillo  
Dr. J. Edward Vinn, Houston  
Dr. Mary Lou Logan, Dallas  
Dr. Robert W. Norwood, Mineral Wells  
Dr. George Gail Smith, Dublin  
Dr. Phil R. Russell, Fort Worth  
Dr. Reginald Platt, Houston  
Dr. James M. Tyree, Corpus Christi  
Dr. Thomas M. Bailey, Corpus Christi  
Dr. Robert E. Morgan, Dallas  
Dr. Ross M. Carmichael, Dallas  
Dr. Ward L. Huetson, Denton

## PARLIAMENTARIAN

Dr. Claude E. Logan, Dallas

## PHYSICIANS RELOCATION COMMITTEE

Dr. H. V. W. Broadbent, Chairman, Austin  
Dr. Wm. H. Van de Grift, Austin

## CLINIC, HOSPITAL AND STATISTICS COMMITTEE

Dr. Milton V. Gafney, Chairman, Tyler  
Dr. Lige C. Edwards, San Antonio  
Dr. William S. Gribble, Jr., Houston  
Dr. Earle H. Mann, Amarillo  
Dr. E. E. Blackwood, Comanche  
Dr. Marille E. Sparks, Dallas

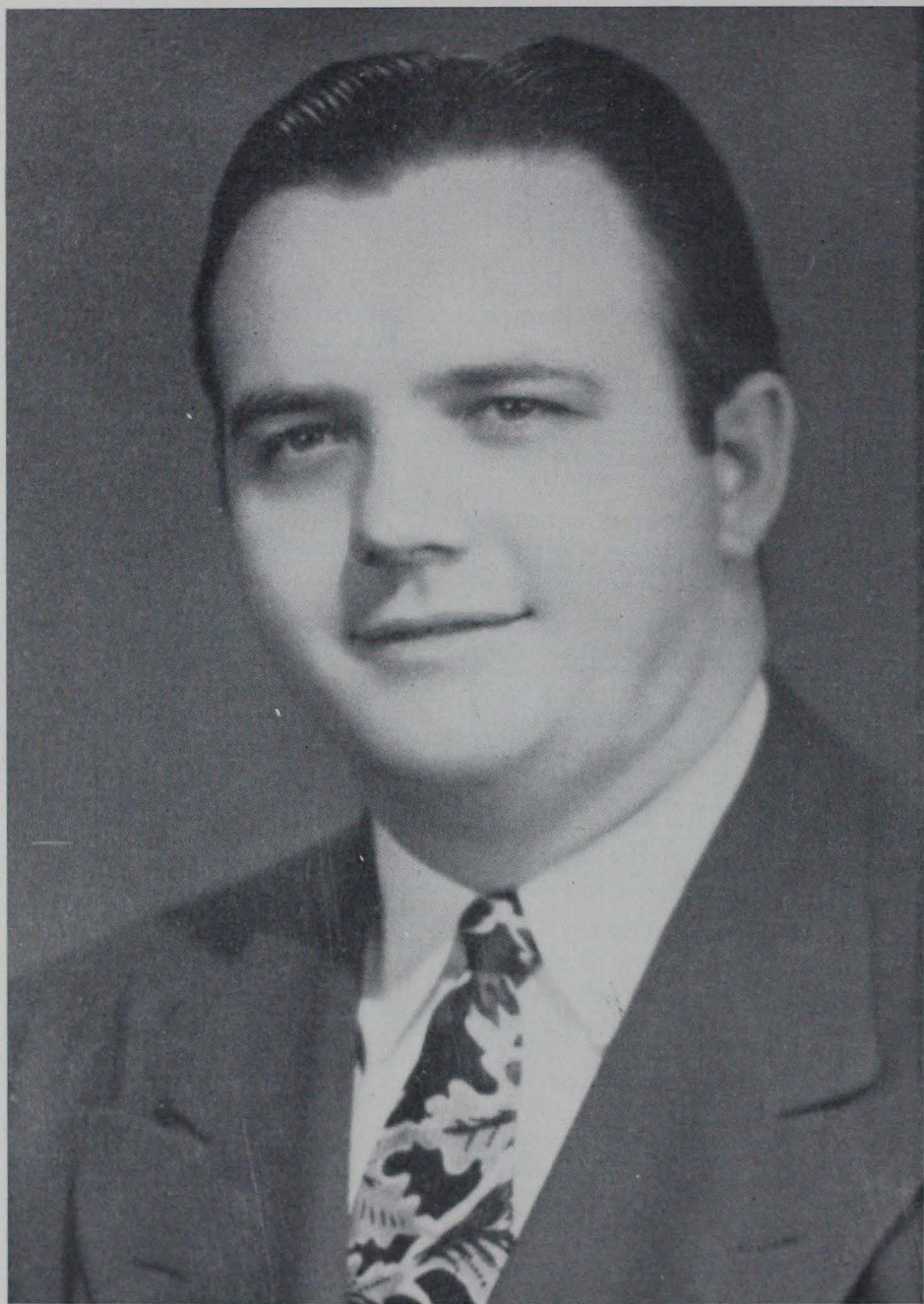
## INDUSTRY AND INSURANCE COMMITTEE

Dr. Keith S. Lowell, Chairman, Clarendon  
Dr. Richard M. Mayer, Silverton  
Dr. Robert J. Brune, Premont

## CENSORSHIP COMMITTEE

Dr. Chester L. Farquharson, Chairman, Houston  
Dr. J. T. Hagan, Longview  
Dr. William H. Brown, Naples





LIGE C. EDWARDS, D. O.

*President-Elect*

SAN ANTONIO, TEXAS



# Texas Osteopathic Physicians' Journal

OFFICIAL PUBLICATION OF THE  
TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS

PUBLICATION OFFICE: 903 LITTLEFIELD BUILDING, AUSTIN, TEXAS

EDITOR

DR. H. V. W. BROADBENT

ASSOCIATE EDITORS

DR. J. W. McPHERSON

DR. K. E. ROSS

DR. H. G. GRAINGER

ADVERTISING RATES UPON REQUEST. ALL ADVERTISING CUTS TO BE SENT WITH COPY.

VOLUME V

AUSTIN, TEXAS, MAY, 1948

NUMBER 1

## DUEL IN THE SUN

LIGE C. EDWARDS, D. O.

*President-Elect*

SAN ANTONIO, TEXAS

When an individual graduates into a profession and begins to carry out the theories and practices that have been given him through an education, he inherits besides the financial return, the pleasure and satisfaction of seeing his work done well. He also inherits the responsibility for the problems of his profession as an organized group. These problems are being encountered and overcome daily by his elected officials on a local, state and national level in an effort to protect the individual member in his therapeutic, social and legislative world.

When we all as individuals realize that united effort will accomplish more than singular effort in educational and public health matters, the basic ideal of supporting your profession by membership and active physical work will render more efficient the performance of the duties of your association officers. When this ideal has permeated the mind of each member of our profession and the responsibility of each member has been realized, the endeavors and efforts of the officers and committees will have most successful results and reflect the intensity of unified effort.

This basic ideal should also reflect daily in each individual of the osteopathic profession therapeutically. When we have been educated in the theories and practices of Osteopathy that "structure determines function," let us employ this in our every thinking in the diagnosis and treatment of all physical and mental ills. *Check the patient organically after a complete case history has been taken.* Then



go another important step further in the diagnosis and treatment of the case not now employed to any great extent by other schools of medicine. *Examine the patient structurally.* This now results in the most efficient and complete type of examination that science has to offer in the diagnosis and treatment of symptoms. Other schools of medicine have some members who in increasing numbers explain to a patient his symptom complex by referring to a pinched nerve and some few are even attempting manipulation. *Use your manipulation, medicine and surgery individually or in any combination tailored to fit the symptoms and results found by examination in each individual case.* In this manner your results will reflect the soundness of your theories and research which will establish the osteopathic profession in a scientific and therapeutic world beyond all doubt.

The success of the profession in these individual cases will eventually bring a deep inalienable pride to each member who can say to himself, "I'm an active member of the osteopathic profession and have a hand in the results obtained."

Let each member take his rightful place in the "Duel in the Sun" of the therapeutic and legislative world.

## AQUEOUS

### VIROSTERONE (Endo)

A neutral crystalline suspension of **synthetic testosterone**.

1 Mg. testosterone — 1.2 Mg. testosterone propionate  
or 60 capon units.

Supplied in 5 and 25 1 c. c. ampouls,  
5 Mg. 10 Mg. 25 Mg. 10 c. c. vials

## SAN-A-TEX LABORATORIES

*Distributors*

W. M. ROGERS

SAN ANTONIO, TEXAS

P. O. Box 417

\*\*\*\*\*  
**D DAY FOR DUES**

**JUNE 17**

**DIRECTORY LISTINGS CLOSE**  
\*\*\*\*\*



# Practical Application of the Studies of the Spinal Arc

J. S. DENSLOW, D. O.

KIRKSVILLE, MISSOURI

A major characteristic of the osteopathic lesion is an abnormality in the texture of the tissues which overlie and support lesioned points. These changes in the texture of tissue were first noted by Still (6) who, in seeking to understand the correlation between the machinery of the body and its function, discovered that certain joints, when palpated, were found to be hyperesthetic and presented an abnormal tissue texture. His observations, and those of the osteopathic physicians who have followed him, indicate that such abnormalities, which are located in the skin, the superficial and deep supporting tissues and the muscles, are the result of functional or organic change, or both. The nature of these changes, and the mechanisms which account for them have given rise to many speculative conceptions.

Efforts to secure final factual data concerning these palpable changes in muscle in the region of osteopathic lesions have been made. The method being employed is electromyography since it provides the most accurate means of determining the presence and degree of muscle contraction in the intact human. This method was first used by Jacobson to study what he termed "neuromuscular hypertonus" occurring in mental states which prevent the patient from attaining complete muscular relaxation.

