

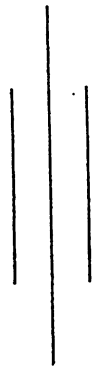
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# FACTS

WHAT CHIROPRACTIC HAS DONE  
FOR INSANITY

BY

HON. JUDGE, A. W. PONATH  
COUNTY JUDGE OF THE PROBATE COURT OF RICHLAND COUNTY  
WAHPETON, NORTH DAKOTA





HON. JUDGE, A. W. PONATH

“Don't let future generations look back upon us with pity on account of our inexcusable lack of interest in the most unfortunates among us.”

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*The within pamphlet was written previous to the 1935 session of the  
North Dakota Legislature*

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At the session a bill was introduced providing for Chiropractors on the staff at the Jamestown State Insane Asylum. At first it also provided that the Superintendent could not be a Medical Doctor on the theory, conclusively proven by the statements and record of a majority of Medical Superintendents, that a Medical Superintendent usually does not give a Chiropractor cooperation, or a chance, but deliberately blocks the work. The bill passed the House, but was defeated in the Senate purely because Senators were not fully informed and many allowed themselves to be misled, and would not investigate the facts. In this connection it was most gratifying that not one of the facts stated in the within pamphlet was disproven, and the writer repeatedly asked Doctor Carr and other Medical Doctors to bring proof that the pamphlet was wrong. A copy of the pamphlet had been given to practically every Representative and Senator. Such demands were made openly and before committees. RESULT—no proof having been brought disproving any facts, we have added reason why every means should be used to bring Chiropractic treatment to the insane.

The writer has investigated conditions in Minnesota and is informed that a New Asylum is to be built, and would therefore urge that if a new asylum is built it be made a Chiropractic Insane Asylum, wholly in charge of Chiropractors. If no new asylum

is to be built turn one of the existing insane asylums over to the Chiropractors. If they are no good—speaking now as though we had no proof that they are good which I submit we have—it would soon be proven. If they are good they would soon prove it. I ask **why not do this?** Do I hear some one say we cannot afford to take a chance with the patients? I answer, can the patients be any worse off than they are now when 70 to 75 out of every hundred are doomed to an asylum prison for life? If Forest Park with limited capacity can do wonderful work they can do ten times as much if given the opportunity in a state insane asylum. Chiropractors without number can and do testify what wonderful results they have had with the insane in private practice. Up to date forty-four insane patients have been handled by Forest Park, all from North Dakota, twenty-seven of these have either been cured or sufficiently recovered so they can remain at home and resume their former responsibility. Two patients have been returned to the state hospital, while one died and fourteen are still in the institution, the majority of whom came in since the first of the year, and are making satisfactory progress.

God grant us reason and understanding.

Sincerely,

A. W. PONATH

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# Information Relative to Care and Treatment of Insane Patients, and Proposal for Change of Methods

Based on Observation and Certain Experiments Made in North Dakota and Elsewhere

Referring to the twenty-fourth bi-ennial report of the North Dakota Insane Asylum for the period ending June 30, 1933, as made up and submitted by Superintendent J. D. Carr, the following figures are revealed:

Discharges of insane patients for bi-ennial period ending June 30, 1932—23.3%.

Total discharges of patients from same asylum since 1885 to 1933—38.6% of number admitted.

Discharges of patients during period 1924 to 1932—27.8%.

Cost of running Insane Asylum two year period ending June 30, 1932—\$447,684.27, or \$294.14 per patient per year.

The institution employs seven (7) regular physicians and twelve (12) consulting physicians. It does not appear whether the twelve consulting physicians were paid but it is reasonable to assume that if they rendered service they were paid. This, however, may not be material.

In June, 1933, Richland County took seven patients from Jamestown Insane Asylum, who had been there various periods of time, and sent the seven to a Chiropractic Sanitarium at Davenport, Iowa, named Forest Park. The reason this was done was because of the extraordinary showing this institution, Forest Park, had made on insane patients during its existence, namely, since 1922. Forest Park showing 65% cures or satisfactory discharges of insane patients during this period, as compared to 27.8% discharges by Jamestown Insane Asylum. Forest Park showed this percentage of cures on

patients who for the most part had already spent considerable time in asylums or sanitariums where the practice is like or very similar to that used at the North Dakota Asylum, and which patients in many cases had been declared incurable by such asylums or sanitariums, all of which were under the control of Medical Authorities, the same as the North Dakota Asylum. A record of a few of the cases handled by Forest Park will be given hereafter more in detail. Concerning the seven patients, Dr. Carr, Superintendent at Jamestown, wrote as follows to an inquirer who had heard of the experiment at Forest Park:

Letter dated January 2, 1934

"Dear Sir:

Your letter addressed to Governor Langer has been referred to me and in reply to it I would say that it would be hard to say whether chiropractic would help your wife until we had thoroughly examined her. If there is something wrong with her spine chiropractic might help but if it is the nervous system and brain that is the trouble then she would not be helped by this treatment. Chiropractic treatment has nothing to do with disease of the brain and I do not think a patient suffering with insanity could be helped by this treatment" . . .

Another letter to same party by Dr. Carr dated February 7, 1934

"Dear Sir:

I have your letter in which you asked me what the results are in regard to the patients that were taken from here to the Sani-

tarium in Davenport and in reply will say that I have had no report from there except that the patients are all there and I do not expect any of them to get any better. The patients that went there were considered chronic patients and I do not expect any of them to be any better" . . .

At that time the purpose was to send at least twelve patients, and later to add to this number so as to have more numbers to obtain a percentage as to comparative benefits, Insane Asylum vs. Forest Park and Chiropractic. Dr. Carr, however, soon indicated by a letter to Judge A. W. Ponath that the Medical men were not saying anything complimentary to Dr. Carr because he had permitted the sending of patients to a sanitarium using Chiropractic.

**What Were the Results** of the seven patients? Three were discharged as of July, 1934. But, says the objector, we do not know that they will not have to be taken back to an insane hospital. The answer to this is that many patients discharged by the North Dakota Insane Hospital have been returned after they were discharged, and further than this, two of the seven who have not been discharged have been helped and are very much improved. Remember that the seven were declared chronic and never to get any better by Dr. Carr in his letter of February 7, 1934. Three out of seven is 43%. Jamestown has about 1700 inmates. Let us be very conservative. Let me say only 25% could be helped. Twenty-five per cent of 1700 is much over 400 patients less.

Pembina County and Cass County, North Dakota, also sent patients. Pembina County is gratified they have obtained results. Forest Park has demonstrated to them that Chiropractic is of value for mental cases. Patients from elsewhere have been helped.

