

## With decisive determination

At a historic meeting of the House of Delegates and Board of Trustees of the American Osteopathic Association, held in Chicago early in July, the mood of the profession as it faced its hour of greatest challenge could have been characterized by two words. The two words are *decision* and *determination*.

As a response to the California challenge the policy-making body of the American Osteopathic Association, acting with forceful unanimity rarely exhibited in this or any other professional group, reached important conclusions and made important decisions.

Successful leadership is predicated upon the ability to make decisions. Too many decisions, however, are made impotent by failure to add to them that most important ingredient for success, the magic catalyst, determination.

The correctness of a decision is rarely ascertainable at the time it is made. This can only be judged by results. The results of decisions made in Chicago by your profession will depend on your local and individual determination.

What were these decisions and why were they necessary? To understand these things the situation in California must be understood. It is my opinion that even now it is not understood by the majority of the profession. Perhaps this is everybody's fault, and perhaps the fault is a natural one. The reason for this lack of understanding is that discussions and debates have centered around metastatic issues rather than the primary one. The challenges to the profession in California do not stem solely from policy differences between the American Osteopathic Association and its former affiliate, the California Osteopathic Association. The problem is not primarily one of people, but one of survival. It is a national problem, not a California one. Fate determined that it was first to come to a head in that state, but it could have been yours.

The question before us, therefore, is just this simple and just this complex: *Will the osteopathic profession survive or will it be destroyed?*

For the past 20 years osteopathic medicine in California has been slowly undermined by clever

adversaries both in and out of the profession. The potency of our college was diluted, fears were fanned, and propagandists thrived. As the outcome of this has been successful, the American Medical Association, guided by the leaders of the California Medical Association, has recommended it to its component societies as a blueprint for the elimination of osteopathy. They have been told that this is a respectable manner in which the "osteopathic problem" can for once and all be solved to the satisfaction of the American Medical Association. The blueprint essentially calls for these steps:

1. Eliminate osteopathic practice acts wherever they exist and cease licensing osteopathic physicians and surgeons.

2. Gain control of osteopathic colleges and convert them into medical schools, thus shutting off the future growth of the osteopathic profession.

3. Gain control of the too rapidly growing osteopathic hospital system across the country and place staffs under medical control, thus making added beds available to the medical profession.

4. Remove any possibility of recognition of osteopathic specialists and reconvert them to general practice.

5. Eliminate the D.O. degree which leaders of organized medicine irritably complain is too often understood by the public to mean M.D. plus.

6. Provide for separate and distinct medical societies as organizational concentration camps for repentant D.O.'s.

The A.O.A., however, determined that this plan for elimination must be stopped in California and must be fought wherever it threatens. In making this decision, comparative costs were studied. The cost of prevention and protection was found to be far less than the cost of recovery or capitulation. Therefore, the House of Delegates of the American Osteopathic Association unanimously approved two major means of raising funds to prevent the plan for elimination from spreading into your state and mine, a \$25.00 raise in dues, which will be implemented in June 1962, and a \$75.00 assessment to raise a \$500,000 fund for aggressive resistance.

Our profession and our professional lives are at stake. Each member must assume his personal share in this organization's pledge of decisive determination.

## EDITORIALS

### THE JOURNAL OF THE AMERICAN OSTEOPATHIC ASSOCIATION

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Associate Editor	Katherine Becker
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### Sixty-five pieces of silver

It has been some months since an editorial moratorium was declared concerning the California conspiracy. Every negative aspect of this problem has been explored and re-explored. There are, however, in distressing situations, facets that can be used by the offended which are positive, affirmative, and aggressive.

To those who have studied the problems posed by the "unification program" in California, the goal of organized medicine is crystal clear: the establishment of a monolithic agency that speaks for medicine. This has become even more apparent in recent weeks, when a leading medical educator released a "trial balloon" suggesting the merger of dentistry and medicine. Writing in the March 1962 issue of *New Medical Matera*, William N. Hubbard, Jr., M.D., dean of the University of Michigan Medical School, made such a proposal.

In the rush to consummate the California unification of M.D.'s and D.O.'s, organized medicine has made some rather amazing admissions, admissions which can be useful to the osteopathic profession in many areas of activity.