In the late twenties and early thirties Jacobson (5) observed that normal resting muscle is free from muscle action potentials. This fact, which has since been reported from a number of laboratories, including our own, provides a basis for differentiating between normal and abnormal muscle. Jacobson's interest was to secure objective methods to study neuromuscular or nervous hypertension. In 1940, at the time similar work was being done in our laboratory, two Swedish investigators, Buchthal and Clemmesen (1), made studies "On the Differentiation of Palpable Muscle Affections of Electromyography." The muscles observed were of the appendages and of the vertebral column. They found what they called "rest activity" in eight of forty-six patients who had palpable muscle disturbances.

In the late thirties and early forties we made and reported observations (2), (3) concerning what we termed "spontaneous activity" in the spinal extensors in some areas of lesion, in contrast to the normal absence of activity in normal areas. Our methods and findings were in general agreement with those of Jacobson and of Buchthal and Clemmesen. We were, however, concerned with the instance in which the palpable abnormality in lesion muscle was without contraction.

Additional work revealed that when no spontaneous activity existed in lesion muscle, a stimulus, such as pressure on a related bony prominence *might* induce contraction in the lesion area while sim-



ilar, or even greater pressure, in a normal area *did not* induce contraction. A method of measuring such pressure was developed and has been previously reported (3).

As a result of the latter work we were able to identify lesion areas in which there was no "spontaneous contraction" by presence of "easily induced contraction."

These observations quite obviously demonstrated the existence of hyperirritability (or stated differently, of a low threshold to stimulation) somewhere in the spinal reflex arc, which is related to the lesion area. The question was immediately raised as to whether this irritability exists (a) at the sensory end organs within or about the lesioned joint, (b) in the interneuron system where sensory impulses are distributed to various parts of the spinal cord, (c) in the pools of motoneurons which, since they receive impulses from practically the entire nervous system, is termed the final common paths, or (d) if the irritability exists at each of (a), (b), and (c). Additional experiments have been done in an attempt to locate the irritability just mentioned.

Clinically, we had made the common observation that when pressure, enough to be painful, is applied to a spinous process in certain lesion areas there is a massive reflex response. Excitation spreads from the very small stimulated area until it may activate anterior horn cells throughout the length of the cord. In view of this an experiment was designed whereby record areas are established in the spirit extensors opposite the spinous processes of T<sup>4</sup>, T<sup>6</sup>, T<sup>8</sup> and T<sup>10</sup>. By applying a stimulus at any one of these spines the reflex response at the musculature opposite the spine itself (the self threshold) and that in the other three recording areas could be made. This permitted determinations of the spread of excitation to and from lesion areas and to and from normal areas.

Certain very significant observations were made.

**SPREAD PATTERNS.** When the reflex threshold of each of the segments examined was high (normal) there was no spread from one segment to other segments. When it was uniformly low (lesion) spread occurred to and from each of the segments. When some of the segments were low and some were high the spread did not involve all segments nor did it always occur both to and from the segment stimulated. For example, when T<sup>4</sup> had a low self threshold and T<sup>8</sup> was high a stimulus at T<sup>4</sup> might *not* cause reflex contraction opposite T<sup>8</sup> while a similar stimulus at T<sup>8</sup> *might* cause reflex contraction at T<sup>4</sup>. In a specific instance (exp. 35) the self threshold at T<sup>4</sup> was low, at T<sup>6</sup> medium, and at T<sup>8</sup> and T<sup>10</sup> high. A stimulus at T<sup>10</sup> did not cause contraction at either T<sup>10</sup> or T<sup>8</sup> but traveled up the cord to cause contraction at both T<sup>4</sup> and T<sup>6</sup>. However, the reverse was not true, since stimuli at T<sup>4</sup> and T<sup>6</sup> did not send impulses down the cord to cause contraction at T<sup>10</sup>.

**LOCALIZATION OF THE SENSORY COMPONENT.** The evidence indicates that the sensory end organs in low reflex threshold areas are located in the tissues which closely invest the spinous processes. Most important is that the abnormality in the texture of these tissues is extremely marked. In these experiments one examiner predicted, by palpation too light to cause pain or wincing, the amount of pressure which would be required to cause reflex contraction at a given segment. Another examiner then made measurements with the pressuremeter. In 35 out of 40 instances the prediction made on the basis of palpation proved to be accurate and in the other five the discrepancy was not great. In addition several other factors pointed to the supraspinous tissues as being the site of the low threshold sensory end organ. The threshold was heightened or reflex contraction was



eliminated entirely when the end of the spinous process was procainized or when it was protected by a pressure-meter tip sufficiently wide that pressure was directed to the tissues over the lamina instead of to the spinous process. Another observation was that when the pressure caused pain the patient invariably located the pain at the tip of the spinous process.

**LOCATION OF IRRITABLE PORTIONS OF REFLEX ARC.** The evidence indicates that the irritable portions of the reflex arc include all of its components, i. e. the sensory end organs, the connecting interneurons and the motoneurons. The fact that a stimulus applied to a normal spinous process *does not* excite activity at that segment but travels in the cord to lesion area and *does* cause activity indicates that there is irritability in the interneurons and motoneurons at the latter segment. Likewise in a lesion area the palpation identification of abnormalities at the tip of spinous processes plus the heightening of the threshold or the elimination of reflex contraction entirely when the tip of the spinous process is procainized or bypassed indicates an excessive irritability of the end organs themselves.

**CLINICAL SIGNIFICANCE OF SPINAL CORD IRRITABILITY.** The demonstration of irritable areas where entering impulses give rise to exaggerated responses permits a better understanding of certain factors which are extremely important in the selection and application of manipulative therapeutics. These factors are the existence of reflex arc irritability and the relation of tissue texture to it, attitudinal reflexes, positional security and ease, pain, the use of inhibitory influences and the most effective method of positioning a joint before applying forceful procedures.

**DIAGNOSIS, PROGNOSIS AND SELECTION OF THERAPY.** Probably the most important clinical application which can be made from studies of reflex thresholds and the spread of excitation which

characterizes the osteopathic lesion is the observation that palpable alterations in the texture of the tissues which cover and support joints (the supraspinous tissues in these experiments) give an accurate index of certain irritable spinal reflex arcs in that area. In other words, the degree and the extent of alterations in the tissue texture can be used to determine the degree and extent of certain aspects of spinal cord irritability and the latter, in turn, serves as an index to the intensity and extent of the etiologic factor or factors which originally caused the neurologic malfunction. When, for example, alterations in tissue texture are marked and widespread the etiologic factors in that patient are multiple and usually of long standing. In such situations the prognosis must be guarded, the importance of each etiologic factor carefully explored, and a long range program of therapy planned. At the other extreme, when the tissue change is minor in degree and extent the prognosis for an uneventful recovery is good.

**ATTITUDINAL REFLEXES.** Fulton (4), in discussing the work of Magnus and deKleyn, points out that rotation of the head to one side causes generalized increase in extensor tone on that side. These efforts are the result of combined reflexes from the semicircular canals and from proprioceptive neck receptors. These reflexes were first demonstrated in the cat and serve the obvious purpose, when the cat's attention is directed to the right, of building extensor tone so that the animal can move toward the right quickly if necessary. The reflexes have been demonstrated in other animals and in the decerebrate infant.

During our early studies we often found spontaneous activity in the spinal extensors on one side when the head was turned to that side while with the head in the mid-line the activity was decreased or eliminated. In normal areas spontaneous activity was usually



absent even when the patient's head was turned toward the side being examined.

It is now apparent that in the human with normal reflex thresholds the excitator influence of tonic neck and labyrinthine reflexes is not sufficiently great to cause muscle activity. However, when the interneurons or the motoneurons of a given segment are in a state of irritability in a lesion area the influence of the attitudinal reflexes causes muscle contraction to be initiated or to increase in that area.

Many osteopathic physicians have found that manipulative therapy may be applied most effectively when the patient's head is in the mid-line or when it is turned away from the side being treated. Care should always be used to follow this procedure since this permits a maximum relaxation in the tissues involved.

**POSITIONAL SECURITY AND EASE.** The need for this factor is applied to both the patient and to the physician. From the standpoint of the patient there are two factors to be considered. The first is mental; there is an inevitable tension when the patient has even the slightest concern about slipping or falling. The same is true, particularly in women patients, concerning the possibility that they will be inadvertently and unduly exposed during the course of treatment. Most individuals are inherently modest and while they do not object to necessary examination they shy away from careless exposure and develop tension if such exists. The second involves reflexes which are beyond the patient's control, the myotatic or stretch reflexes. These are active whenever the part involved is on stretch or tension and are reflected in an augmentation of the existing contraction in the part being treated.

From the standpoint of the physician it is necessary for him to be well balanced and at ease if a maximum of patient relaxation is to be secured.

There is a direct analogy here with all the other arts which require physical dexterity. Successful individuals in surgery, dentistry, in the field of sports, in painting and sculpture, must be free from tenseness and must have balance and poise. This point is so obvious and so well known that it hardly warrants further comment. However, just as the golfer "presses" at times the physician must consciously maintain the greatest degree of relaxation for himself if he is to secure the greatest possible relaxation on the part of his patient.

**PAIN.** Pain apparently has a dual effect in the presence of reflex arc irritability such as is demonstrated in lesion areas. Although there are rare exceptions, a painful stimulus is followed by reflex contraction in the related cord segments. If the pain is minor the contraction is comparatively slight, similar to the reflex contraction which results from a non-painful stimulus. On the other hand, when the pain is sufficiently great the higher centers concerned with the protection of the organism become involved and there is massive withdrawal response which is comparable in degree to major voluntary effort. The massiveness of this response is in direct proportion to the degree of pain and when the pain is great the entire extensor musculature of the trunk is thrown into contraction.

Quite obviously such contraction is not conducive to the relaxation that is necessary if the application of manipulative treatment.

**THE USE OF INHIBITORY FACTORS.** The most commonly used inhibitory procedure that is employed in the application of manipulative therapeutics is one in which, when sharply applied force is to be directed to the cervical area, the patient is instructed to "cross his legs." This gives a momentary period in which there is considerable relaxation of the cervical muscles. It is not possible to state, at this time, exactly what the involved neurological



mechanism is although the two best possibilities are (a) that the complete distraction of the patient's attention, even though it be momentary, decreases the constant excitatory influence which the higher centers are exerting on the motoneurons of the lesion area or (b) (and this seems to be at least a reasonable possibility) that there is, as part of the complex reflex agonist-antagonist patterns, a relaxation of certain muscle groups when other groups, even though they may be remote, are activated.