But the objector will say this is not enough evidence. We have more. Six patients were sent direct from Richland County, as they appeared before the insanity board. There were more, but we use six as a basis be-

cause those above that number have not been at Forest Park long enough to be considered. Of the six, however, 66 $\frac{2}{3}$ % have been discharged and without exception are doing fine. All six were bad cases. The two still at Forest Park out of the six are so much better in the opinion of the writer they will be discharged, which would be 100% results. The records for this and all these facts can be had at the office of County Judge A. W. Ponath, Wahpeton, N. D. We do not intend to give anything but the facts.

The objector will again say that this may not be enough to advocate a change in methods. In answer to this it is surely in order to point out that Forest Park, Davenport, Iowa, has been operating since 1922. From 1922 to 1934 they, Forest Park, have obtained 65% results, for which the patients themselves and their relatives will vouch. During this period of time Forest Park has treated hundreds of insane cases and among them were many that had been classified as chronic and incurable by Medical Doctors. Surely this record proves that Chiropractic, or Forest Park through Chiropractic, was successful where other so called recognized methods failed. And if this record, 65%, can be obtained on cases where the large percentage are classed incurable and had already spent **much time in insane asylums** and other sanitariums, **how much more can Chiropractic** do if given the opportunity to handle the patients immediately after being brought to an insane asylum, rather than months or years later when their constitution has been run down by deterioration or prolonged mental disability or both. Laymen as well as professional men will agree that there is always a better chance for cure **if methods are used from the beginning that are right**. If an insane asylum therefore falls down on the job, fails to obtain a cure, after that a Chiropractic Sanitarium takes the case and gets a cure, can there be any successful contradiction of such a fact? This being a fact, Chiropractic must be the **better method for such cases** and therefore Chiropractic should be used in the insane asylum so that the insane

patient may have the benefit of Chiropractic in the **early stage of the disease.**

Following is a list of cases handled by Forest Park Sanitarium, who were cured. This is a further proof of the need of placing Chiropractic into the North Dakota insane asylum:

K. S., Fargo, North Dakota—Age 20:

Admitted to North Dakota Asylum, February, 1934. Admitted to Forest Park, Davenport, Iowa, April 12, 1934. Symptoms—very violent, religious delusions, necessary to restrain him. Diagnosis—Dementia Praecox. Discharged from Forest Park in June, 1934. Letter received from the mother of patient on January 20, 1935, states her son is enjoying the best of health, that he is working in his former position and has received a raise in wages since returning to his work.

Mrs. B. S., Stuart, Iowa—Age 52:

Confined to state hospital at Clarinda, Iowa, in February, 1928. Symptoms—Melancholy, resistive, insisted on her own ideas, refused to eat. Diagnosis—Involuntional Melancholia. Entered Forest Park in September, 1928; discharged a few months later. Letter received January 3, 1935, from Mr. S. states as follows: "Mrs. S. is getting along fine, does her own work and waits on me as I have been confined to the house for two years. She now weighs 155 pounds where she did weigh 90 pounds, so you can see she is quite some woman."

J. S., Tyndall, South Dakota—Age 22:

Entered Forest Park, December 7, 1930. Symptoms—Boils, pain caused from boils resulted in loss of sleep. Cried a lot, wished to die, religious delusions. After several months patient was discharged and has been normal since.

B. V., Chicago, Illinois—Age 18:

Entered a psychopathic hospital in October, 1932. In November, 1932, she was brought to Forest Park. Symptoms—Religious delusions, stubborn, violent, cried

and laughed and talked incoherently. Diagnosed as acute mania. Discharged from Forest Park, April 9, 1933. Letter received from patient states she is doing fine.

J. A., Carroll, Iowa—Age 33:

First admitted to Clarinda State Hospital in Iowa, in May, 1927. There until July 28, 1927. Paroled, but returned to Clarinda State Hospital on November 11, 1927. Symptoms—Extremely nervous, religious delusions. Diagnosed as Toxic Infectious Psychosis. Was brought to Forest Park in December, 1927, discharged soon afterwards and is enjoying good health.

P. M., Corbin, Kentucky—Age 18:

In March, 1927, was taken to a sanitarium in Louisville, Kentucky, where he remained for six weeks. In March, 1928, entered Forest Park. Symptoms—Very nervous, had delusions, talked at random, thought he was a car salesman. Diagnosed as Dementia Praecox. Discharged from Forest Park in October, 1928. Long letter received from patient January 23, 1935, from the Marine Base in San Diego, California, states in part, as follows: "If I'm not mistaken I was a patient there from March 31, 1928, until October 30, 1928, 7 months well spent and also a great turning point in my life. I've never been able to tell my parents in words how much good they did me by sending me to your wonderful sanitarium." He writes further about his experiences as a Marine, and that he expects to marry in the spring. An announcement of his wedding was received by Forest Park in April, 1935.

C. L., St. Paul, Minnesota—Age 16:

Became insane after an attack of flu in September, 1929. Taken to the state asylum in St. Peter, Minnesota, where he remained until March, 1930. Transferred to Forest Park March 10, 1930, and discharged May 20, 1930. Letter received January 14, 1935, from patient, stated he was working in a print shop, and enjoying the best of health, also that he had married in July, 1934, and was very happy.

J. L., Detroit Lakes, Minnesota—Age 22:

Symptoms—Insomnia, despondent, sometimes violent and boisterous. Suffers from hallucinations and delusions. Entered Forest Park December 25, 1927, discharged February 24, 1928. Enjoying good health since returning home.

C. S., DeKalb, Illinois—Age 46.

Occupation, mason and contractor. Symptoms—Nervous, impatient, talkative, violent for a while. Was confined to bed under care of a trained nurse. July 14, 1930, was taken to private sanitarium. Following February taken home, and in March, 1931, was taken to Elgin Rest Haven at Elgin, Illinois, where he remained until July 19, 1931, when he was taken to Forest Park. Discharged from Forest Park November 19, 1931. Diagnosed as Depressive Mania. Latest letter from patient was on January 6, 1935, stating as follows: "... It gives me much pleasure to write that I am enjoying good health; and have been since I was at Forest Park ..."

H. F., Kellerton, Iowa—Age 16:

Symptoms—January, 1930, suffered complete nervous breakdown, advised to send to Clarinda State Hospital, but this was not done until January, 1931. From there, on July 5, 1931, he was transferred to Forest Park. Diagnosed as Dementia Praecox. Discharged from Forest Park in November, 1931. Letters from patient and family indicate he is doing fine.

L. W., Bunker, Missouri—Age 19:

Symptoms — Excited, disturbed, combative. Entered Forest Park January 19, 1933, discharged May 14, 1933. Diagnosed as Dementia Praecox. Has been working at Forest Park ever since being discharged and is enjoying good health.