When the first D.O. degree is "exchanged" for an M.D., organized medicine has in fact affirmed what they have long denied—a D.O. degree represents training *at least* equivalent to that represented by an M.D. degree. Never again can organ-

ized medicine with any semblance of authority state that a D.O. degree represents inferior medical training. The facts just will not support such a statement, nor will the action being taken by the A.M.A. and the C.M.A.

This is important. It is important to state legislatures which in the future may consider unlimited practice rights. It is important to those seeking recognition at any level.

It is apparent that the California College of Medicine (formerly the College of Osteopathic Physicians and Surgeons) is to be an "approved medical school" with a speed which must be amazing, particularly to medical educators. To many doctors of medicine, the \$65.00 fee for the M.D. degree must appear quite reasonable. Medical schools should be encouraged by the new economic approach to medical education. Perhaps organized osteopathy should reciprocate with a \$65.00 D.O. degree for interested doctors of medicine!

Another peripheral development in this procedure is the fear which has developed in some medical circles that the new M.D.'s (converted D.O.'s) may suddenly get the idea of using both degrees and imply to the public that their \$65 M.D. degree represents about \$10,000 worth of D.O. training. In California, of course, proposed legislation, if enacted, will prohibit the use of the more time-consuming and expensive *earned degree*.

The idea that the public might consider osteopathic physicians as practicing "medicine plus" has frightened organized medicine. In fact, at the last meeting of the A.O.A.-A.M.A. Conference Committee, the A.O.A. representatives were urged to seek official denial from our House of Delegates. It was an amazing display of unsuspected inferiority on the part of political medicine.

Perhaps there are mounting reasons to question the value of *even* a \$65.00 M.D. degree. Could it be that medicine is more desirous of eliminating the growing acceptance of the D.O. degree than it is of "converting" D.O.'s to its fraternity? Could it be that the D.O. degree which organized osteopathy has established as equivalent to an M.D. is actually exceeding its equivalency status? Could it be that the D.O. degree has greater public acceptance than an approved M.D. degree now priced at bargain rates? And could it be that the D.O. degree, in the public mind, is being recognized as a symbol of a superior form of medical training?

Organized medicine, by its support of the California action, has established once and for all the equivalency status of the two degrees. Perhaps now is the time *for us* to establish further the *superiority* of the training of osteopathic medicine.

Regardless of the expedient actions of medical education in furthering the apparently monopolistic goals of organized medicine, osteopathic education must never be guilty of "selling" its degree through some form of political prostitution. Despite this new trend in "medical education," osteopathic education must continue to raise its educational stand-

ards. Flexner is no longer around to comment on medical education, California style. But the integrity of osteopathic education should never bow to political expediency.

A D.O. degree is a prized possession. A profession has invested its life in it. Let us resolve that we, at least, will never sell it for sixty-five pieces of silver.

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### Vox populi

Predictions of future events have long enticed the minds of men. Man, through the ages, has invoked spirits, gazed into crystal balls, and conjured up all manner of gadgets and gimmicks for revealing the future. Modern man, however, turns to statistical study and scientific methods. Organizations have been formed that can with amazing accuracy predict the mood of large masses of people. One of the outstanding organizations in this field is Facts Consolidated, with offices in key areas in the United States and Europe. Through years of experience, this organization has developed an outstanding degree of accuracy in public opinion studies.

Ever since the proposed merger between the California Medical Association and the California Osteopathic Association came out in the open, the American Osteopathic Association has been interested in the reactions of the public in California. To find what they are, the A.O.A. turned to Facts Consolidated. To accomplish the purposes of the study, a sampling plan was developed, quota controls were established, and field work was assigned to sixty Facts Consolidated interviewers. Using the "face-to-face" method, almost 3,000 interviews were conducted from January 31 to February 5 of this year.

A recent release on the findings is most interesting. Contrary to some reports, the people of the State of California are not convinced of the wisdom of the proposed merger. One third of all those interviewed were opposed to the merger agreement which would absorb osteopathic physicians into the medical association and give all osteopaths who elect to take it an M.D. degree. Approximately another third are in favor of the merger agreement, and the remaining third expressed no opinion. More than 62 per cent of those interviewed were opposed to ending the licensing of osteopathic physicians in California. Of the remainder, only 10 per cent were in favor of the proposal, while 27 per cent had no opinion. However, the most important finding of this investigation was that *over 75 per cent of the approximate one third who favored the merger agreement were opposed to the proposal to end the licensing of osteopathic physicians in California.*

As a means of testing meaningful distribution of its sampling, Facts Consolidated made a comparison of party affiliations of those interviewed and of voters registered in California as of November 1960. At that time there were 7,464,626 voters, of whom 39.2 per cent were Republicans, 57.5 were Democrats, and 3.3 refused to identify their political affiliation. In the survey, 38.2 per cent of those interviewed were Republicans, 57.3 were Democrats, and 4.5 refused to state their party affiliations.