**EFFECTIVE METHODS IN POSITIONING JOINTS.** Probably related to the various inhibitory procedures which may be used to minimize contraction in a lesion area is a method which we have employed to carry joints to their maximum degree of motion. This method is the maintenance of slight but constant movement in a given joint. In the laboratory, when the musculature of a lesion joint has considerable "spontaneous activity" (or even in normal joints where there is difficulty in eliminating a certain residual tenseness) a dramatic reduction or even elimination of spontaneous contraction may be made by gently maintaining constant movement in the joint. Adequate controls indicate that this is not on the basis of distracting the patient's attention but that it is the result of an actual inhibitory

process which is initiated by the joint movement. In contrast to this is the sharp increase in muscle contraction which occurs when a joint is carried to its limit of motion and held in this position. The contraction in the area builds up until finally, although it is not particularly painful, or maybe not painful at all the patient's sense of restraint and discomfort builds up to the point where he voluntarily moves the joint involved or starts to squirm a bit by moving other points in an apparently unconscious effort to release tension on the joint being held. These examples are extremes of course, but the presence of cord irritability in lesion areas indicates the importance of taking advantage, in treating lesion areas, of all inhibitory factors and of avoiding all procedures which tend to build up excitation.

#### BIBLIOGRAPHY

- (1) Buchthal, Fritz and Clemmesen, Swend. On the Differentiation of Palpable Muscle Affections by Electromyography. *Acta Medica Scandinavica*, Vol. CV, fasc. I-II, 1940.
- (2) Denslow, J. S. and Clough, G. H. Reflex Activity in the Spinal Extensors. *J. Neurophysiol.*, 1941, 4:430-437.
- (3) Denslow, J. S. An Analysis of the Variability of Spinal Reflex Thresholds. *J. Neurophysiol.*, 1944, 7:207-216.
- (4) Fulton, John F. *Physiology of the Nervous System*. Oxford University Press. New York, 1943, p. 614.
- (5) Jacobson, Edmund. *Progressive Relaxation*. University of Chicago Press. Chicago, 1938, p. 494.
- (6) Still, A. T. *Osteopathy, Research and Practice*. Kirksville, Mo., 1910, p. 543.

## FOR YOUR PROTECTION

Your professional liability insurance should be under the official program  
of the  
A. O. A. and Affiliated Societies  
in the

### OSTEOPATHIC PHYSICIANS UNDERWRITERS

(more than \$48,000,000 in assets behind the insurance)

### THE NETTLESHIP COMPANY

Exclusive Representative

Serving the Profession since 1925

727 WILSHIRE BLVD., LOS ANGELES 14, CALIFORNIA



# MEMBERSHIP DRIVE



## PLAY BALL WITH YOUR ASSOCIATION



WILEY B. ROUNTREE, D. O.  
SAN ANGELO, TEXAS



Whether "Now is the time for all good men to come to the aid of their county" is right or wrong, it is certainly time for all good osteopathic physicians and surgeons to come to the aid of their state association by sending in checks immediately for 1948-49 dues.

The past year has been full of legislative problems fortunately, for the time, under control; lessons learned from those problems teach us that harder problems are no doubt in store for us soon. YOUR RIGHT TO PRACTICE AS TAUGHT MAY NOT BE A RIGHT unless we have the strength to protect it. What is that right to practice worth to you? NOTHING, as would be evidenced by non-membership in the only organization in the whole world with the ability to protect it. Are our incomes so small that a charge of seventy-five dollars for the established practitioner of three years is too much? I know it is not so; present conditions have favored us all — all who have worked. You can't make a living if much of your time is spent in thinking how much the world owes you a living.

Your right to practice should surely be worth as much as the liability insurance on your car — an insurance you wouldn't have to have if your income might not sometime be in jeopardy. In the average insurance, this cost is more than the present dues for both state and national associations.

Back in Austin in the barefoot and overall days some civic organization sponsored a 'Knot-Hole Gang' at baseball's Culberson Park. Our greatest pleasure was to scrape enough money together to get a couple of golf-ball suckers, present our membership card, grab the biggest knot-hole we could find in the weather-beaten fence, and settle down for the game. Now, our being outside looking in didn't hurt the profits too much because the total cash assets



of all of us couldn't have amounted to seventy-five cents — much less seventy-five dollars. But as pleasurable as that pastime was to us then, it isn't suitable activity for adults who can pay their way to be in the "Knot-Hole Gang." It isn't nearly as comfortable, socially or physically, as being on the inside. What we need are players for the team, plenty of them; we need plenty more to help buy the suits, bats, balls, bus tickets, keep up the field, and altogether give plenty of rootin' from the stands — not too far from the team, however.

I think some members pay their dues like Babe Ruth occasionally liked to hit a home run. I remember an exhibition game between the Yankees and the Longhorns in Disch Field about 1932. The immortal player stands up to the plate, points out beyond the centerfield flagpole and fence, scornfully watches the pitches go by until the count is three and two, then calmly takes his stance, and on his last chance, knocks the ball out of the field.

That's the way some of our members pay their dues — they scare the daylight out of the membership committee just because they have some of that Babe Ruth ability and desire to call their shots. But, listen, don't do like the mighty Casey!

Knock that homer, won't you — the bases are loaded, two down, and we really need that extra push that only you can give to get us over the top.

Batter up!

A COMPLETE X-RAY AND PHYSICAL THERAPY  
SERVICE TO THE PROFESSION

## Johnson X-Ray & Electro Therapy Co.

2611 Oak Lawn Avenue

DALLAS, TEXAS

OFFERS TO  
THE OSTEOPATHIC PROFESSION

MATTER X-RAY EQUIPMENT

Shockproof

Fluoroscope

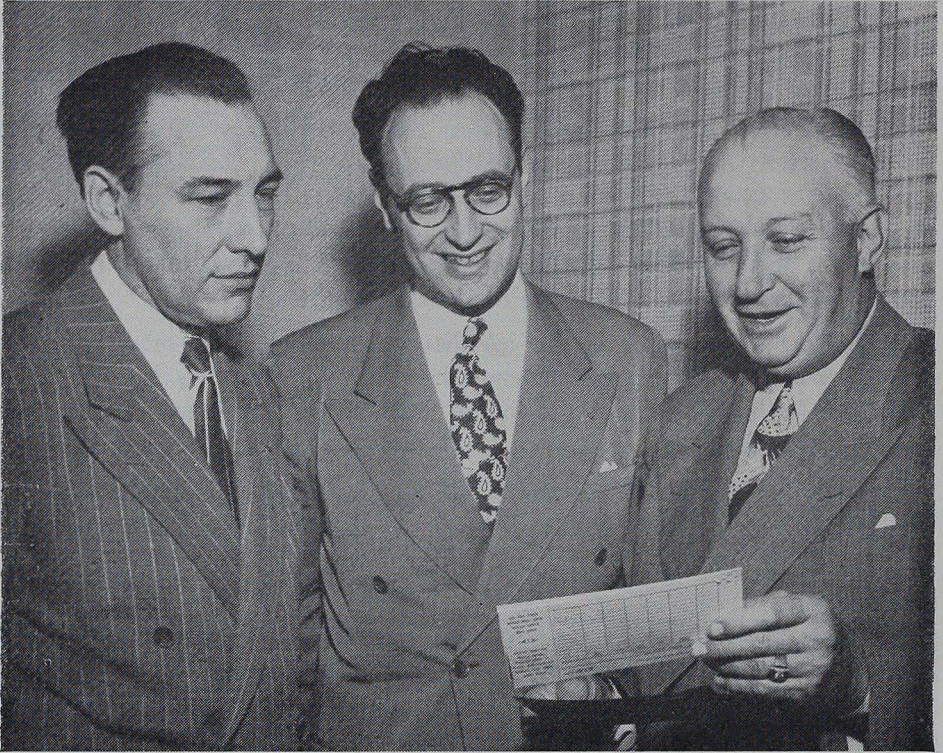
Radiographic

Portable and Mobile  
15 MA up to and including 200 MA

*"Service When You Need It"*



# 100% O. P. F.



Happy about the response of District One of Texas to the Osteopathic Progress Fund drive are Lewis F. Chapman, national director of Osteopathic Progress and Public Service Fund, Chicago, Illinois; Morris Thompson, president of the Kirksville College of Osteopathy and Surgery; and Dr. Earle H. Mann, Amarillo, chairman of the drive in District One.

The men are smiling over a card that pledged \$5,000. Two such pledges in District One helped to push the drive well over the quota in that region.

District One proved its right to be known as District One, the first in Texas, and its right to the claim of outstanding leadership in the Osteopathic world when the district at two o'clock

Tuesday morning, May 11, went over the 100 per cent rating in the O. P. F. or Osteopathic Progress Fund. District One Director, Dr. Earle H. Mann, Lewis Chapman, National Director, Chicago, and Morris Thompson, president of the



Kirkville College of Osteopathy and Surgery, completed their record-breaking drive, which began Saturday, May 8, with a trip to Lubbock where the fine Osteopathic physicians and surgeons in that end of District One came through in their usual 100 plus manner. The final totals will show well above \$45,000 and show fourteen one thousand dollars pledges. Among those, we are proud to state, is your Public Relations Counsel. We subscribe, as do the doctors in District One, to the theory that if you believe in a thing and get your money from it, you should support it.

Arizona, we understand with a quota of \$16,000 became the first big political unit in the nation to go over 100 per cent. District One of Texas with more doctors and more than three times as much money subscribed, becomes the first district in Texas, and so far as we know, the first big district in the nation to head the parade.

District One Association now begins to concern itself seriously over the laggardly nature of other regions in Texas and to wonder if the generally depleted soil and lanquid climatic conditions has had an inevitable reaction on the population of those unfortunate areas. District One is particularly concerned about the Tyler area (whose challenge for a race to be the first to go 100 per cent was received just as District One was breaking the tape.) When the Osteopathic Dads named the Panhandle-Plains District One or the *first district*, they certainly knew what they were talking about.