Mrs. L. S., Corydon, Iowa—Age 35:

Married, two children. History — Run down, nervous, despondent, vitality low,

low blood pressure. Entered Clarinda State Hospital in June, 1931. Remained there until in February, 1932. Had to be tube-fed for a while at Clarinda. October 16, 1932, was brought to Forest Park Sanitarium. Immediately previous to coming to Forest Park she was confined to bed for three months. Was discharged from Forest Park several months later, and has been normal ever since. Letters received from her states that she is at home, enjoying good health, and taking care of her home and family.

Mrs. M. S., Woodbine, Illinois—Age 30:

History — Nervous, severe headaches, thought she was choking, severe backache, and her legs ached. Thought she had peculiar power over whole world. October, 1931, entered Medical Hospital in Freeport, Illinois. After ten days took her home, and later took her to St. Joseph's in Dubuque, Iowa, where she stayed ten days, and on November 25, 1931, was taken to Forest Park. Discharged from Forest Park, March 24, 1932, and husband advises that she is fine. Diagnosis—Depressive Mania.

L. K., Gilmore City, Iowa—Age 35:

History—In 1923 was at Hill's Retreat, a private institution, for one month, and then returned to the home of sister. From there taken to state institution at Cherokee, where she remained five months. Returned to the home of brother and a short time later sent to Cherokee State Institution for a period of three-years. Entered Forest Park November 15, 1929, and discharged June 15, 1930. State Hospital diagnosis was Dementia Praecox. Forest Park diagnosis was Depressive Mania. After being discharged from the institution she was retained as a nurse at the institution until November, 1931. Visited relatives for a while and then returned as regular nurse, and has enjoyed good health ever since.

H. S., Muscatine, Iowa—Age 30:

History—Nervous, diagnosed as Dementia Praecox, or of a possible Neurosyphilis. In 1929 sent to state hospital at Mt. Pleasant, Iowa. Remained for eleven months, paroled and discharged as unimproved. In 1932 patient was at private hospital where he stayed for eight months. Entered Forest Park May 10, 1933, discharged November 1, 1933, and has enjoyed good health since.

H. F., Farmer City, Illinois—Age 29:

In August, 1932, became very nervous, taken to hospital and strapped to bed pending removal to state hospital; however, patient was brought to Foerst Park August 21, 1932. Was combative, would fight at first opportunity; necessary to restrain him for a while. Diagnosed as Acute Mania. Discharged November 12, 1932. Letters received state that he is doing nicely and enjoying good health.

D. P., Willow Lake, South Dakota—Age 21:

From 1923 to 1931 had trouble. In September, 1931, taken to state hospital at Yankton, South Dakota, where he remained for ten months without relief. Diagnosed as Dementia Praecox. Entered Forest Park June 24, 1933, after spending 17 months in private institutions without relief. Discharged from Forest Park November 28, 1933. Last report from the mother of the patient was that he was getting along fine, and working every day on the farm.

A. D., Rhodes, Iowa—Age 34:

Married. First symptoms in April, 1927. About a month later wife found him in barn with rope around his neck in an attempt to commit suicide. Taken to University Hospital at Iowa City where he remained for two months, but made several attempts at his own life. Taken to Hill's Retreat, remained for six weeks; home for two months but his condition was the same. Condition gradually grew worse

until he was committed to State Hospital at Independence, Iowa, November, 1928, where he was transferred to Forest Park on June 4, 1929, and was discharged August 9, 1929. Diagnosed as Depressive Mania. Letter received from Mr. D. on December 27, 1934, stated that he was enjoying the best of health since his return from Davenport, and that if the crop this year was good he and his family intended visiting the sanitarium this summer.

J. D., Marshfield, Wisconsin—Age 19:

Taken to State Hospital January 14, 1930. Disturbed and confused. Thought he had done something wrong, had religious delusion. Would not keep clothes on, and when his folks visited him would not talk to them. Entered Forest Park from State Hospital on April 28, 1930. Diagnosed as Toxic Infectious Psychosis. Discharged from Forest Park July 26, 1930. Since married and is happy and enjoying good health.

L. D., Danville, Illinois—Age 17:

History—Undernourished, nervous, suffered complete breakdown. January, 1930, would cry at times and then laugh incessantly. Could not sleep. Entered Forest Park January 27, 1930, discharged March 24, 1930. Diagnosed as Neurosis. Letter received January 12, 1935, states she is enjoying the best of health, and that she is attending college in Missouri.

M. L., Union, Iowa—Age 22:

Manifested mental breakdown during 1925, when he was committed to the State Hospital for the Insane at Cherokee, Iowa, where he remained for two years. Was admitted to Forest Park July 6, 1927. Symptoms—Extremely violent and mentally deranged. State Hospital diagnosed case as Dementia Praecox. Forest Park diagnosed it as Depressive Mania. Patient later took a course at Brown Business College in Davenport, is married and getting along nicely.



L. H., Java, South Dakota—Age 23:

Entered Yankton State Hospital at Yankton, S. D., May 31, 1933. Had to be tube-fed for several months. Entered Forest Park December 4, 1933, at which time she weighed 82 pounds. Did not recognize her own name, and her mind was apparently a complete blank. She was released from the Yankton State Hospital in South Dakota as an unimproved case. Diagnosed as Dementia Praecox. Discharged from Forest Park March 14, 1934, recovered and weighing 132 pounds.

D. R., Green Bay, Wisconsin—Age 18:

Entered Private Sanitarium, Oconomowoc, Wisconsin, May, 1933. At times she would eat and at other times had to be tube-fed. Manifested a complete change in personality, mostly in a religious order. Released from Oconomowoc, October 1933, returning home, and after three weeks suffered a relapse and was taken to the state hospital at Winnebago, Wisconsin. Had to be tube-fed at state hospital for three months. Released from hospital May 13, 1934, as a case which had showed very little improvement. Entered Forest Park May 17, 1934, weighing 102 pounds. Discharged July 31, 1934, weighing 130 pounds. She has since been married and is living in Alabama and enjoying good health. Winnebago State Hospital diagnosed the case as Dementia Praecox of the Catatonic type. Forest Park diagnosed case as Dementia Praecox of the Paranoia type.

L. M., Linn, Kansas—Age 23:

Symptoms—Very much excited, religious delusions. Said everything looked double to him, and talked and acted very strange. Taken to Topeka State Hospital, where he was kept in bed, and was diagnosed as Dementia Praecox of the Catatonic type. Entered Forest Park February 19, 1934, discharged May 28, 1934. Forest Park diagnosed case as Dementia Praecox, with some manifestations of Catatonia.

Patient getting along fine since returning home, and letter received from mother on January 23, 1935, states that he is working every day on the farm and feeling fine.

