

OSTEOPATHY

BY MORRIS FISHBEIN

Despite our remarkable advance of knowledge, nonsense is ever becoming bolder and more rampant: it is pre-eminently a time of fads and crazes, and the question as to how people are to be brought to their senses grows urgent.—*W. Duncan McKim.*

For centuries deductions based upon hypotheses have served as the basis upon which the thought and conduct of the human individual have been interpreted.—*Stewart Paton.*

I

“ON JUNE 22d, 1874,” says Andrew Still, in his autobiography, “I flung to the breeze the banner of osteopathy.” Before flinging it Still had been a free-lance doctor among the Shawnee Indians in Kansas. “I soon learned to speak their tongue,” he says, “and gave them such drugs as white men used, cured most of the cases that I met, and was well received by the Shawnees.” After the Civil War, the founder and promulgator of this extraordinary doctrine of human disease became interested in some bones dug up in an Indian graveyard. From his subtle cogitations on these remnants, he became convinced that the bones are the most important elements in the functioning of the human body, and that the backbone is the bone of all bones in the control of disease. On this point, in fact, he felt himself the recipient of a divine revelation, as he emphasizes repeatedly in his story of his life. “Have faith in God as an architect and the final triumph of truth, and all will end well,” he says; and again: “Osteopathy is the greatest scientific gift of God to man.” This belief in private and confidential communion with the Deity seems to be an inevitable part of the credo of every healing cult that has interfered with the progress

of scientific medicine. It is perhaps a necessary ingredient: it lights an inward flame which gives the founder and prophet the power to attract his great hordes of fanatical followers.

The original divine revelation to Still was that the primary cause of every disease is some interference with the blood supply or nerve function, always caused by a dislocation of one of the small bones which make up the spinal column. This dislocation, he argued, brings about a change in the size of the little openings between the bones, through which the nerves and blood vessels pass. The result, according to Still, is pressure on the nerves and blood vessels, and disease at whatever distant point in the body the nerve or blood vessel may lead to. But this primeval osteopathy, handed down from heaven almost fifty years ago, was a somewhat different osteopathy from that which exists today. The gradual departure from the original tenets by his followers was a disappointment to the inspired founder. In numerous lectures delivered during 1894 and 1895 he remonstrated with them for their growing heterodoxy, and in the *Ladies' Home Journal* in 1908 he was still “believing . . . that the mechanical displacement of the bony vertebrae constitutes most of the lesions causing disease.” But even in his own school in Kirksville, Missouri, students were soon being taught to take care of a disturbance affecting the liver by adjusting the spinal column first, then waiting a week, and then adjusting the liver itself. Still was against all this. The arterial supply to the organ was solely responsible for its health, he claimed, and adjustment of

the bones to release the arterial supply would cure whatever disease beset it.

The modern osteopath, while still clinging warily to these spinal adjustments, reaches out to embrace all that he can of modern medicine. He attempts electrical treatment, water treatment, massage, anesthesia, even surgery; and when the Harrison and Volstead acts were passed he made desperate efforts to secure the privilege of prescribing narcotics and liquor. The simon pure theory of Still denies flatly that drugs may have any favorable effect on the course of disease, but the modern osteopath is apparently convinced that chloroform and ether will induce unconsciousness, that morphine and cocaine will relieve or deaden pain, and that the fermented juice of the grape has certain agreeable effects when administered in proper dosage, at proper times and to good ends. All this must be taken as evidence that the osteopathy of today is essentially an attempt to enter the practice of medicine by the back door.

II

There was a time when the standard of medical education in the United States was a matter for despair. Half educated plowboys and section hands attended a few sessions of medical lectures and burst forth in the regalia of the physician. The medical schools were shambles. Scientific medicine makes no secret of this; it glories, however, in the fact that it did its own house-cleaning. More than twenty years ago the *Journal* of the American Medical Association, under the editorship of Dr. George H. Simmons, began to publish the appalling facts regarding American medical education. That publication was like the finger of the housewife who writes her name in the dust on the mantelpiece to show the maid where to wipe. The organized medical profession promptly appointed a special committee to investigate the medical schools, to establish standards, and to hold the schools up to those standards, once they were established. The weapon used to

achieve all this was publicity. School after school, searched out and exposed, either met the standard or passed into limbo. The number in the country dwindled from almost two hundred to less than ninety. The proprietary medical school, conducted for the pecuniary profit of the professors, gave way to the endowed institution which spends on the student far more than his fees. No longer was it possible for those who could hardly read and write to emerge in two years with a medical degree. The American M.D. of today has had a high school education, two to four years of college preparation, four years among the laboratories, lecture rooms and clinics of a well-equipped medical school, and one or two years enforced attendance as an interne in a standardized hospital. Before he can minister to the sick in private practice he must also pass a State examination. The route is a long and difficult one. It is costly. That is one of the chief reasons why there are now osteopaths and other such non-descript healers.