Quick, Doctor! The splints. Our arm is broken from too much patting action over our own shoulder.

The job is done. *That is important.* Dr. Mann sends his thanks to everyone who helped.

—John L. McCarty,  
Amarillo, Texas

## E. H. McCLURE CO.

1909-11 Pacific

DALLAS, TEXAS

•

SERVING TEXAS PHYSICIANS, CLINICS AND  
HOSPITALS 46 YEARS

•

AT YOUR SERVICE DAY AND NIGHT

•

COMPLETE LINE OF SURGICAL AND MEDICAL SUPPLIES  
AND EQUIPMENT



# Our Honorary Life Members

Dr. Jessie Ellen Gildersleeve was born in Missouri on April 17, 1877. Today, at the age of 71, "The Little Doctor" carries on an active practice in Waco, Texas.

As her parents were moving about during the early years of her life, Dr. Gildersleeve was educated in the public schools of several states—Colorado, California and Missouri. She attended the Kirksville High School and later the Kirksville Missouri State Normal School. At first, she thought she would make teaching her career but during her college days became interested in osteopathy. In 1899 Dr. Gildersleeve graduated from the American School of Osteopathy. In February, 1899 she went to Chicago and took the examination under a strictly medical board. She then practiced in Belvidere, Illinois for two years.

Due to illness in her family, Dr. Gildersleeve decided to try Texas or Colorado climate and located in Texarkana, Texas, just in time to get into the political fight being waged by thirteen D. O.'s to get a bill through the Texas legislature to create an Osteopathic Board of Examiners. She served with the late Drs. Charlie Ross and Elizabeth Broach on that first board.

After two years in Texarkana, Dr. Gildersleeve moved to Waco and became associated with the late Dr. J. F. Bailey with whom she practiced for ten years. Upon arriving in Waco, she found the Texas D. O.'s in the throes of another legislative fight and for many days held down the Waco office alone while Dr. Bailey was in Austin with other pioneer D. O.'s working for the Composite Board and the license privileges enjoyed by the profession in the state today. There are few living and practicing who hold that much fought for 1907 license!

In 1908 Dr. Gildersleeve took post-



DR. JESSIE ELLEN GILDERSLEEVE

*"The Little Doctor"*

graduate courses in gynecology and obstetrics at the Los Angeles College of Osteopathy and in 1920 took a summer's work in the Denver Post-Graduate College. She has always attended the post-graduate conferences of the Texas Association and has been interested in all new methods and technics which have been developed.

Upon coming to Waco, Dr. Gildersleeve became active in the civic and religious life of her adopted community. For ten years she was superintendent of the primary department in the Sunday School of the First Presbyterian Church. After this she helped organize and taught a class for business girls which was originally known as the Friendship Class but later became the Gildersleeve class. Dr. Gildersleeve is still associat-



ed with this class as a substitute teacher.

She was a charter member of the Waco Y. W. C. A., a Past Matron of the Order of Eastern Star and Past Noble Grand of the Daughters of Rebecca. She is also a past president and the only living honorary member of the Business and Professional Women's Club who has retained membership since its organization.

Dr. Gildersleeve has been a member of the Osteopathic Women's National organization since its organization serving one year as president of the Texas Branch and one year as president of her district association.

She has been an active member throughout her professional life in both the State and National Osteopathic Association.

When Dr. Gildersleeve first came to Waco, she became associated with Dr. J. F. Bailey who was quite a large man. Dr. Gildersleeve is a diminutive person in stature—four feet, ten inches tall and weighs about ninety-five pounds—and the patients coming into the office acquired the habit of referring to her as "The Little Doctor," a name that has stuck through all her forty years of practice in Waco. The Little Doctor has friends in all walks of life and the story of her experiences in the medical field and her personal relations with all people sounds like the living embodiment of the Good Samaritan.

When you talk with this bright active woman, you are impressed with the sincerity and warmth of her personality. She will tell you with pride what great advances have been made by her school of medicine and of all the many things she would do if she were just starting out again. She has lived quietly but giving generously and well for the betterment of her profession in the State of Texas.

On March 7, 1948, Dr. Gildersleeve was presented the orchid of the week in a radio program sponsored by Wolfe, The Florist of Waco.

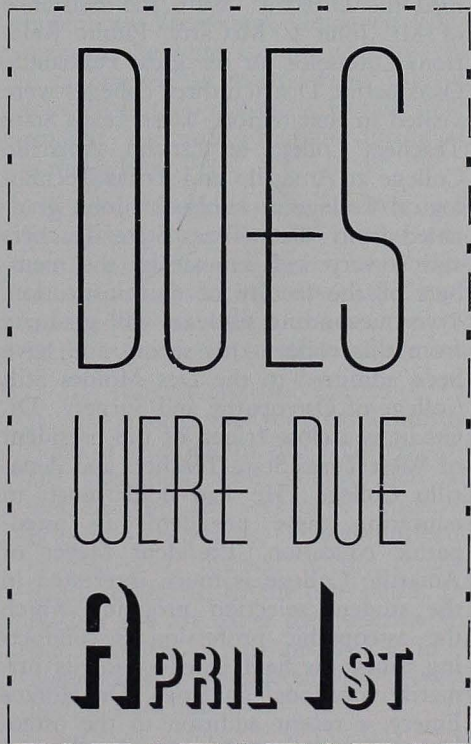
And now, to the Little Doctor, an Honorary Life Member of the Texas Association of Osteopathic Physicians and Surgeons, the association says, "Thanks for all you have done for our profession."

## A. O. A. CONVENTION

The annual American Osteopathic Association Convention will be held in Boston July 19-23 inclusive. A very interesting and instructive program has been arranged. Many doctors from Texas are going. Are you?

## T. A. O. P.'S 1949 CONVENTION

The city of San Antonio has extended to the association a formal invitation to hold their annual convention in that city.





# Texas Observations

LAWRENCE W. MILLS

*Vocational Director, American Osteopathic Association*

CHICAGO, ILLINOIS

During a recent visit in Texas, the Vocational Guidance Director of the American Osteopathic Association conferred with members of the basic science faculties of the nine colleges and universities. Dr. L. V. Cradit of Amarillo, Vocational Guidance chairman of the Texas Association of Osteopathic Physicians and Surgeons, during the past year did much to make these visits very successful. D.O.'s in the various college towns had been notified of the visit and during some of the college visits an interested physician accompanied the Director. With the assistance of Mr. John L. McCarty, Public Relations Counselor for the great Panhandle Osteopathic District, three colleges were visited in that region, West Texas State Teachers College at Canyon, Amarillo College at Amarillo and Texas Technological College at Lubbock. John graduated from West Texas State Teachers and is very well known by the members of the faculty of that institution. Two outstanding students will graduate from this college this spring and have been admitted to the Des Moines Still College of Osteopathy and Surgery. Dr. Cradit is a close friend of the president of West Texas State Teachers and Amarillo College. He had done much in educating these presidents in osteopathic education. President Meyer of Amarillo College is much interested in the student selection program, which the osteopathic profession is conducting, since his field in education is primarily vocational guidance. Dr. Horace Emery, a recent addition to the osteopathic force in Lubbock, already had

made valuable contacts with the faculty of Texas Tech. After holding a conference with the premedical advisers of this rapidly growing institution, the Vocational Director interviewed several outstanding students in Dr. Emery's office, students who were either beginning or finishing their preosteopathic training.

Dr. Phil Russell, ever young in his enthusiasm about the profession, assisted in the visitation of Texas Christian University. He had known the President and the Dean for a long time, and he has contributed much to the education of the key faculty members there regarding osteopathy. Dr. Bob Morgan, who has been connected with Southern Methodist University in Dallas for twenty-two years, has been doing a splendid job of representing his profession in that great University. The Assistant Dean of Men, Mr. Tait, has been one of Bob's close friends from the time he was mentioned for All-American tackle in the early thirties. The premedical adviser, Dr. W. M. Longnecker, is another close personal friend of Dr. Bob. Preosteopathic education is well known by the faculty in this institution. Dr. Ward L. Huetson of Denton accompanied the Director during his visits to North Texas State Teachers College and the Texas State College for Women, the largest women's college in the United States. He is enthusiastic about the educational program his profession is conducting and will assist in the student selection program. It is unfortunate that it was impossible for physicians to accompany



the Director during his visits to the University of Texas and Rice Institute. Your profession has been assured, however, of cooperation in the training of preosteopathic students and in the selection of such students by the premedical committees in both of these institutions.

Texas always has been one of the strong osteopathic states. During the past two years nearly forty outstanding young men and women, who received their preprofessional training in this great state have entered osteopathic colleges. There is every reason to suppose that these people will return to practice in their home state. The officers of the Texas Association and the Vocational Guidance Committee are making every effort to assure their return. They will become the future leaders of the profession in Texas, and there is every assurance that with the training they are receiving they will start their practice as osteopathic physicians and will be proud of their degree. There is very little likelihood that any of these students now in osteopathic colleges will ever be ashamed of the D.O. degree. This is due to the fact that they were carefully selected before their admission. The handful of D.O.'s in the great State of Texas, who have shown active interest in the student selection program, are being asked by the various osteopathic colleges to assist in the future selection of students. One of the most important requirements for admission is the student's motivation to osteopathy. It is no longer probable that students enter colleges of osteopathy with the idea of eventually practicing allopathic medicine.

There are a few D.O.'s in Texas, as well as in other states, who apparently are ashamed of their degree, who like to pose as M.D.'s, or who are not professional physicians from the standpoint of contributing to their professional organization or to the community in which they live. One of the chief points

now being stressed by osteopathic colleges is the training of the professional physician, who will become not only a competent family doctor, but also a community leader and a leader in their profession, which has made it possible for him to secure his training.

Most of the members of the osteopathic profession in this rapidly growing state, however, realize their responsibility to their profession as well as to their public. It is reassuring to know that the young men and women who will be joining them in the future will be proud to not only practice osteopathic medicine, but also will be anxious to further it.