Mrs. G. H., Aberdeen, South Dakota:

History—Worried about children, had delusions, thought house was on fire. Was afraid someone was coming into the house. Developed religious delusions, talked and sang, had to be strapped in bed and watched continuously. Swore and talked incoherently. Had a ravenous appetite. Entered Forest Park December 30, 1932, discharged June 22, 1933. Diagnosed as Acute Mania. Letter written by patient January 18, 1935, states that she is enjoying perfect health, and that she is taking care of her home and five children and enjoying life.

W. B., Wichita, Kansas—Age 18:

History—During summer of 1930 became very nervous and was placed in a hospital for observation, was in a locked cell and kept under a sedative. Very delusional, had hallucinations of receiving codes. Was afraid he was being poisoned. Came out of first attack, but suffered a relapse shortly and had to be strapped to the bed. Entered Forest Park September 30, 1930, discharged January 14, 1931. Diagnosed as a case of Toxic Infectious Psychosis. Letter received January 1, 1935, from father of the patient, referring another patient to the Forest Park Sanitarium, and stating that he hoped we could do the same for this patient as we did for his son, as he was working every day and enjoying perfect health.

Mrs. J. A., Baldwin, Wisconsin—Age 37:

Married. Symptoms—Worried over family difficulties, could not sleep, very nervous, talked continuously. On February 2, 1934, taken to a private institution, where she remained for three and a half months

without any improvement. Entered Forest Park May 20, 1934, discharged September 15, 1934. Diagnosed as a case of Depressive Mania. Letter received from patient December 26, 1934, states in part as follows: "I am enjoying the best of health, and am again taking in my home duties as usual."

F. S., Cedar Rapids, Iowa—Age 31.

Symptoms—November, 1932, became very restless, worried about everything, talked about and attempted suicide, crying spells expressed great fear, thought someone was going to harm him. Thought he had done some great wrong. Entered Forest Park March 9, 1933, discharged on June 18, 1933. Diagnosed as a case of Toxic Infectious Psychosis. Letter received from Mrs. S., December 30, 1934, stated that her husband was well and working hard every day trying to regain what they lost during his illness.

E. S., Washington, Missouri—Age 29:

Symptoms—Nervous and quarrelsome at times. Condition gradually grew worse, she became more nervous and quarrelsome and threatened to fight her parents. Talked to herself, threw things around, such as dishes, etc. Abuses her parents. Entered Forest Park July 23, 1932, discharged October 4, 1932. Diagnosed Oementia Praecox. Letter received in December, 1934, from patient states that she is enjoying good health, and plans to visit Forest Park sometime in the near future.

Mrs. R. S., Iowa—Married—Age 41:

History—Patient was married at the age of 19, and has had four children. In May 1926 patient had a slight sinking spell and didn't speak for about two hours—following this was irritable and at times would cry when crossed, or over-exerted after a heavy day's work. Gradually grew more irritable and nervous until during the early part of October when it became necessary to confine her to an institution for treatment. Entered Forest Park Sani-

tarium December 31, 1928, and after five months' treatment, patient was discharged and has been at home since, doing her own work and enjoying good health. Letter received from patient under date of December 30, 1934, states in part as follows: "— I am in the best of health and am so happy to be able to do my work and care for my family, who by the way are growing up so fast, and some getting married. I should feel older but don't believe I do. —"

D. G., Illinois—Age 18.

History—More or less nervous during his high school days, and had to be kept out of school for a while. In 1928 started his fourth year of high school, but had to be taken out as he became too nervous to continue. Improved gradually until in November patient was quite well, but the following January he had a relapse and became violent and abusive with parents. Thought he was a prize fighter. Talked incoherently and incessantly. Entered Forest Park March 18, 1929, and discharged September 18, 1929. Diagnosed as Dementia Praecox. Patient has been at home since his discharge from Forest Park Sanitarium and letters received from him states that he is doing very good, and that he is enjoying the best of health.

E. E., Iowa—Age 19:

History—During the summer of 1931 the patient suffered what the doctors termed heat exhaustion. Became very nervous, had crying spells, but began to show a gradual improvement until in 1933 she became worse. Became more nervous and delusional. Imagined she saw things, became suspicious of being poisoned. At times was jovial and then remorseful and brooding. Patient entered Forest Park Sanitarium June 2, 1933, and after two months was discharged. Diagnosed as a case of Toxic Psychosis. Letter received from the mother during January of this year, states that E. is at present working, that she is enjoying the best of health and is much interested in her work.

L. K., Iowa—Age 19:

History—Condition developed in 1933, gradually grew worse until in February, 1934, was taken to the State Hospital at Mt. Pleasant, Iowa. Would argue without reason, become very nervous and irritable. Would stay out all night, without folks knowing where he was. Entered Forest Park April 20, 1934, discharged September 4, 1935. Diagnosed as Acute Mania. Patient has been at home and working since his discharge from Forest Park. Visits the institution occasionally and states he is enjoying the best of health.

M. B., Iowa—Age 19:

History—Mental condition developed early in 1932. Patient became very nervous and excitable. Wanted to rent more land and make money fast. Thought he could run the country, would spend money foolishly. Threw gasoline on fire, etc. Entered Forest Park April 7, 1932, discharged August 3, 1932. Diagnosed as Acute Mania. Letters received state that patient is enjoying the best of health since leaving the institution. Letter received from patient in December 1934, from Wyoming, states in part as follows: "I came out to Wyoming last July, I sure like it out here, and I am working on a cattle ranch. I am feeling fine, and weigh 165 pounds without my clothes on. I would like to come up and pay you a visit some time if I ever get around to it. I expect to stay in this country until next fall anyway, maybe longer."

T. H., Michigan—Age 33.

History—During the early spring of 1934, suffered a severe illness and after about two weeks had a complete breakdown. Thought he was going to die, wanted to get away, attempted suicide. Talked incoherently. Had religious delusions. Slept very poor, appetite not good, and suffered fainting spells. Entered Forest Park Sanitarium June 25, 1934, discharged August

25, 1934. Diagnosed as Dementia Praecox. Patient has been home since being discharged from Forest Park and has been enjoying good health. Letter from patient states as follows: "I am enjoying the best of health. I am doing all kinds of work again and feeling fine. I am sorry I did not write to you before. Forest Park has been a wonderful place for me, and I cannot say enough for the way you have treated me."

F. H., Colorado:

History—Patient suffered first attack about twelve years ago, at which time he was in the state hospital for several months. Was normal for a time and then had a relapse and was returned to the state hospital. Talked continuously about any and all subjects. Would become very nervous and excitable, couldn't sleep and would talk all night long. Entered Forest Park November 2, 1934, discharged March 15, 1935. Diagnosed Depressive Mania. Letter received from Mrs. H. under date of June 27, 1935, states that Mr. H. is just fine, and that he is his old self since returning home.