But there are, of course, other reasons. With the advance of medical research, the naïve belief in pills and philtres with which the medical profession of the past was afflicted met a crucial test. There came a nearer and nearer approach to an actual science of medicine. Again the physicians did their own house-cleaning. They created a Council on Pharmacy and Chemistry to examine the claims made for all drugs, new and old, and to determine their actual virtues. If what was offered could not pass the test, it was put into an Index Expurgatorius and the facts were published. The public, catching this spirit from the medical profession, began to waver in its allegiance to powders and pills. It thus became psychologically receptive to the claim of the drugless healer that his "system" was superior to drugging. Many such healers went even further. Still, for example, claimed that drugs were not only of no value in the treatment of disease, but even that they were *responsible* for most disease.

III

Let us pause here a moment to consider this matter of "systems." If there is anything the normal American loves it is a "system." Consider the immense number offered to him month in and month out in the advertising pages of his favorite magazines: systems of mind training, house decorating, salesmanship, motor repairing, mushroom growing, health building, muscle building, eyesight training—systems for everything. If you would see the preposterous lengths to which the business may be carried in the pursuit of health, study the pages of the popular physical culture magazines. Now, scientific medicine offers no such system. It aims, by the utilization of *all* available knowledge, to determine the cause of disease, and then, by the use of *all* intelligent methods, to benefit and heal the disease. It does not promulgate any theory or principle to the exclusion of established facts. It does not say, for example, that "all disease arises in the spine and all diseases can be healed by manipulating the spine." Neither does it say that all disease arises in the mind and can be removed by manipulating the mind. No doubt the acceptance of such systems by what are said to be intelligent persons is based on the fact that while they are wholly fallacious they are essentially simple. Even a moron knows that when you remove the brake on a motor car the wheels can go round. And when you tell him that there are brakes in the spinal column which keep the blood from flowing freely, or the nerves from functioning properly, he thinks of the brake on the car, and is sure that the idea is right. Imagine that same type of mind trying to understand how a tubercle bacillus, which he has never seen and of which he cannot conceive, makes a cavity within a human lung! As for such matters as the way in which insulin acts to metabolize sugar in diabetes, or the way in which salvarsan controls the insidious spirochaeta pallida—to explain these things to him would be as hopeless as explaining

the theory of the well-advertised Professor Einstein. Scientific medicine admits that there are diseases of the mind and diseases of the spine, and its practitioners treat the former by mind-healing methods and frequently the latter by braces and supports and other manipulative measures. But scientific medicine does not treat an abscess of the liver by adjusting the back, nor a broken leg by attacking the mind. The great fallacy of all the "systems" of disease and their healing lies in this "all or nothing" policy. When that policy runs counter to demonstrable facts the result is invariably disaster.

IV

It was the pride of Andrew Still that a number of States had legally empowered the graduates of his school to practice osteopathy. It is our thesis that osteopathy as it is practiced today is essentially an attempt to get into the practice of medicine by the back door. In 1917, for example, the Supreme Court of Washington convicted a licensed osteopath of practicing medicine without a license because he had treated diseased tonsils by administering an anesthetic, placing a snare around the tonsils and cutting them out with a knife, after which he administered stypticin to stop bleeding. The court said:

A perusal of the successive catalogues of the schools of osteopathy will show that their teachings are gradually being expanded and that the more modern of them now teach in some degree much that is taught in the older schools of medicine. The parent school has been more marked in this respect than perhaps any of them. It now teaches that in childbirth lacerations, in certain types of congenital deformities, in certain kinds of tumors, etc., surgery must step in, and that surgery must be resorted to for the removal of tissues so badly diseased or degenerated that regeneration is impossible by the process of adjustment. *But this advance is modern. In 1909, the time of the enactment of the medical act, it was not in vogue.*

In fact, the laws of the various States which have attempted to regulate osteopathy have had a hard time of it to keep pace with the shifts of the osteopath in his attempt to break into the practice of medicine. The Supreme Court of California, for

example, told an osteopath who wanted to practice optometry that he was not licensed to fit glasses. He argued that his license to practice osteopathy under the medical practice act made him a physician and that the optometry law excepted duly licensed physicians. The Court ruled that the law permitted him to practice osteopathy and nothing more.