Dr. H. G. Grainger, the new president of the Texas Association of Osteopathic Physicians and Surgeons, is extremely interested in the vocational program of his profession. He has assisted in the establishment of a preosteopathic curriculum in the Tyler Junior College, and he has appointed Horace Emery as Vocational Guidance Chairman of the state for the coming year. A committee of nearly twenty carefully selected D.O.'s will assist Horace in the student selection program during the coming year.

This small committee, however, must be assisted by a majority of the osteopathic physicians in Texas, who believe in and are practicing osteopathic medicine, and who will take an active part in the educational program of the state.

The colleges and universities of Texas are among the progressive institutions of learning in this country. They are swamped with young men and women who are seeking to enter the healing professions. They uniformly express great interest in the program being conducted by the osteopathic profession and are eager to cooperate with the members of the profession in the guidance and the selection of preosteopathic students.

There is no better hobby for a phy-



sician to have than working with young people. He must know, however, exactly what is expected by colleges of osteopathy of students whom they will admit. The preosteopathic student must prove that he can do above average work, not necessarily of straight "A" or straight "B" caliber, but work that is distinctly above average. A student who has had difficulty with such basic sciences as inorganic chemistry, organic chemistry, biology or physics would be a poor risk in any college of osteopathy today. Such students should not be encouraged to continue their professional training or should not be recommended by the doctor. Of far more importance than grades, however, are such personal qualifications as motivation towards the osteopathic school of medicine, emotional stability, qualities of leadership and good personality. These are the factors which are being weighed by colleges of osteopathy. There have been many cases in the past few years when straight "A" students were refused admission because they did not possess

the personal qualifications which are now believed to be necessary in the shaping of an osteopathic physician. All doctors who are interested in the guidance of young people towards their profession are asked to read the "Student Interviewing Procedure," which appeared in the December 1947 issue of the Forum of Osteopathy.

Texas is the most rapidly growing state in American and the osteopathic profession in that state must keep pace. It can only keep pace by assisting in the selection of outstanding young people who will become the future leaders of osteopathy. There are weaknesses in any strong organization. The Texas Association of Osteopathic Physicians and Surgeons is a strong organization. Its weaknesses, however, will disappear with the addition of the coming generation of osteopathic physicians. Your Director has had innumerable opportunities of seeing this new generation in their training process, and he is firmly of the opinion that the future of osteopathy in their hands is brighter than ever before in its short history.

---

## BASIC CRANIAL COURSE

On April 5, thirty-two graduate osteopathic physicians, who had gone to Des Moines for the eighth post-graduate course in osteopathy began their basic instruction in cranial technic. It is indeed gratifying that the maximum enrollment for this two weeks' course was reached, indicative of the growing response by the members of the profession to accept the challenge of cranial osteopathy as set before us by Dr. Wm. G. Sutherland.

As in previous years, Dr. Sutherland headed the faculty with the remainder of the teaching group composed of Drs. Paul E. Kimberly, Rebecca C. Lippincott, Thomas F. Schooley, Reginald Platt, Chester L. Handy, Byron E. Laycock, Anna L. Slocum and Gordon L. Elliott.

The osteopathic physicians enrolled for the courses represented no less than fifteen states and two provinces of Canada. Dr. John B. Donovan of Austin, Texas, was among those enrolled.



## **VICK POST-GRADUATE COURSE**

Dr. Lester J. Vick has announced his summer post-graduate courses to be held June 7 to 19, 1948.

Course No. 1 in proctology and other orificial surgery is to be taught by Dr. Lester J. Vick assisted by Dr. E. E. Ludwig, Dr. M. M. Vick and Dr. Keith Lowell.

Course No. 2 in varicose veins and hernia will be taught by Dr. John Costello, senior of the Poripphoral Vascular Disease and Scleretheraphy Department of the Los Angeles County Osteopathic Hospital. Dr. Vick's appraisal of this course characterizes it as "possible . . . the most comprehensive . . . ever given by the profession's most able teacher on the subject."

Also on the faculty will be Dr. Ben Hayman of Galveston in charge of the osteopathic technic section and Dr. John Witt of Groom who will lecture on "Profitable Practice Builders."

John L. McCarty will discuss the public relations aspect of practice.

It is pointed out that these are classes of limited enrollments and that early registrations to avoid exclusion will be necessary.

## **PHILADELPHIA POST-GRADUATE COURSE**

The Philadelphia College of Osteopathy has announced three courses for graduates devised to meet some of the requirements of those who wish to prepare for specialization.

Osteopathic Medicine—June 7 thru July 2, 1948.

Cardiology (Fundamentals)—July 5 thru July 16, 1948.

Cardiology (Laboratory and Clinical)—July 26 thru August 6, 1948.

Instruction will be planned for busy practitioners who can spare only a short time away from their work but who wish information on the current trends in Osteopathic Medicine and Cardiology.

All inquiries should be directed to:

Dr. Otterbein Dressler, Dean, 48th and Spruce Sts., Philadelphia 39, Penn.

## **ARKANSAS CONVENTION**

The forty-fifth annual convention of the Arkansas Osteopathic Association of Physicians and Surgeons will be held in Little Rock on May 21-22. Dr. Phil R. Russell of Fort Worth will represent the Texas Association and speak on the progress of the osteopathic profession.

## **SAFETY IN WATER SPORTS**

Dr. George Cox, State Health Department, outlined the following simple rules for bathing and swimming safety: at least one hour should elapse after a meal before entering the water; upon first sign of fatigue, come ashore, and don't enter the water when overheated; learn to float—this is important; never attempt to rock a boat in a spirit of fun; and never swim in water that may be polluted.

"Outdoor excursions, picnics and swimming parties contribute much to a healthy, happy, normal life," Dr. Cox said. "It is by no means advisable to eliminate these pleasures from our summer program, but it is important that they prove beneficial and not disastrous."



# KIRKSVILLE NEWS

## BOARD OF TRUSTEES

Louis W. Handley was elected treasurer and business manager of the Kirksville College of Osteopathy and Surgery by the Board of Trustees of the college at its semi-annual meeting April 2 and 3. Mr. Handley succeeds Leslie N. Bledsoe whose resignation tendered several days previous was accepted. Mr. Handley, who was superintendent of hospitals and clinics, joined the staff of the institution in August, 1947. The board also elected new members.

Dr. D. A. Squires of Fulton, Mo., was elected to membership on the Board of Trustees to succeed Dr. P. W. Gibson of Winfield, Kansas, who recently resigned because of ill health. Dr. Squires was a graduate from the K. C. O. S. in 1929. He is a past president of the Missouri Association of Osteopathic Physicians and Surgeons and the present chairman of its public relations committee. He has represented his state in the House of Delegates of the American Osteopathic Association.

The Trustees set up a program of strictest economy of operation for the coming fiscal year, which together with funds from increased enrollments in September will enable the college to pay off a major part, if not all, of its accumulated operational debt.

## RESEARCH GRANT APPROVED

The Kirksville College of Osteopathy and Surgery has just been advised that its application for a grant of \$8,926 in

support of its research program has been recommended for approval by the National Advisory Health Council for the United States Public Health Service. This grant is in support of a research project on the electrical properties of the motor unit in striated muscle conducted by Dr. J. S. Denslow and his associates.

This is the second time the K. C. O. S. has been recommended for approval for grants in support of research from the U. S. Public Health Service. Last year a grant was approved for \$6,119 for this research project. This research is a continuation of part of the studies which Dr. Denslow has carried on for the past several years and which has been reported from time to time in a number of physiological journals.

## MCKINNEY DISASTER

*The Fort Worth Star-Telegram* of May 3, 1948 had a front page story on the tornado-struck McKinney and had this to say:

"Four physicians and surgeons of the staff of the Fort Worth Osteopathic Hospital left here at 8 p.m. by automobile to offer their assistance in the treatment of the injured."

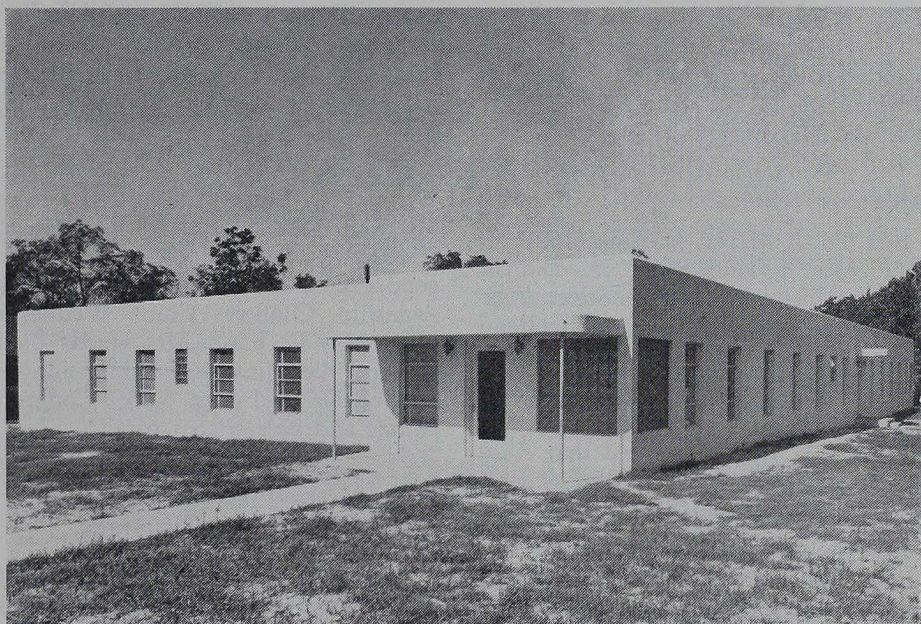
Again on May 4, 1948:

"Volunteer workers from Fort Worth returned to their homes early Tuesday from the McKinney disaster scene reporting that ample help was being received by the tornado victims.

"We returned home after we learned there was a volunteer doctor on hand for every patient," Dr. Phil Russell reported. Members of the staff of the Fort Worth Osteopathic Hospital making the trip by automobile were Drs. Russell, J. O. Carr, G. G. Smith, and H. J. Ranelle."