E. S., Wisconsin—Age 18:

History—Condition first developed in the fall of 1930. Became very stubborn, would not do a thing he was told. Was taken to the state hospital where he remained for several months, when he was paroled but had to be returned. Entered Forest Park August 18, 1932, discharged December 19, 1932. Diagnosed as Dementia Praecox. Letter received in March 1935, states that patient is feeling fine and that he is working in a CCC camp and likes it fine.

D. K., Iowa—Age 27:

History — Condition developed in the spring of 1931. Patient began to cry, afraid no one would be here to care for her if her parents would die. Talked of suicide. Taken to the State Hospital in

September 1931, where she remained until October 12, 1932, when she was brought to Forest Park. No improvement shown while at state hospital. State Hospital diagnosed the case as Dementia Praecox. Forest Park diagnosed as Mental deficiency, bordering on psychosis. Discharged from Forest Park August 19, 1933. Letters received from patient and her mother also, states that she is enjoying life at home.

Mrs. T. G. B., Wisconsin—Age 67:

History—Patient has a history of several operations, which resulted in a disturbance of the nervous system, and a final nervous breakdown. Worried about children, became melancholy and couldn't sleep, also had financial reverses which worried her a great deal. Afraid to be alone. Entered Forest Park July 26, 1933, discharged September 1, 1933. Diagnosed as Depressive Mania. Letters received from Mr. B. states Mrs. B. is feeling fine, and that she has never felt better in her life.

Mrs. A. S., North Dakota—Age 47:

History—Patient was nervous, irritable, appetite poor, sleep poor. Couldn't get along with family. Entered Forest Park June 28, 1933, discharged July 28, 1934. Diagnosed as case of Depressive Mania. Letter received from Mrs. S. in December 29, 1934, states that she is home with her family, and that she is enjoying good health.

R. T., Oklahoma—Male, Age 24:

History—Patient has always been of a retiring disposition. At the age of twenty-one had a disappointment in love, over which he seemed to brood. Shortly after this while he was alone at work he said he was handling a gun, which accidentally discharged and he was shot through the heart region. Recovered from the wound but seemed to brood over the acci-

dent. Lost interest in everything, and expressed the idea that he did not care to live. Was taken to a private sanitarium in 1928 where he remained for about a year, and returned home in an improved condition, but when he could not find work he again became despondent and lost interest in everything, and had to be taken to a state hospital. Entered Forest Park September 30, 1929, discharged August 22, 1931. Diagnosed as case of Dementia Praecox. Letter received three or four months ago from the patient, states that he is enjoying good health, that he is taking up photography, and that he never will forget the treatment and care he received while at Forest Park.

C. T., Florida—Male, Age 15:

History—During the fall of 1933 became very nervous as the result of carrying too much heavy school work. When patient changed his schedule he seemed to improve, but in the following January during examination time he became quite nervous again, until in the spring he had to discontinue school work. Restless at night, talked incoherently, thought he was being trailed. Had crying and moaning spells. Taken to private institution, but did not seem to improve. Entered Forest Park July 4, 1934, discharged October 2, 1934. Diagnosed as Toxic Infectious Psychosis. Letters received from patient and from his folks state that he is getting along fine, and enjoying the best of health.

M. S., Kansas—Male, Age 22:

History—In the fall of 1934 patient was injured and was unconscious for a time, but apparently suffered no after effects. In the early part of December became involved in a love affair. Became very nervous, talked about religion, talked incoherently for a time and then quit talking altogether, also quit eating. Was taken to a private institution where he remained for about a month, before he was trans-

ferred to Forest Park. Was brought to Forest Park January 10, 1935, in an ambulance and was in such a weakened condition he had to be confined to bed for several weeks. Gradually began to improve, and was discharged from the institution May 1, 1935. Letter received from the folks states in part as follows: "Marvin is just fine, wants to work too much, sings and enjoys himself just as he always did around home. We certainly want to thank you for what you did for him—you saved his life, and we will always be a booster for your sanitarium."

T. S., Michigan—Male, Age 21:

History—Present trouble started during the fall of 1925. Overworked in his studies, and then began to worry about his health. Became delusional and disoriented. No ambition, and was quiet most of the time, except that he wanted to go home regardless of where he was. Entered Forest Park in September, 1928, discharged February 22, 1929. Case diagnosed as Dementia Praecox. Letter received from the patient states that his health is good, and that he is busy with his music, and helping in his father's business. Letter from the father later states that the boy is, and has been perfectly well since he has been home from Forest Park, and that he is working in D—and getting along splendidly, for which they are thankful.

R. S., Iowa—Female, Age 21:

History—Had a disappointment in love, also disappointed because she could not continue with college studies. In the summer of 1934 became nervous and irritable, could not sleep, but continued with her work until the fall of 1934 when she collapsed at work. Was taken to a specialist who advised that she was suffering from a case of Dementia Praecox, and suggested that she be confined in a state hospital. Entered Forest Park in October, 1934, discharged December 8, 1934. Diag-

nosed as Dementia Praecox. Letters received states that patient is enjoying the best of health, and that she is again working and enjoying life.

J. S., Wisconsin—Female, Age 38:

History — Patient was registered nurse, and had been in a very responsible position for quite a long time, until she suffered a complete nervous breakdown. Had been in a private institution in Milwaukee for two and a half years, and was one of the worse suicidal cases we ever had in the institution here at Forest Park. She had to be watched continuously as she was very cunning and intent upon doing harm to herself. Patient was self-conscious and had the delusion that she should not converse with others, as she was not worthy. After several months under chiropractic treatment these delusions seemed to disappear and the patient improved fast. Patient entered Forest Park October, 1925, and was discharged in October, 1926. Diagnosed previous to coming to Forest Park as a case of Dementia Praecox. Forest Park diagnosed case as Depressive Mania, with suicidal tendencies. Patient at present time is nursing in one of the large hospitals in Buffalo, New York.

F. P., Iowa—Female, Age 20:

History—At the age of 7 patient had first attack, only lasting for a few minutes. For a time had the attacks every day, but was able to continue with school work and finished high school. When patient entered the institution at Forest Park had spells two or three times a month, usually in the morning. Entered Forest Park April 24, 1934, discharged August 28, 1934. Diagnosed as case of Epilepsy — grand mal type. Letter received recently stated that patient had been enjoying good health so far since returning home, and has not had a recurrence of the spells up to the present time.

J. B., Illinois—Age 26:

History—No mental condition existing. In May, 1931, patient felt tired and weak, following October felt numb up to first joint in hand, and by November 1st showed gradual increase of paralysis, first in left arm and then in right. Paralysis gradually increased until patient became totally paralyzed. Went to Mayo Clinic but returned home as no improvement was made. At the time patient entered Forest Park in January, 1932, he was suffering from paralysis of both upper and lower limbs, unable to move them, but could feel pain and touch. Had difficulty in breathing, which developed about the same time as the numbness of the lower limbs. Patient was diagnosed as progressive spinal muscular atrophy, or chronic poliomyelitis. Gradual improvement was shown from the time patient entered the Forest Park Sanitarium until April 9, 1932, when he was discharged from the institution, recovered. Returned to his home and carried on his regular work on the farm.