Approximately half of each interviewer's quota was male and half female. Interviewers were instructed to complete their quotas in such a manner as to obtain proper representation of socioeconomic, racial, religious, and urban-rural differences. It is important to point out that no control of political party affiliation was imposed either in the geographic sampling or on the quota restrictions imposed on the interviewers. However, as stated above, the political make-up of the sampling was strikingly similar to that of registered California voters. Certainly this fact, among others, indicates the reliability of the methods used.

Although the findings of this survey are encouraging, they should in no way lessen the efforts of organized osteopathy in its fight for survival in California. The people must be further alerted to the dangers of a medical monopoly in California or in any other state of the Union. Physicians the

Nation over rise up in righteous indignation at the suggestion of socialized medicine. However, the complete control of medical care by any one organization in California is no less evil.

Many sincere doctors of medicine must question A.M.A. approval of a new medical school (California College of Medicine, formerly College of Osteopathic Physicians and Surgeons) in less than a year, the proposal to award a \$65.00 M.D. degree to over 2,000 D.O.'s with whom their leaders consistently prohibited professional association, and the complete capitulation of the second largest state medical association in the country to the demands of a handful of osteopathic politicians.

Both organized medicine and organized osteopathy will in the long run suffer if the merger is consummated. Many California people do not want licensing of D.O.'s to be discontinued. Apparently neither the leaders of the California Osteopathic Association nor of the California Medical Association care what the people think. *The American Osteopathic Association does—and we support their opinion.*

When organized medicine or organized osteopathy forgets the people they serve, they court disaster.

The voice of the people is important, and it will be heard.

### Editor's note

The pages appearing in this "Special reprints" section have been electronically scanned from the original journals in which they appeared. Consequently, the scanning process at a density to enhance readability has picked up such artifacts as "bleed-through" type from reverse pages and other "blemishes" that existed in the original paper on which the text was printed. Even the yellowing of the original pages has caused some darkening of the margins. *JAOA* regrets these anomalies and hopes that readers will overlook them and concentrate on the content of these works published in the osteopathic medical profession's early history.

For interest sake, concluding pages of articles may contain "newsy" items of the original date.

**Gilbert E. D'Alonzo, DO**  
June 2001

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### Signifying what?

Last year Dr. Dorothy Marsh reported to the membership of the California Osteopathic Association that the qualifications necessary for the M.D. degree were submission of evidence of an unrevoked license as a physician and surgeon in the State of California, a D.O. degree granted by a college approved by the Board of Osteopathic Examiners of the State of California, and good moral character, with the application to be reviewed by the College and sent to its Board of Trustees with recommendations. Either Dr. Marsh neglected to inform C.O.A. members of the most important qualification or it was added later by the California Medical Association. In an address before the Council of the Los Angeles County Medical Association, as reported in the *L.A.C.M.A. Bulletin* for April 19, 1962, Dr. Wayne E. Pollock, chairman of the C.M.A. Committee on Other Professions, announced as the *first* requirement for the new M.D. degree that the applicant must have studied in an approved medical school for an academic year (9 months) prior to the granting of the M.D. degree.

He also reported that the degrees will be granted in four separate locations throughout the state and *without publicity*. He did not predict *when* this event would take place.

As time goes on it becomes obvious that the California Medical Association has been telling its membership one thing and the California Osteo-

pathic Association has been telling its membership another. To any of those around the country who have viewed with covetous eyes the acquisition of an M.D. degree, the unfolding developments in California should be a sobering revelation. To even the most naive, it should be apparent that someone is being double crossed. And it is not organized medicine. Furthermore, it is apparent that the leaders of the California Medical Association have more than one ace up their sleeves.

As far as the osteopathic physician in California was concerned, the M.D. degree was the major plum dangled in front of his envious eyes. The only trouble is the plum has a worm in it. One cannot but wonder what will become of other "rewards," such as hospital appointments, specialty certification, and community status.

The merger balloon in California has developed a leak. Like most balloons, it was filled with gas.