# Texas Osteopathic Hospitals



*MOUNT PLEASANT HOSPITAL AND CLINIC*

One of the major contributions to the advancement of Osteopathy in Northeast Texas was the opening of the Mount Pleasant Hospital and Clinic by Russell L. Martin, D. O. and associates on July 9, 1946.

This thirty bed hospital is housed in a splendid example of modernistic Spanish architecture and is furnished throughout with the latest and best equipment.

The resident staff consists of Russell L. Martin, D. O., Chief of Staff and Chief Surgeon; M. L. Cline, D. O., Eye, Ear, Nose and Throat department; Charles D. Ogilvie, D. O., Radiologist and Diagnostician, and J. S. Kennedy, D. O., Surgical Assistant and Urologist.

The laboratory is in charge of Edward Moores, M. T., and is fully equipped to handle all phases of clinical pathology.

Mr. J. P. Stanley is business manager and Mrs. Rilla Shryock, R. N., is superintendent of the nursing staff, which consists of three registered and nine undergraduate nurses.

The visiting staff consists of Palmore Currey, D. O., Mount Pleasant; Ernest P. Schwaiger, D. O., DeKalb; Ellis L. Miller, D. O., Talco, and William H. Brown, D. O., Naples.

The Mount Pleasant Hospital and Clinic means much to the osteopathic profession and it is the desire of the staff that this institution become the center of osteopathic post-graduate study in East Texas.



---

# AUXILIARY NEWS

---

## DISTRICT NO. 1

The Panhandle District No. 1 Osteopathic Association Auxiliary held its last meeting of the year Sunday, May 9, at the Herring Hotel.

The following officers of the organization were elected:

Mrs. Ed. R. Mayer, Jr. Amarillo, President; Mrs. J. Paul Price, Jr., Dumas, President-Elect; Mrs. Ralph Soper, Amarillo, 1st Vice-President; Mrs. Glenn Robinson, Happy, Secretary-Treasurer; Mrs. Lester J. Vick, Amarillo, Parliamentarian.

Mrs. L. V. Cradit reported that August 13 and 14 had been selected as dates for the Child Health Clinic.

Mrs. John L. Witt of Groom and Mrs. L. V. Cradit gave brief reports on the state convention.

Mrs. W. M. Jackson was appointed delegate to the national convention at Boston.

Congratulations were in order for Mrs. L. N. Pittman who was selected new state president at the annual convention in Houston.

The Panhandle Auxiliary has had a very successful year. The goal set for the year was a 20% increase in membership but they beat that figure with 23%.

---

Dr. and Mrs. W. M. Jackson are making plans to attend the national convention of the American Osteopathic Association in Boston in July. Mrs. Jackson will represent District 1 as a delegate to the A.A.O.A.

Mrs. L. J. Vick, who was elected a delegate-at-large from the Texas Association, will also attend.

Mrs. Norman Harris' talents as a musician are much appreciated by her new neighbors. Almost as soon as she unpacks her violin she will be featured as a soloist by two of the Amarillo music clubs.

Dr. and Mrs. Norman Harris, of the Washington Center Clinic, and Dr. and Mrs. L. J. Vick combined a birthday and a wedding anniversary celebration as a good excuse for dinner together at the Amarillo Country Club Wednesday night, May 12. It was Mrs. Harris' birthday and the thirtieth wedding anniversary of Dr. and Mrs. Vick. Congratulations and best wishes to all.

---

## STUDENT LOAN FUND

Mrs. L. V. Cradit, National Chairman of the Student Loan Committee, spoke at the recent state convention in Houston on the Student Loan Fund. She pointed out that the A.O.A. Student Loan Fund differs from the A.A.O.A. Scholarship Fund in that the loan fund is a project of the American Osteopathic Association and supported by the Auxiliary, while the scholarship fund is sponsored by the Auxiliary. At the present time the Auxiliary's scholarship fund is inoperative. Aside from the support of the A.A.O.A., the loan fund is maintained by profits derived from the sale of Student Loan Fund Christmas seals. The fund now has a total of more than \$82,000.

---

Outstanding in civic work in Amarillo is Mrs. G. W. Gress, chairman of the Public Welfare Committee of the Federated Women's Clubs of the city. Mrs. Gress and her committee have figured prominently in recent weeks in a



drive to obtain separate detention quarters for juvenile prisoners in the city.

The Public Welfare Committee is also spearheading a move to secure for the city (through state legislation) a separate court of domestic relations. A third welfare project for which Mrs. Gress and her organization will work will be a foundation similar to Boys' Ranch for the rehabilitation of delinquent girls.

Mrs. Gress, who is an M. A. graduate of the University of Oklahoma, is very active in the A.A.U.W. and other clubs.

---

## HOSPITAL AUXILIARY

Organization of the Auxiliary to the Groom Hospital Staff was made May 10 in a meeting at the home of Dr. and Mrs. John L. Witt. The following officers were elected for the ensuing year:

Mrs. John L. Witt, Groom, President.

Mrs. J. Gordon Stewart, Clarendon, Vice-President.

Mrs. Wm. Paul Roberts Panhandle, Secretary-Treasurer.

Other members include Mesdames Lewis Pittman, J. H. Kritzler, Ruth Renfro, Dwight Cox and John V. London.

Auxiliary meetings will be on the first Monday night of every month at the same time the Hospital Staff meets.

The Auxiliary is proud to have the State Auxiliary President, Mrs. Lewis Pittman and the State Auxiliary Secretary, Mrs. John Witt as members of the local organization.

---

## DISTRICT NO. 2

Mrs. George E. Hurt was hostess to the Auxiliary of the Dallas County Osteopathic physicians at a luncheon at her home recently. This was the concluding meeting of the year.

Mrs. J. L. Porter, retiring president, conducted the meeting during which the following officers were elected:

Mrs. George E. Hurt, President.

Mrs. Emil Plattner, Vice-President.

Mrs. Louis Logan, Secretary-Treasurer.

---

The Auxiliary to the Tarrant County Association of Osteopathic Physicians and Surgeons held open house in the home of Mrs. H. M. Walker on May 2. Mrs. R. W. Briscoe, Social Chairman, and Mrs. V. L. Jennings, President of the Tarrant County Auxiliary, were in charge of the arrangements.

With Mrs. Jennings in the receiving line were Madams R. D. Fisher, R. B. Fisher and M. S. Miller.

Out-of-town guests included Dr. and Mrs. R. E. Morgan of Dallas.

---

## DISTRICT NO. 7

The wives of the members of District No. 7 met Sunday, May 2, in the home of Mrs. J. L. Love following a dinner with the doctors at the White Arms in Austin.

Ground work for the organization of a district auxiliary was begun and temporary officers elected with Mrs. Wm. H. Van de Grift, president, and Mrs. H. V. W. Broadbent, secretary.

A committee composed of Mrs. Rex Aten, Mrs. L. C. Edwards and Mrs. R. E. Hubbard was appointed to draw up a constitution to be presented at the next meeting in San Antonio on June 6.

Delightful refreshments were served by the hostess.

---

The San Antonio Auxiliary is very proud to have among its members Mrs. L. C. Edwards, President-Elect of the State Auxiliary.



This Auxiliary is now busy with plans to improve the kitchen of the San Antonio Osteopathic Hospital and to hold a rummage sale in June. Mrs. Richard Washcer and Mrs. Bernard Klase will be in charge of arrangements.

This newly organized group has also pledge twenty-five dollars to the Scholarship Fund.

## V. A. CONTRACT

The contract between the Texas Association of Osteopathic Physicians and Surgeons and the Veterans Administration for out-patient care of veterans with service connected disabilities has been sent to Washington for action.

---

## MEET THE EDWARDS FAMILY

Dr. Lige C. Edwardss, President-Elect of the Texas Association of Osteopathic Physicians and Surgeons, was born Elijah Coles Edwards in Corpus Christi on April 7, 1918. After graduating from the Corpus Christi College Academy and attending St. Mary's University of San Antonio, Dr. Edwards worked as a book binder and cotton buyer before entering Kirksville College in 1936.

He was a member and president of the A. T. S. fraternity at Kirksville and during his last year was chosen by Sigma Sigma Phi as the most outstanding senior of 1940. Following graduation he interned for eight months at the Laughlin Hospital in Missouri and later for four months at the Corpus Christi Osteopathic Hospital. Dr. Edwards is now associated with his brother, Dr. Hal H. Edwards, in the Edwards Clinic at San Antonio, Texas. He holds licenses by written examination from both Missouri and Texas.

In 1941 Dr. Edwards married Miss Ruth Niblack, who is President-Elect of the State Auxiliary, and has one daughter, Gay, three and a half years old.

He has been very active in the civic life of his community and is a member of the San Antonio Executive's Club being its president and member of the Board of Directors in 1937, Exchange Club, Alamo Heights Lions Club, Chamber of Commerce and the Oak Hills

Country Club. Dr. Edwards has always been active in association affairs. He is past-president of the T. A. O. P. S. Hospital Association, a delegate to the House of Delegates for a year and now President-Elect.

The Edwards family with President-Elect Lige and Auxiliary President-Elect Ruth are hard at work on the 1949 convention to be held in San Antonio. With two such dynamic people at the helm, the association can be assured of a successful convention and a progressive administration under this Edwards family.

---

THE JOURNAL  
NEEDS YOUR  
SCIENTIFIC ARTICLES

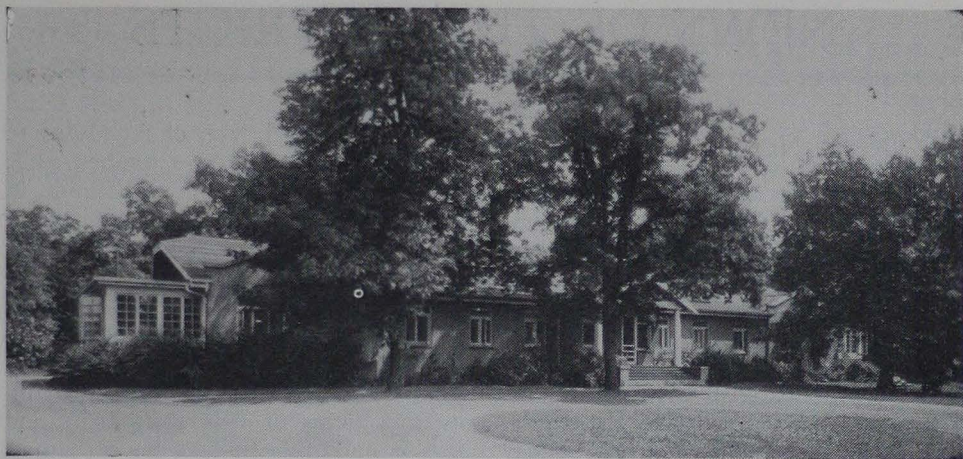
---

---

TELL OUR  
ADVERTISERS  
YOU HAVE SEEN  
THEIR ADVERTISEMENTS  
IN THE JOURNAL

---





## *All Diagnosis*

arrived at by the most detailed investigations and the correlation of findings by the entire professional staff gives the referring physician the soundest basis possible for his treatment program.