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In a court of justice, if you had four men testify that a certain fact was thus and so, it would not be more convincing if you had twenty men testify to the same fact. Therefore, it seems unnecessary to burden the reader with any more cases handled by Forest Park. Many types are presented, and most of the cases show that medical asylums, or others not employing Chiropractic, had tried to help them and failed. If the above facts are not sufficient in the mind of any committee, then Dr. Pothoff, Dr. Morris, Dr. Irvin, Mr. Hart or any other officer of the Davenport Sanitarium, should be summoned

to give their testimony. The facts herein presented are sufficient to make it mandatory to at least consider it fully before turning down Chiropractic.

First of all, let us remember that Chiropractic has been recognized by law and licensed at least as far back as 1915. If it is no good, then it should not be licensed, but it has existed during these years legally, and must be of value or it would be dead 19 long years.

More than that, Chiropractic profession and Chiropractors are qualified to be recognized. I believe it is the general belief of laymen, and many medical doctors maliciously help the belief, that a Chiropractor studies a few weeks or months and then comes out a full-fledged practitioner, and some medical doctors tell us, and so does Dr. Carr, Superintendent of the North Dakota State Insane Asylum, that they must first be educated before they should be allowed. I have Dr. Carr's personal letter in my file to prove his statement. As a state, a community and a nation, all people should be interested in the absolute truth, and in fairness, and in the benefit of the MASSES, rather than any association, clique or group. Following is given a comparison of Chiropractic education vs. Medical education. The subjects, schooling and number of hours of each as required, taken from New York's Handbook No. 9, Laws and Rules of Higher Education, in Medicine, June, 1923. Seventy-three medical schools in the United States are registered under those rules. Since that surely the rules concerning the education of Chiropractors have not been made easier:

Practice of Medicine is regulated in forty-eight states.

Prerequisite education, 4 years high school or equivalent and 2 years college.

Minimum course of study necessary for medical schools to be registered or accredited by the Board of Regents of New York State consists of 3600 class hours, distributed as follows:

	Hours
ANATOMY, including gross anatomy, histology and embryology.....	648
PHYSIOLOGY and Chemistry.....	432
PATHOLOGY, including gross pathology, pathological histology and bacteriology .....	432
HYGIENE .....	108
PHARMACOLOGY and Therapeutics.....	216
OBSTETRICS and GYNECOLOGY.....	252
MEDICINE, including pediatrics, nervous and mental diseases, dermatology and syphilis, medical jurisprudence .....	900
SURGERY, including orthopedics, genito-urinary, ophthalmology, otology, laryngology, rhinology, roentgenology	612
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Total class hours, all subjects.....	3600

Practice of Chiropractic, regulated in 38 States (including North Dakota).

Same as Medicine.

Minimum course of study necessary for Chiropractic schools to be rated as Class A Schools by American College of Chiropractors, consists of 3,528 class hours, distributed as follows:

	Hours
ANATOMY, including gross anatomy, embryology, neurology, histology and orthopedy .....	955
PHYSIOLOGY and Chemistry, including physiology, biological and physiology rheumistry, toxicology, urinalysis and dietetics.....	380
PATHOLOGY, including gross pathology, pathological histology and bacteriology .....	300
HYGIENE, including public health and public health service.....	100
DIAGNOSIS or ANALYSIS, including spinography (x-ray) .....	430
OBSTETRICS and GYNECOLOGY.....	100
CHIROPRACTIC, including Chiropractic symptomatology, Chiropractic principles and practice, Chiropractic palpation and adjusting, Chiropractic jurisprudence, contagious and infectious diseases, eye, ear, nose and throat, Dermatology .....	1147
ELECTIVE SUBJECT or SUBJECTS.....	116
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Total class hours, all subjects.....	3528

Medical Doctor 72 hours more, but Medical Doctor devotes 48% of time to medicine and surgery, which a Chiropractor does not use. 3,528 hours spent by Chiropractor are all devoted to human body, in health and disease without the use of drugs or surgery.

648 hours of Anatomy studied by a medical doctor includes anatomy of lower animals. Chiropractor spends all his class hours on Anatomy of the human body. Chiropractors study 52 hours less of Physiology and Chemistry than the medical doctor, but while the medical doctor's Physiology includes that of lower animals, the Chiropractor's Physiology is restricted to functions of the human body. Then the medical doctor's Chemistry relates to over 27,000 drugs and chemicals, while the Chiropractor's Chemistry is restricted to the chemistry of the human body.

Chiropractors study 132 hours less of Pathology and Bacteriology because they do not apply these subjects to surgery and serum therapy.

Chiropractors have no use for 216 hours of Pharmacology and Therapeutics, for the reason that they do not employ drug therapy to restore health.

Chiropractors study only 100 hours of Obstetrics and Gynecology for the reason that they do not practice the surgery incident to these two subjects.

Chiropractors study 247 hours or over 27% more of the Science of Chiropractic than the medical doctors study of the practice of medicine.

Chiropractors do not practice Surgery and consequently do not study that subject.

Therefore, Chiropractors actually study; 3,528 hours of subjects devoted entirely to the human body in health and disease, without the use of drugs and surgery.

While Medical Doctors, excepting the subjects bearing on drugs and surgery, only study 1,872 hours of subjects pertaining to the human body in health and disease, which is less than 54% of the Chiropractor's professional education.

When any man, therefore, says that a Chiropractor who studies a few weeks or months and then comes out a full-fledged practitioner, and expects to be believed, such a man must not know of the above requirements.

From 1885 to 1934 no CHIROPRACTOR has ever been on the staff at the North Dakota State Asylum. Why NOT? Dr. Carr says about a patient in his letter on page one hereof:

"If there is something wrong with her spine Chiropractic might help."

In other words, in 49 years, Dr. Carr never had a mental case, or his predecessors, and he never had a case where something was wrong with the spine. Does this sound reasonable?

But let us see what MEDICAL DOCTORS say, and of course these are in the minority, otherwise Chiropractic would be in state institutions:

"The cause of physical disorders is vertebral subluxations. This cause can be corrected by spinal adjustments given by the trained hands of the educated Chiropractor."—G. H. Patchen, M. D., New York City.

"Judge Chiropractic by its merits and one is bound to give it the approval of one's reason."—L. W. Edwards, M. D., Omaha, Nebraska.

"Many Chiropractors are adjusting from ten to fifty patients a day to the satisfaction of a majority of their patients. Most of these patients are CHRONIC who have made the rounds of the various kinds of treatments, both as regulars and irregulars. The results would astonish any medical man who would have an investigation."—John M. Shallor, M. D., Cincinnati, Ohio.