## "Signifying nothing"

Since it became a matter of public record that the new California College of Medicine is now an accredited medical school as a result of official action of the Council on Medical Education and Hospitals of the American Medical Association and the Executive Council of the Association of American Medical Colleges, some osteopathic physicians have inquired as to whether there might be some value in obtaining an M.D. degree from that school. As has been previously reported, the California College of Medicine as a now-accredited medical school intends to grant retroactive M.D. degrees to those graduates of osteopathic colleges with a license to practice in California, an acceptable application, and \$65.

However, before there is any rush to medical education's bargain counter, it would be well for members of the osteopathic profession to study carefully a letter which has been transmitted to the secretaries of state boards of medical examiners. The letter, announcing the accreditation of the California College of Medicine as a medical school, has this to say:

. . . as a result of this action, the current fourth year class of the California College of Medicine, which will graduate in June 1962, will be recognized as graduates of an accredited medical school. *Graduates of that institution prior to February 15, 1962 are not affected and should not be recognized as graduates of an accredited school.* (Italics supplied.)

This letter was signed by Walter S. Wiggins, M.D., secretary of the A.M.A. Council on Medical Education and Hospitals, and Ward Darley, M.D., executive director of the Association of American Medical Colleges. Therefore, it seems apparent that neither the Council on Medical Education and Hospitals nor the Association of American Medical Colleges intends that M.D. degrees granted by the

newly approved California College of Medicine to those who graduated before February 15, 1962, will be acceptable degrees.

The truth of that old cliché, "you get what you pay for," seems to be demonstrated once again in California. It is interesting to observe that even members of the California Osteopathic Association are beginning to wonder what their \$65 is buying. Apparently there have been so many requests for clarification made to the California Osteopathic Association that its president, Dr. J. Ralph Hughes, found it necessary to say the following in the March 1962 issue of the *California Clinician*:

I have been asked on many occasions why the fee of \$65 is to accompany the application for the degree from the California College of Medicine. The \$65 is broken down as follows: There is a \$25 matriculation fee, there is a \$25 graduation fee, and \$15 to help defray the processing of applications. The final approval of each application for the issuance of the degree rests with the Admissions and Credentials Committee and the Board of Trustees of the California College of Medicine.

Dr. Hughes then goes on to comment:

As yet, the exact mechanism for conferring of the degrees has not been decided. As the result of considerable conversation between the responsible parties of the California Medical Association, the California Osteopathic Association, and medical educators, it has been decided that the exact mechanism will be the responsibility of the "Education Committee." The Education Committee is composed of the deans of four medical schools in the Los Angeles area, President Henley, and one or two additional faculty members from the California College of Medicine. When this exact mechanism has been determined, you will all receive notification giving all the particulars by which this important step will be accomplished.

At the March 25, 1962, meeting of the Executive Committee of the A.O.A. Board of Trustees, the question of the ethics of an unearned M.D. degree was discussed. The Executive Committee interpreted the term "degree" in Chapter II, Article I, Sections 7(c) and 7(d) of the A.O.A. Code of Ethics to mean a degree which is earned during actual attendance at a college while it is approved by a national professional association, and stated that any D.O. who seeks an unearned degree is placing his A.O.A. membership in jeopardy. The Code of Ethics sections referred to above read as follows:

Sec. 7 (c) It is unethical for an osteopathic physician to hold forth or to indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he is actually licensed in the state in which he practices on the basis of that degree or could have been licensed at the time he received the degree or subsequently on the basis of that degree in the state where he now practices.

Sec. 7 (d) It is unethical for an osteopathic physician to seek to acquire or receive a degree from a school or college of the healing arts which is not approved by the national professional organization recognized by the United States Office of Education as representative of that school or college of the healing arts.

In a note to all divisional society presidents and secretaries and specialty college and board officers,

A.O.A. Executive Director True B. Eveleth pointed out that this interpretation will clarify the status of those D.O.'s who now seek an M.D. degree from the California College of Medicine, as well as those who might seek the degree from any other institution of a similar nature.

Two things should now be obvious to members of the profession: First, the Executive Committee interprets the Code of Ethics of the American Osteopathic Association to mean that anyone seeking an unearned M.D. degree, that is, one received without actual attendance at a college approved during that period of attendance by the American Medical Association, places his future A.O.A. membership in jeopardy.