## *All Adequate Treatment*

Of all other disease syndromes, as well as arthritis, must rest upon a comprehensive study of the patient. The extensive diagnostic facilities of this institution are available for all of your problem cases.

*We invite your inquiry*

# *Ottawa Arthritis Sanatorium and Diagnostic Clinic*

900 East Center Street

OTTAWA, ILLINOIS

*"A Registered Osteopathic Institution"*



# NEWS OF THE DISTRICTS

## DISTRICT NO. 1

District One's quarterly meeting of the Society and the Auxiliary Sunday, May 9, was highlighted by addresses by Mr. Lewis Chapman, National Director, Osteopathic Progress Fund, Chicago, and Morris Thompson, president of Kirksville College of Osteopathy and Surgery. Mr. Chapman addressed a joint afternoon session, and Mr. Thompson addressed the banquet audience Sunday evening. Dr. J. H. Ballard, president, was toastmaster. Mr. Thompson's address was "Socialized Medicine and the Osteopathic Profession." Mr. Chapman told of the educational program of the colleges and of the efforts to support them.

Announcement has been made of the purchase of the interest of Dr. L. V. Cradit in the Amarillo Osteopathic Hospital property (and in the partnership of Drs. Cradit and Vick) effective May 1 by Dr. Lester J. Vick. Thus the hospital property is now owned by Drs. Vick, Mann and Brown.

Dr. Cradit has announced that through the kindness of Dr. G. W. Gross he is temporarily located at Room 406, Barfield building. He is doing his surgical work at the Amarillo Osteopathic Hospital.

Dr. Vick has announced the association with him as members of his staff Dr. Ed Rossman, who recently completed his internship at the hospital and Dr. H. W. Ballew who has been a member of the hospital staff for some time. Some changes and alterations are being made in Dr. Vick's suite of offices at the hospital.

Dr. Glenn Robinson of Happy, has moved into his new clinic building on North Main Street.

Work is under way, or scheduled to be under way soon, on a ten-bed addition to the Porter-Sistrand Clinics in Lubbock where Drs. Porter and Lauf set records for baby deliveries.

Dr. Ed Mayer, Jr., has remodeled and redecorated his suite of offices at 514½ Taylor in Amarillo. He has added numerous pieces of new equipment, and says proudly that he now has an almost entirely new set-up.

Dr. R. L. "Bob" Vick of Tulia is just in his new ground floor office building north of the Square.

Some people would take the white and blue out of our flag and leave only the *red*. It is a disease of the mind. Even in the human body the white cells will destroy the diseased reds.—  
*Arkansas Bulletin.*

*Safeguard Your*

## **Professional Reputation**

**USE MERCHANDISE OF  
DEPENDABLE QUALITY**

—SURGICAL  
INSTRUMENTS  
—SPECIALISTS'  
EQUIPMENT

**The A. P. CARY  
COMPANY**

Medical Arts Building  
Dallas - Ft. Worth - Houston



## News of the Districts - (Continued)

Due to the lack of hotel space it has been necessary to postpone the annual Child Health Clinic from May 21-22 to August 12-14. Dr. Mary Golden will be the coordinator for the Clinic at this later date.

---

Larry Mills, Vocational Director of the American Osteopathic Association, who was the guest of District No. 1 early in April, reports that he had "a most profitable ten days in Texas."

---

The formal announcement of the Washington Center Osteopathic Hospital and Clinic, 1608 Washington, will be made in a few days by the owners, Dr. E. W. Cain and Dr. Norman Harris. Dr. Harris has moved recently to 1516 Bryan Street from Hereford. The doctors have been so busy and the hospital so filled with patients that the announcement has been delayed. It is now doubtful, on account of the patients and the work, if the planned formal opening to the public will be held.

Dr. H. M. Gorrie also has a financial interest in some of the modern equipment in the institution. Dr. R. L. Lin-genfelter, who was at the Washington Center Clinic for a while, has moved to Hereford, taking over the offices of Dr. Harris and also the former residence of the Harris family.

Dr. Harris, who previously spent a considerable time in Amarillo, is a specialist in major surgery, in addition to his general practice.

The Washington Center Clinic and Hospital is one of the most modern and beautiful buildings in Amarillo.

### GROOM HOSPITAL STAFF

Osteopathic physicians and surgeons in the area served by the Groom Hospital met on May 10 to organize a hospital staff.

Following a fish fry dinner at the Longhorn Cafe, the doctors met at the offices of Drs. Witt and London and completed their organization. The following officers were elected:

Dr. J. H. Kritztler, McLean, President.

Dr. Paul Roberts, Panhandle, Vice-President.

Dr. John V. London, Groom, Secretary-Treasurer.

Other staff members include Dr. Dwight Cox, Hedley; Dr. J. Gordon Stewart, Clarendon; Dr. Lewis Pittman, Borger; Dr. J. J. Longhagen, Claude, and Dr. John Witt, Groom.

Staff meetings will be held the first Monday night of each month.

---

Dr. and Mrs. Earle H. Mann recently enjoyed a vacation trip to Dallas, Houston, New Orleans and points in Arkansas. Dr. Mann expects to catch up on some fishing and relaxation.

What kind of stories will he tell?

---

Dr. E. W. Cain is going deep-sea fishing somewhere in the Galveston-Houston area this weekend. He promises pictures of any 100-pound fish he catches.

Dr. Cain will have to step some to beat the sea fishing exploits of Mrs. John Witt and Mrs. John London, wives of the good doctors at Groom. Reports are that the two ladies recently caught 37 and 27 fish each while the doctors grabbed off a few small ones and an eel or some other denizen of the deep.



# News of the Districts - (Continued)

## DISTRICT NO. 2

Dr. Charles Still, grandson of the founder of osteopathy, was installed as president of the Dallas County Osteopathic Society at their recent meeting.

Other officers inducted at the time were Dr. Sherman Sparks, vice-president, and Dr. Gladys F. Pettit, secretary-treasurer.

---

## DISTRICT NO. 3

The regular meeting of District No. 3 was held May 16, 1948 at Canton with Dr. John Turner as host.

A report of the work of the House of Delegates at the annual convention was given by Drs. Kenzie and Turner.

Officers elected for the 1948-49 fiscal year are as follows:

President, Dr. A. Ross McKinney, Texarkana.

Vice-President, Dr. M. L. Cline, Mt. Pleasant.

Secretary-Treasurer, Dr. Wm. H. Brown, Naples.

Delegates to the House of Delegates of the State Association were re-elected.

A paper on electrocardiography was given by Dr. Harmon of Tyler.

---

## DISTRICT NO. 4

The May meeting of District No. 4 was held in Comanche, May 16 with the Blackwood Hospital and Clinic as host. The largest attendance so far in our meetings was present, and the value was increased by the presence of Dr. Gordon Beckwith of San Antonio and Mrs. Beckwith. Our district really appreciates such a visit—Gordon and Frances made a 550 mile round trip to help us out.

Dr. Beckwith gave a comprehensive and personable paper on "Diagnosis of Surgical Conditions in Infants and Children."

Subscriptions to the O.P.F. drive were made by the following members present: Dr. W. D. Blackwood, Dr. E. E. Blackwood, Dr. Bill Jaggars, Odessa; Dr. Norman Leopold and Dr. V. Mae Leopold, Odessa; Dr. Richard F. Boone, Evans; Dr. W. B. Rountree, San Angelo; Dr. Murphy Webb, DeLeon. A complete publication of such subscriptions will be made later.

A meeting for July 11 in San Angelo was voted affirmatively. This is one week before the start of the national convention in Boston to which several district members are going, but we can still have a good meeting.

---

Dr. V. Mae Leopold of the Leopold Osteopathic Clinic in Odessa was elected president of the Texas chapter of the Osteopathic Women's National Association during the recent convention in Houston.

Dr. Leopold, who has been practicing in Odessa for ten years, is first vice-president of the Business and Professional Women's Club and chairman of the health committee. She was a delegate to the convention of the Texas Federation of Business and Professional Women's Clubs held in Dallas on April 22, 23, 24, 1948.

---

The State Office enjoyed the recent visit of Dr. Claire Peterson of San Angelo, who was here for the Texas Federation of Woman's Clubs convention.

Dr. Claire reported that Dr. John Peterson is back on the job after his operation and is feeling better than ever.

Come again, Dr. Peterson.



# News of the Districts - (Continued)

Dr. Merle Griffin, Corpus Christi, has been appointed track physician for the Corpus Christi Speedway. The Corpus Christi Osteopathic Hospital will have their surgery standing by at the time of each race to take care of any accidents.

Dr. Robert J. Brune has been elected City Physician and City Health Officer of Premont.

Dr. Brune recently addressed the P. T. A. in the local high school auditorium on the subject of poliomyelitis. The audience number about 400.

## DISTRICT No. 9

The regularly monthly meeting of District 9 was held in Cuero on May

12 with Dr. and Mrs. C. R. Stratton as hosts.

A delicious dinner was served by Mrs. Carl and Richard Stratton after which the doctors adjourned to the Stratton Clinic for their meeting. The Strattons have rearranged their clinic and have ample room and facilities to carry on a complete diagnostic and treatment clinic.

Dr. Alan Poage called the meeting to order and gave a summary of the actions of the House of Delegates at the recent convention. There was a discussion of the O. P. F. pledges but a complete report withheld awaiting the report on two members.