I can readily see where a case might be helped by Chiropractic treatment if there is some physical trouble, but where there is no physical trouble, and where the trouble is entirely mental, I think it is absurd to think that doing anything to the physical anatomy, whether it be Chiropractic or any other treatment, can help the abnormal mentality of a patient.

I think that if the Chiropractors would first study medicine, that is, take a regular course in a recognized Medical College, and then follow this up with a course in Chiropractic, all objection to Chiropractic practice would be eliminated. However, as long as a Chiropractor can spend **a few weeks or months** at school and then come out a full-fledged practitioner and the regular physician must spend six to eight years to prepare himself for practice, I say as long as this state of affairs exists, Chiropractic will not be recognized as a part of scientific medicine.

Cordially yours,

J. D. CARR  
Superintendent"

If ever a man has thoroughly shown his prejudice, his bias, his unfairness, Dr. Carr has in the above letter. Any Chiropractor working under a man so prejudiced would be at a disadvantage, he would not have a chance. Dr. Carr goes about now saying that he could have done the same thing Forest Park did, even after saying that the seven taken out of Jamestown were incurable.

We do not wish to appear opposed to Medical and Surgical Science. Medicine and Surgery has done wonderful things, and some of the finest men that ever lived have been Physicians and Surgeons. We do, however, resent any medical association or group within such association standing in the way of progress. Democracy de-

mands that they work hand in hand. Chiropractic is legally recognized, and so is Medicine. If Chiropractic has failed in certain things so has medicine and surgery. If we can restore normal mentality to mentally deficient people and fail to do so when we have the means at hand, such as is demonstrated by the facts hereinbefore stated, we are wilfully, yes, almost maliciously, negligent. If your wife or loved one was mentally deranged and Jamestown Asylum had handled the case for some time with no apparent results, and someone suggested to you that Chiropractic had helped others mentally deranged, **would you hesitate to secure Chiropractic?**

Chiropractic can be placed into the Jamestown, North Dakota, Asylum with **no added cost**. As stated before, seven physicians are now on the regular pay roll. By making the Superintendent a person not connected with any healing profession it would leave six. Of this number three can be discharged and replaced with three chiropractors.

As fair citizens we are interested in results, benefit to the mass and the greatest possible saving in money. If some one came to you as a private business man and brought facts such as Forest Park, and Chiropractors generally have shown, and point to a possible saving of 25% in the expense of running your business, are you going to say, "It cannot be done," or "I am not interested," or "There must be a mistake," or "I will go on spending \$100,000.00 per year more than is necessary. I submit you would definitely inquire, you would put it into your business.

Citizens, taxpayers, legislators and officers, talk to chiropractors in the State, ask them personally for their explanation and suggestion in the matter.

You owe it to yourself and to the State to thoroughly inform yourself. We cannot expect proper reforms to be made in things public unless we do properly inform ourselves. Go to these men and inquire.

"The spine has more to do than any other factor with the maintenance of health on the one hand, or the establishment of disease on the other. Chiropractic is a rational method of combating disease and should be legally recognized."—Alfred Walton, M. D., one-time president and chief of the surgical division of the Essex County (New Jersey) Hospital of Maine Academy of Medicine and Science, and author of books on preventive medicine and hygiene.

"I have been in a position to closely observe Chiropractic treatments for 15 years. It has its valuable points as well as any other method of treatment."—James Irvin, M. D., Davenport, Iowa.

"Under spinal adjustments, acute diseases are cut short and aborted, and chronic diseases recover which have been believed incurable."—A. A. Gregory, M. D., Oklahoma City.

"Chiropractors are obtaining results that I could not have obtained with medicine and surgery."—F. C. Rutherford, M. D., Birmingham, Alabama.

"The reason Medicine has advanced so slowly is because physicians have studied the writings of their professors instead of nature."—Prof. Alexander H. Stevens, M. D., of New York College of Physicians and Surgeons.

From 1922 to 1934 Forest Park has a record of 65% cures, while the North Dakota Insane Asylum 27.8%. It is fair to use the same period of time for comparison, assuming that certain types of ailments are prevalent during certain periods.

Forty-three per cent on so called chronic incurables from North Dakota Asylum. Let us say that this figure is too high. Let us say that Chiropractic could only secure cures in 25% or even 10%, any figure that presents itself. Is it justice, is it reason, to say "no, we will not put Chiropractic into the North

Dakota Asylum." Ten per cent of the mates would be approximately 170. Should we deny that which might make 170 people well so they could be discharged from Jamestown and sent home, so that the state could save \$294.14 per year per patient? Multiply 170 by \$294.14, or \$50,000.00 per annum saved.

However, when results show 43% cures of incurables no one has a right to assume that by placing Chiropractic in the North Dakota Asylum we will only cure 10% of the inmates, but on the other hand, it is reasonable, according to the evidence hereinbefore presented, that we will cure at least 30%, or 510 patients out of 1700.

No profession or group has the right to stand in the way of help that might restore the mental faculties to five or six hundred people, and to restore those to their loved ones. If our bias and prejudice has sunk to this apathy and selfishness, then mankind needs a rude awakening.

It will be suggested that if Chiropractic is to be placed in Jamestown, it shall be done under a Medical Superintendent. I submit **this dare not be done.** Dr. J. D. Carr, the present Superintendent, has disqualified himself in his letters where he shows his prejudice, his bias.

In a letter to the writer dated October 1, 1934, in answer to a letter asking whether Dr. Carr would do anything to place Chiropractic into Jamestown, North Dakota Asylum, Dr. Carr stated in part as follows:

"I would lose my membership in those organizations (talking about County, State and National Medical Associations—parenthesis my own) were I to become associated in a professional way with Chiropractic dogma . . .

I believe you do not recognize the fact that we are turning back into society **more than 50%** of the cases that are sent to this hospital . . .

Forest Park is not a large institution. It cannot handle patients as cheaply as Jamestown Asylum, but Forest Park has, in order to demonstrate what could be done, taken the patients from Richland County and Pembina County, which were public patients, paid by the County, for the same price of \$24.00 per month that is being paid by the counties to Jamestown, North Dakota, Asylum, and in addition came up from Davenport, Iowa, a distance of almost 600 miles one way, got the patients and brought them back, at their own expense. Does it seem reasonable to believe that Forest Park is a fake, that it cannot produce results? I submit it proves the good faith of the men in charge, it shows that they honestly believe and are convinced that they can do something for the mentally deranged. Results show that their belief is justified. Forest Park did this for the benefit of suffering humanity, so that help might come to those to whom it is now denied by refusing Chiropractic at the North Dakota Asylum.