Second, the A.M.A. Council on Medical Education and Hospitals and the Association of American Medical Colleges seem to have made it clear that only those graduating from the California College of Medicine after February 15, 1962, will be considered by those bodies to have received an M.D. degree from an accredited medical school.

Therefore, in view of both the interpretation of the Executive Committee of the A.O.A. and the statement that the California College of Medicine cannot in fact issue retroactive M.D. degrees which will be considered as coming from an accredited medical school, the \$65 California medical degree seems, if anything, to be overpriced.

Apparently the California Medical Association and representatives of the American Medical Association were led to believe that the osteopathic physicians in California desired only an M.D. degree, without concern for its standing. And the leaders of the California Osteopathic Association seem to have been perfectly willing to have osteopathic physicians in California turn over a \$9,000,000 county hospital, a college, and control of several million dollars worth of osteopathic hospitals in California for two letters, which in this instance symbolize nothing.

In all this there is a matter of degree—not only M.D. or D.O.—but the degree of merit implied by the letters themselves. An earned M.D. degree or an earned D.O. degree represents an academic achievement worthy of pride.

Shakespeare in discussing the gift-certificate degree might have said something like this:

It is but a shadow, a poor substitute  
That gives the holder his hour upon the  
stage  
And then is recognized no more; it is a  
shell  
Given as appeasement, full of sound and  
fury, signifying nothing.

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## Who is there to listen?

Commenting favorably on recent JOURNAL editorials and in particular on the 1962 A. T. Still Memorial Lecture, a member of the profession posed a provocative question: Who is there to listen?

This is a good question and it deserves thought.

Does the profession really listen to the words of the officers of the American Osteopathic Association? Does the profession listen with its mind's eye to editorials, addresses, and organizational news? Are those in the profession who seem to feel that an M.D. degree is the answer to all of their problems really listening to what is happening in California? Of course, the answer to these and other questions can never be completely known. However, there is evidence that the profession is listening and beginning to understand better than ever before some of the problems it faces. There are manifestations of an increased desire to confront these problems and find their solution.

Who is there to listen? There are over 9,000 osteopathic physicians, members of the American Osteopathic Association, to listen. Regardless of previous opinions concerning the program of eliminating the osteopathic profession by *degree*, correspondence, personal contacts, and group discussions indicate that there are those who earlier viewed the

California program with envy but are disenchanted as it becomes a reality. Through this experience, members of the osteopathic profession have been taught a long-to-be-remembered lesson.

To many osteopathic physicians in California, their "acceptance" by organized medicine seemed too good to be true. And it was. Now they are realizing, as do most members of the profession, that they literally sold their birthright for sixty-five pieces of silver. The cheap M.D. degree is just that—cheap. California specialists may continue their specialty practice, but reports coming from the state already indicate that they may no longer accept in-hospital consultations. Despite the bitterness of the past few years, one cannot help but feel sorry for those osteopathic physicians in California who instead of gaining status lost it, instead of achieving economic security became less secure, and instead of being accepted into the medical fraternity as equal partners are in actuality being considered as outsiders with "honorary" degrees.

Who is there to listen? More members of the profession are listening and watching than ever before in its history. It is well that they do, before they, like some of their colleagues on the West Coast, find themselves sold into a form of professional slavery.

Who is there to listen? Let's hope it is the whole profession. Its future depends on the ability of individual members to listen and, having listened, to understand.

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## A matter of degrees

Ever since the California plan for the absorption of the osteopathic profession became a matter of public knowledge, considerable thought and attention have been given to the matter of degrees. And much discussion concerning the status of the M.D. degree and the D.O. degree has transpired, since it has been apparent that the \$65 medical degree granted by the California College of Medicine has been a part of the "come-on" in the California conspiracy. Despite the obvious cheapness, from both the financial and intellectual standpoints, of the M.D. degree granted in the State of California, never in the history of medical education has a group of professional people paid as dearly for their own self-destruction. Never has a medical diploma of dubious reputability been sold so cheaply yet cost so much.

Leaders in osteopathic medicine have tried to answer for themselves the question of why otherwise intelligent physicians would sacrifice so much to achieve so little. Has the inferiority complex of some osteopathic physicians so affected their reason that they would sell their professional souls for such a mess of academic pottage?

Was the desire of the osteopathic physicians in California for an M.D. degree a true one or was it politically conditioned? How widespread throughout the profession is such an unhealthy desire undermining the future existence and development of osteopathic medicine?