We have forty-nine States in the Republic and we have forty-nine different medical practice acts. The Federal Government encountered great difficulty in regulating the administration of narcotics because of this lack of uniformity. In some States osteopathy is, by legal enactment, the practice of medicine; in many others it is not. The Treasury Department, facing this conflict, became confused, and finally attempted to solve the problem by issuing the following order: "Osteopaths should be permitted to register and pay special tax under the provisions of the act of December 17, 1914, provided they are registered as physicians or practitioners under the laws of the State and affidavit to that effect is made in the application for registration. . . ." But this decision made the confusion worse than before. The word "practitioners" might include clairvoyants, Christian Scientists, seventh sons of seventh sons, and all the motley crew that prey on the weak and ailing. It might—and often did—include osteopaths.

The evolution of osteopathic practice, as shown by these and many other court decisions and departmental regulations into something resembling the practice of actual medicine is probably the reason for the relatively slow development of the cult in the matter of numbers and for the outgrowth from it of the malignant tumor, chiropractic, which is apparently about to engulf the mother organism. Osteopathy, growing complex and "scientific," ceases to meet the demand for simplicity. Chiropractic falls into no such error. It appears to be essentially a reversion to the original hypothesis of Andrew Still, so simple that even farm-hands can grasp it; indeed, an

osteopath, viewing with alarm the inroads of the new cult, has said that "chiropractic is the first three weeks of osteopathy."

In 1908 the adherents of osteopathy claimed that the mother school had graduated 2,765 students, that schools merged with it had shed upon the community another 1,181, and that there was a total of 3,946 osteopaths. According to the United States Census, there were in the United States, in 1920, about 5,030 osteopaths. There were at the same time, according to the same figures, 144,977 graduate physicians and surgeons, and 14,774 nondescript healers. Now, for a population of about 105,000,000 persons, that is certainly not a tremendous number of osteopaths. Apparently the public is finding it possible to stagger along fairly well with the attentions of the medical profession, which has been steadily raising its standards of education. It is, indeed, a confession of failure on the part of the cult that it should have departed from its original hypothesis and gradually embraced the adjustment of parts other than the spine, not to mention the use of water, heat and electricity, and of anesthetics, antiseptics and narcotics. In fact, a considerable number of its practitioners have even adopted the extraordinary hocus-pocus of Albert Abrams as a part of their diagnostic and therapeutic armamentarium. Imagine what anathema would have been hurled upon the latter group by Andrew Still! How he would have ridiculed this apotheosis of buncombe! At least there is something real about a jolt applied with the thumb and finger to the back or directly to the seat of a throbbing, inflamed organ. But think of what Still would have said, in his peculiarly exalted language, about the diagnosis of disease by hitching up a drop of blood on a piece of blotting paper to a crude and confused mass of electric wiring, connecting this inanimate, impossible electric jumble to a strange subject, and then percussing areas of dulness on this subject, and from them diagnosing disease!

It was, indeed, a weakness of osteopathy that it had ambitions to be a science. When its schools increased their entrance requirements to demand a high-school education—usually on the insistence by legislators in the form of stringent practice laws—and when they extended their hours of study, the blacksmiths, barbers, motormen and beauty specialists who sought an easy road to healing turned by the thousand to the chiropractic schools, which demanded no preliminary education for matriculation and guaranteed a diploma to any aspirant who could pay their fees.