Has any suggestion ever come from the Jamestown Asylum that Chiropractic should be introduced there? No. Has any chiropractor been given a chance in the hospital? Doctor Carr says no, because the law does not permit it. Then why does he not see to it that the law is changed? Because he does not believe in it. Therefore, do not put a man in charge of an institution to work with Chiropractic in which he does not believe, but make the change and place a man at the head who will honestly give it a chance.

Without a change in the law **Chiropractic cannot be permitted in the asylum. The law must be changed to permit Chiropractors to practice as regular Chiropractors in the Asylum.** In effect we say now to the chiropractors: "We will tolerate you outside, you can work and your work is good, but it is not good inside of the insane asylum, you might harm some patient if you adjusted them inside the asylum. If a father wants his son, an inmate of the hospital, adjusted by some chiropractor outside, or say in the city of Jamestown, sure we will permit that,

we do not wish to hurt the father's feelings." Taxpayers! Is not the situation ridiculous? If chiropractors can be tolerated on the outside, why not on the inside? Laws are not passed for the special benefit of any class, and when they are it is time to change them. The change is not asked because of the opinion of a layman, but on the results, the experiences, the high integrity and suggestion of results, by such splendid men as the chiropractors of any state are, as the doctors and nurses at Forest Park. Forest Park handled our patients for less than cost to prove to us that we are missing a cure which should be given to our insane, because of their interest in humanity. What are we going to do in return? Forest Park could work on some more of our patients, and I am sure with equally agreeable results. Instead, I suggest that we keep our money in the State by placing chiropractors in the asylum who can help cure the unfortunate inmates, and also to save money for the taxpayers.

It may be suggested that if Chiropractic were good more hospitals and clinics would use it. The best answer to this is that in the time of Columbus trains were no good, telephones were no good, but today they are and they work. When the first railroad engine was standing on wooden rails, the bystanders exclaimed, "That thing is silly, it can never be started," and when it was started those same bystanders remarked, "It can never be stopped."

We have living proofs that were cured by Chiropractic.

We have the statements of medical doctors indorsing it.

There is plenty of proof of medical doctors going to Chiropractors for relief when their own profession failed.

The change cannot do harm.

The change can save hundreds of unfortunate mentally deranged.

The change can save hundreds of thousands of dollars.

The ordinarily reasonable citizen will say it should be tried and tried properly. Most of them say it must be tried.

The 65% results by Forest Park were obtained mostly on cases called incurable, while the 27.8% by North Dakota Asylum were on cases that they had from the beginning.

Finally, remember that it is only natural that Doctor Carr should fight for a proposition which he feels is his bread and butter and it is only human for him to do that. He has followed that line of thought, he has lived that atmosphere, has a particular method, read the kind of literature which has upheld him for so long that it is hard for him to see anything else, and having followed a certain course for years, he is afraid that adopting a new course may cause him to appear ridiculous. He is afraid of the censor of his association. Men of a great State, I maintain that the individual should be able, when necessary and when humanity demands it, to stand above the association. Recall the statements of medical doctors, herein produced, who point out that medical men have not given Chiropractic proper consideration. They have not investigated when they say that Chiropractic cannot or will not help the sick. Beware also that it is always the particular disease in hand that Chiropractic cannot cure, but something else (and that something else is always indefinite). Chiropractic might cure. How can Carr say? Has he tried adjusting? Has he himself adjusted patients? Has he studied it? He would point out that Chiropractic cannot be recognized as scientific medicine and surgery. I submit no Chiropractor that I have ever met claims that he is a surgeon or medical scientist. In the same breath Doctor Carr, who has not studied Chiropractic (medical schools do not require it, they do not teach it, and if any school of medicine does, it is the exception),

still, and friends get this definitely, still Doctor Carr, learned in a medical school, who has never studied Chiropractic, would pass on it, say it is no good. Chiropractic has to do with the spine and nerves through it primarily. Ask Doctor Carr, or any other superintendent of any insane asylum, how many spines of insane patients they have x-rayed to find out whether there is anything wrong with their spines. He may have x-rayed, but not to look for sublaxations in the spine. Why? Because he does not believe sublaxations mean anything, and if the Medical Association backs him up, which he says they do, then they are in the same position he is. I submit that such a stand is unreasonable. How can anyone express an opinion on a thing with which he has not experimented or worked, or which he has not studied. Instead, Doctor Carr now comes before the taxpayers of North Dakota and asks for an appropriation of \$200,000.00 to build new buildings, to take care of the ever increasing population of the insane asylums. Possibly new buildings are needed. If by a different method of treatment (Chiropractic, which we advocate, with medicine), the population can be reduced and appropriations cut, is not that a far more worthy aim, when taxpayers are unable to pay the taxes now necessary to run our State?

Ask the patients who have been at Forest Park; ask their relatives who know, many of whom have visited Forest Park; they will tell you it is superior to Jamestown, North Dakota, Insane Asylum. Or are all cures and benefits of Forest Park just imagination, just an accident, just a coincidence? Let us not be misled. If we make the change, **then let us make the change on a basis of the opinion of men who are fair** and not on the basis of the opinion of one who for years has carelessly, almost deliberately, failed to find a cure (Chiropractic), that has been ready to serve him all the time. Yes, he will say it is no cure, it is no good. Then again I call attention to the facts, those things visible to the eye, those patients cured by Forest Park speak louder and more convincingly than any objector.

The writer is not a medical doctor nor a chiropractor, but a public official presenting facts for the benefit of the taxpayer.

My interest is solely that of a taxpayer, the same as yours. I have honestly tried to make a clear showing, as an agent of the taxpayers and presenting their side and fighting for protection of their interests I have been forced to speak plainly. Individuals, personal interests, selfishness of the small group, cannot be considered—the taxpayer comes first. Think of what it will mean to a husband to be informed that a way has finally been found to cure his wife, so she can come home to him and her children. Will not that man be a better man in his community? Fine men and noble are in the medical profession, but selfish and inconsiderate men happen to be in the medical profession as well. History is full of the ridicule some medical men have had to suffer before their new found truth, an improvement in some part of healing, was accepted and recognized. Hundreds of thousands of peo-

ple die under medical care. Some because of mistakes. This does not indicate that we must cast aside the medical or surgical profession. Each has its place and is needed. This pamphlet is not circulated to purify the medical or any other profession, but to bring facts, and in bringing them to show the way to reason. As we need medicine, so we need Chiropractic. If Chiropractic is good outside the Insane Asylum, then it is good to heal the unfortunates inside the Asylum. Can anything be clearer? The insane population over the United States is ever increasing, the Asylums are full everywhere. This problem must be met.

Dated at Wahpeton, North Dakota, December 20, 1934.

Respectfully submitted,

A. W. PONATH, County Judge,  
Wahpeton, Richland County,  
North Dakota