The next meeting will be held in June.

---

---

ALL KINDS OF PRINTING . . . INCLUDING

BOOKLETS - CIRCULARS - PUBLICATIONS

STATIONERY - STATEMENTS - ENVELOPES, ETC.

OFFICE NEEDS — CABINETS, LEDGERS, SUPPLIES  
CARBONS, PENCILS, INKS . . . MANY OTHER ITEMS

**AUSTIN STATIONERY & PRINTING COMPANY**

*"Creators of Distinctive Printing"*

Telephone 7-6145

217-19 West Sixth Street

AUSTIN, TEXAS



## EDITOR'S PAGE

---

### ARE YOU CARRYING YOUR SHARE?

Are you carrying it? Perhaps it has never occurred to you that you should return a part of your income to protect your investment. Do you carry insurance on your home and if so why? I'll tell you, you carry it so that in case it burned up, you are protected. Yet some of you are not willing to protect the one thing that made that home possible—YOUR PROFESSION.

Your state office and your state association is the only place where you can get that protection. The men who comprise your officers in this association not only give of their money but give many and many hours of time away from their practice in order to give you that protection. Yes, they have their expenses paid when they are out of town but they do not receive any compensation for the practice they have missed while they were away.

It is up to the members of the state association to pay these expenses as well as all the expenses of your state association.

We, your officers, would like to reduce the membership dues as much as any one of you but it takes a certain amount of money to run the association and until such time as we can get each man to carry his share of the load by joining the state association, your Board of Trustees and House of Delegates voted unanimously to leave the dues as they are. If everyone would join this year as the dues are, next year we could base our income on all men practicing rather than on the number that are now members. JOIN AND JOIN NOW!

H. V. W. BROADBENT, D. O.

Did you hear about the two doctors who found their new patient in a strong perspiration and decided to take his pulse? They both put their hands under the bed-cover in order to take his pulse, but by accident, each grabbed the other's hand.

"Don't think it's anything serious," said one doctor.

"He's probably drunk," said the other.

---

### AN OPEN LETTER

"Do we fail to answer the telephone or go to the door when someone rings the bell?"

By the same token—why should we so often fail to respond to a letter when we are asked for some specific information—no matter how little we think of its importance? It is a good simile to think of in organization matters. We are proud of the record of the secretary's office, even if we do say it, that seldom is a letter received from any source, which does not have a reply within the next twenty-four hour period.

It is aggravating indeed, to one who endeavors to be meticulous in any organization procedure, to have to write a second and sometimes a third letter before getting a reply, and then often—only by sending a self addressed stamped envelope.

Courtesy certainly pays dividends, whether it is answering the phone, the door bell or answering a letter.

—From the *Badger*, D. O.  
Edited by E. J. Elton.

This certainly applies to the State Office of the Texas Association!

---

The fifty-second annual convention of the American Osteopathic Association will be held in Boston, July 19-23.



---

## \* \* \* LOCATIONS AND REMOVALS \* \* \*

---

**Dr. Harvey D. Smith, KC '42** is in the Blackwood Clinic and Hospital at Comanche.

**Dr. Donald K. Cutsall**, Box 2, South Houston, is a new member of the State Association.

**Dr. C. R. Nelson**, formerly Executive Secretary of the Texas Association of Osteopathic Physicians and Surgeons is now Chief of Staff at the Ottawa Arthritis Sanatorium and Diagnostic Clinic, 900 East Center Street, Ottawa, Illinois.

**Dr. Harry E. Stahlman**, formerly located in Brownsville is at 700 Liberty Street, Clarion, Pa.

**Dr. J. G. Brown** of Mineral Wells is now located in Tyler, Texas. Dr. Brown will be associated with Dr. Howard Coats in a new hospital and clinic.

**Dr. Mary Lou Logan, Dr. Claude E.**

**Logan** and **Dr. Louis H. Logan** have moved their offices from the Wilson Building, and are now located at 3923 Hall Street, Dallas.

**Dr. Leland L. Lindblom**, formerly of Waco, is now located in McPherson, Kansas.

**Dr. G. G. Smith**, formerly of Dublin, has moved to 3021 Cockrell Street, Fort Worth. Dr. Smith opened a ten-room clinic on April 1 with complete clinical facilities and expects to do a general and diagnostic practice. He has a registered nurse and technician as an assistant.

Dr. Smith has purchased a home at 3418 Westcliff Road South and will move his family to Fort Worth about May 24.

**Dr. J. H. Miles**, formerly of Elm Street Hospital and Clinic of Denton, is now practicing in Justin, Texas.

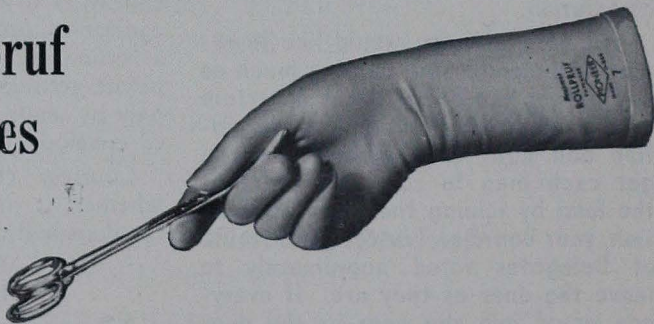
---

### NEW FINGER FREEDOM FOR YOU IN

## Pioneer Rollpruf Surgical Gloves

of DuPont Neoprene

Bare-hand freedom, sheerness, durability in Rollpruf surgical gloves. Rollpruf flat-banded cuffs, (not to be confused with gloves having both roll and band.) Won't roll down to annoy you while working, reduce tearing too, give you more wear for your money. Smooth comfortable fit. Free from allergen sometimes found in natural rubber. Call us—or send in your order today.



## *Medcalf & Thomas*

Medical Arts Building  
Fort Worth, Texas



# Officers of the District Associations of the TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS, Inc.

## DISTRICT 1

Dr. J. H. Chandler, Amarillo .....	President
Dr. W. R. Ballard, Pampa .....	President-Elect
Dr. J. Paul Price, Dumas .....	Vice-President
Dr. Ralph M. Soper, Amarillo .....	Secretary
Dr. Earle H. Mann, Amarillo .....	Treasurer

## DISTRICT 2

Dr. Hugh L. Betzner, Dallas .....	President
Dr. Ward L. Huetson, Denton .....	President-Elect
Dr. J. R. Thompson, Fort Worth .....	Vice-President
Dr. Henry A. Spivey, Denison .....	Secretary-Treasurer
Dr. H. M. Walker, Fort Worth .....	Chairman P. & P. W. Committee

## DISTRICT 3

Dr. A. Ross McKinney, Texarkana .....	President
Dr. M. L. Cline, Mount Pleasant .....	Vice-President
Dr. Wm. H. Brown, Naples .....	Secretary-Treasurer
Dr. A. Ross McKinney, Jr., Texarkana .....	Chairman P. & P. W. Committee
Dr. Wayne M. Smith, Jacksonville .....	Co-Chairman

## DISTRICT 4

Dr. W. D. Blackwood, Comanche .....	President
Dr. Edwin T. Gettins, Odessa .....	Vice-President
Dr. Wiley Rountree, San Angelo .....	Secretary
Dr. Merlin Farr Achor, Brownwood .....	Chairman P. & P. W. Committee

## DISTRICT 5

Dr. Nelson E. Dunn, Mart .....	President
Dr. Herman H. Plattner, Jewett .....	Vice-President
Dr. John D. Riggs, Groesbeck .....	Secretary-Treasurer
Dr. Wiley O. Jones, Marlin .....	Chairman P. & P. W. Committee

## DISTRICT 6

Dr. L. M. Farquharson, Houston .....	President
Dr. W. F. Hall, Houston .....	Vice-President
Dr. Gilbert Rogers, Galveston .....	Secretary-Treasurer
Dr. Edward S. Gardiner, Houston .....	Chairman P. & P. W. Committee
Dr. Irwin K. Moorhouse, Beaumont .....	Co-Chairman

## DISTRICT 7

Dr. Harold Beckwith, San Antonio .....	President
Dr. Elmer C. Baum, Austin .....	Vice President
Dr. Ira P. Stowell, San Antonio .....	Secretary
Dr. Gordon S. Beckwith, San Antonio .....	Chairman P. & P. W. Committee
Dr. Robert L. Peters, Austin .....	Co-Chairman

## DISTRICT 8

Dr. James Tyree, Corpus Christi .....	President
Dr. A. F. Scharff, McAllen .....	Vice-President
Dr. J. M. Auten, Aransas Pass .....	Secretary-Treasurer

## DISTRICT 9

Dr. A. J. Poage, El Campo .....	President
Dr. T. D. Crews, Gonzales .....	President-Elect
Dr. Don M. Mills, Victoria .....	Vice President
Dr. T. D. Crews, Gonzales .....	Secretary-Treasurer



### LOYALTY ON DISPLAY

Your waiting room, Doctor is a display room. There you will find Loyalty on Display. Your old patients are there because of their faith in you. New patients await you because of some loyal friend who has sent them to you.

So it is that in your profession, Loyalty is a priceless thing. It does not spring up over night. Rather it comes into being over a long period of time—the end result of an abiding faith—in you and your work.

If Vitaminerals have in any measure contributed to the strengthening of these ties of loyalty, it is with us a matter of great pride and deep appreciation.

For, in turn, the growth of Vitamineral's business has been dependent on the loyalty of our doctor friends who have had faith in us and in our work.

#### Personal Service by:

SIDNEY E. DENNIS      RAYFORD W. SMITH  
1310 S. MONTREAL, DALLAS 11, TEXAS

RAYMOND S. INGERSOLL  
410 NATIONAL BANK OF COMMERCE BLDG.  
SAN ANTONIO 5, TEXAS

IRA S. SEYMOUR  
2405 SAN JACINTO, HOUSTON 2, TEXAS

PROFESSIONAL LITERATURE ON REQUEST

## VITAMINERALS INC.

3636 BEVERLY BLVD., LOS ANGELES 4, CALIFORNIA