V

Scientific medicine possesses today adequate records of its schools and its practitioners. In the offices of the American Medical Association in Chicago are all the pertinent facts about the medical colleges of the United States—the subjects taught, the hours, the teachers, the pupils. There is a card for every physician in America, and on it is recorded all that is known concerning his qualifications. As one Southern practitioner said on seeing the card devoted to his own record: "Doctor, they've got things on that card that even my wife don't know, and I've been a married man goin' on forty years." Regularly all the medical schools are submitted to a rigid inspection. But nobody knows anything for certain about most of the osteopathic schools or osteopathic practitioners. Even granting that the facts presented by the schools themselves are reliable, hours of study do not necessarily mean hours of training. Truth and scientific fact are not guaranteed by the time spent in instruction but by the reliability of the subject matter taught. And what of the training of the teachers in the colleges of osteopathy: is it perhaps a case of the blind leading the blind? The truth of the osteopathic theory as to the causation of disease has never, of course, been established. If diphtheria bacilli are placed on the membranes of the throat of animal or man, the result is diphtheria. In their ab-

sence, no possible dislocation or distortion of bones, muscles, ligaments, blood vessels or nerves will bring about that result.

VI

Here are two quotations from a report written by the editor of an osteopathic magazine; they refer to the death of his own son:

Billie had diphtheria four days before we knew what he had . . . I had never seen a case of diphtheria before; never even thought of looking at his throat . . . Dr.— was called the fourth day and diagnosed the trouble at once. He is an M.D.; has had wide experience; has had the training so many of us have not had.

And then later:

I don't understand antitoxin; I can't understand how a poison can cure disease or neutralize poisons. Yet when the death rate is cut from 50 per cent. to 10 per cent., isn't it best to be a physician first, and an osteopath second?

Osteopathy, chiropractic, Couéism, Christian Science, every system of healing without regard to established facts, comes a cropper when confronted with the established proof of the diagnosis and treatment of infectious diseases. The case of Billie is an exposure of the fallacy that an individual may be safely permitted to practice a single branch of medicine without first undergoing complete instruction in all the fundamentals of medical science. But when the incompetent undergoes such a complete course of instruction, there is revealed to him, alas, the underlying lack of truth in the "system" or cult to which he has been addicted!

Physicians see almost daily in their practice the results of patients peddling their ailments among the variegated assortment of peculiar practitioners. Perhaps none of the cases which might be cited is more striking than the one described by a well-known eastern neurologist:

Recently I examined a boy, aged 17, lying in bed, very weak, extremely emaciated, totally blind, barely able to swallow. The ophthalmoscope [the instru-

ment which the physician uses to look into the back of the eye] revealed double optic atrophy [destruction of the optic nerves]. The history of the case is briefly: failing vision over nine months, terminating in blindness last August; for several months in the spring and summer of 1920, very severe headaches and frequent attacks of vomiting, often when there was no food in the stomach, and repeated convulsive seizures limited to the right leg without loss of consciousness. It was easy to make a diagnosis of brain tumor; but the condition of the patient was such that surgical interference was out of the question. The diagnosis, which seemed perfectly clear, might easily have been made many months ago. The condition of the patient for many months was certainly grave and alarming, and might have suggested to anyone that it needed thorough investigation. During all these months, while the vision was fading and blindness coming on, what did the boy receive? Treatment by an osteopath and then a chiropractor and then treatment by another peculiar practitioner and still another chiropractor, and so on, but never an ophthalmoscopic examination.

VII

Well, why do people go to osteopaths anyway? Don't they ever help anybody? People go to osteopaths because they have been directly approached through advertising, in which reputable physicians do not indulge. They go because some friend who has been aided by an osteopath, or thinks he has, has urged them to go. They go when physicians have failed them. Ah! yes. I grant you freely that physicians fail. There are diseases in which science can be of but little service, and if the doctor is honest he will tell you so. I know a woman who has been suffering three years or more with a gradually progressing case of paralysis agitans or shaking palsy. Three eminent neurologists told her that her condition was incurable; they prescribed a simple regime of life and told her to save her money for the invalidism of her remaining years. But during three and one half years she has spent every cent of her income on massage, on electric treatment, on nature cures, and on osteopathy, and she is undoubtedly worse. And I am willing to admit that among those who treated her was a physician who should have known better. The incompetent or unprincipled physician, licensed to practice medicine by a too complaisant State, is the greatest menace to scientific medicine—as

great a menace as all the cultists put together.

Osteopathic or any other kind of manipulation undoubtedly produces, at times, temporary benefit, or the feeling of benefit. The old-time physician used to put his hands on the patient; he used to work him up a bit, while at the same time he encouraged him mentally. There are many who feel that the modern physician might practice a little more of this laying on of hands. But it does not require an extraordinary mentality to see how serious it is to practice merely the laying on of hands and the conferring of a temporary feeling of benefit when a child is beginning to strangle with the accumulated debris of a diphtheritic membrane, or when the life of a woman is being slowly sapped by an internal, malignant tumor, or when some previously uncautious man is beginning to show the first signs of paralysis and the delusions of grandeur associated with an early encounter with the *spirochaeta pallida* of syphilis. These are surely no times for the laying on of hands; these are times for accurate diagnosis, and the speedy administration of the life-saving diphtheria antitoxin, the merciful surgical knife, and the destroyers of spirochetes: mercury and salvarsan.

In 1875, when Andrew Still went from Kansas to Kirksville, he found a letter addressed to his brother Edward from another brother, the Rev. James M. Still of Eudora, Kansas, "stating that I was crazy, had lost my mind and supply of truth-loving manhood." Still's comment on this letter, taken from his autobiography, offers a remarkable sidelight on the motives of the founder of osteopathy. "I read it," says Still, "and thought, 'As the eagle stirreth up her nest, so stir away, Jim, till your head lets down some of the milk of reason into some of the starved lobes of your brain.' I believed Jim's brain would ripen in time, so I let him pray, until at the end of eighteen years he said: 'Hallelujah, Drew, you are right; *there is money in it*, and I want to study Osteopathy!'"

The italics are mine.

AMERICAN PORTRAITS

I. The Labor Leader

BY JAMES M. CAIN

HE is recruited from people of the sort that nice ladies call common. Such people are mostly out of sight in the cities. The streets they inhabit are remote from the boulevards; their doings are too sordid and trivial for newspaper notice, save when the police are called in. In the small towns they are more openly on view, to the horror of the old families. Big city or small town, they are all alike. They are of the sort that mop up the plate with bread. That have 6 x 8 porches on their homes, and wash flapping on the clotheslines. That take a bath every Saturday night, and slosh blue, soapy water down the gutters. That own a \$25 phonograph and these four records: "In the Shade of the Old Apple Tree," "Barney Google," "Walking with Jesus" (Orpheus Quartet), and "Cohen on the Telephone." That join the Heptasophs, the Junior Order, and (if getting up in the world), the Odd Fellows. Whose women-folk grow fat and rock on the porches wearing blue check dresses. Whose men-folk are laid up with elusive ailments related to the stum-mick. Whose female children know gross names for the anatomical parts and harass other children by yelling:

I dare you like a dare dog,
I treat you like a hound;
I sell you to the rag man,
Two cents a pound!

And whose male children sing:

There she goes, sweet as a rose,
All dressed up in her best Sunday clo'es!

Who say Mom and Pap, I'll Thank You for the Beans, Ain't No Use to Hissself, Yes'm, See You Later, Lick That Kid, Make Him Shut Up. . . .

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Cockney or yokel, that is where he starts. He is of the same clay as this grotesque company, and sees nothing queer about it. The village blacksmith, who whispers to a lot of boys about the bank president's daughter, he considers a very sharp and well-informed man. He believes the plumber's wife who swears she saw a ghost in the graveyard, and hunches close to her while she jibbers. . . . The boy who fol-lered 'em and seen 'em; women muttering over backyard fences; the Grand Exalted Keeper of Records and Seals, dusting off the regalia; the party that went to the morgue to see the razor-slashed body of the woman in the big mystery murder; the wife who says the Mister ain't home when his growlings are plainly audible; the man who knowed the feller didn't kill hisself; the man who says there are some funny things a-going on, I'm a-telling you; the preacher who says Prepare to Meet Thy God, the End of the World is at Hand. . . . All these sisters and brothers he accepts without question. Doesn't he see ghosts himself, sometimes? Wasn't he thinking about that very suicide case? Didn't he go to the morgue himself and hold that kid's perspiring hand while she gasped? What is out of the way in all this? What else would you? Suspicion, credulity, secrecy, hog meat, cabbage, fat: all perfectly natural, all part of the zest of life.

II

Given sufficient numbers of them and a *casus belli*, it is very easy to organize such people into labor unions. Why they or-