Were the leaders of the American Osteopathic Association correctly interpreting the profession's mood when they repeatedly stated that the overwhelming majority of osteopathic physicians did not want any degree other than a D.O., regardless of the bargain-counter aspects of the \$65 degree being offered by the California College of Medicine?

Sooner or later this basic problem had to be faced head on and resolved. The time for exploration and decision had come. The time had passed when the leadership of the osteopathic profession thought it wise to avoid this basic issue. And so, with a determination and courage rarely exhibited within organizational halls, the Executive Committee of the American Osteopathic Association directed its Executive Director to bring the matter of degrees before the profession for comment and thought. On June 4, 1962, Dr. Eveleth directed a letter to every member of the American Osteopathic Association which presented in detail the reasons being proposed for a new type of degree.

The response to Dr. Eveleth's letter was most explosive and thought provoking. Some members of the profession were so incensed that the question had even been brought up that they launched themselves into a semantic orbit. An overwhelming majority of answers were thoughtful and discerning.

The voice that was echoed through the mails into the communication centers of the A.O.A. Central Office was clear and unequivocal. It was not the solo voice of the A.O.A. president or editor, not the collective voice of the Executive Committee or Board of Trustees, nor even the democratic voice of an A.O.A. House of Delegates in session. It was the voice of the people—the voice of the average day-to-day practicing osteopathic physician.

In a three-to-one opinion the profession itself spoke out and said, in effect: We are proud of our degree and desire to do everything possible to achieve not merely equivalent status but to earn recognition superior to that accorded any other degree denoting a physician and surgeon. For every one osteopathic physician who thought there might be some advantage to an M.D. degree, three osteopathic physicians felt that the D.O. degree adequately expressed the status and training of an osteopathic physician. Many pointed out that the M.D. degree would actually be disadvantageous to an osteopathic physician. In effect, the osteopathic profession itself has said that this is our profession, the D.O. is our degree, and its members are proud to be identified with both.

There will always be those whose built-in sense of inferiority will lead them into dangerous personal and professional waters. There will always be

those whose feeling of inferiority is an actuality rather than a complex. They will try to protect their *actual* inferiority by false status symbols. True status is earned, not granted. The measure of a physician is not a matter of degree but a matter of service. Neither an M.D. degree nor a D.O. degree makes a physician—it merely identifies him. And the physician who seeks status rather than knowledge worships at the feet of a false god and prostitutes his ability for service.

Yes, the profession has spoken—not to itself, but for itself. It has expressed its desire to *bring* increasing prestige to the D.O. degree rather than to accept an identification created by others.

The matter of degrees has been presented. And the osteopathic profession has moved closer to the threshold of greatness.

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### A new year—a new era

The year 1962 will be listed as a momentous one in the annals of osteopathic history. It will go down as the year of the California conspiracy. On July 14 and 15 about 2,000 M.D. degrees were distributed to D.O.'s licensed in that state. On November 6 the people of California by a majority vote supported the desire of former osteopathic physicians

to eliminate themselves and the profession through passage of Proposition 22. The people of California had been told too many times over too many years that there was no difference between osteopathic medicine and allopathic medicine and that in reality there was no need for the separate existence of the two professions. The practice of a majority of osteopathic physicians in California confirmed this philosophy in that every effort was made to follow the precepts of allopathic medicine and to ignore the physiologic principles of osteopathy.

There is little value to recapitulating in bitterness or depression the course of events in California, but the fact remains that the defeat of osteopathic medicine there is a black page in osteopathic history. There is little sense in viewing it otherwise. Perhaps history will reveal that all of us participated in the California defeat. Perhaps it will reveal that this profession many years ago erected the idol of "recognition" and has studiously worshipped at its feet. But regardless of what history will tell, the lesson to be learned from the recent past is a simple one: The osteopathic profession cannot be destroyed without its own participation in the destruction.

Reliable reports coming from California indicate that the pursuit of recognition is already bearing bitter fruit. Evidence is mounting that former osteopathic physicians with an m.d. degree are not granted the same privileges as physicians who earned their degrees at medical schools. It is *now* being pointed out that there are over 2,500 real M.D.'s in California who do not have hospital staff privileges; this number added to the 2,200 m.d.'s make the quest for staff privileges in the newly accepted medical (formerly osteopathic) hospitals highly competitive. When it is considered that the conversion of osteopathic hospitals into hospitals controlled by organized medicine is furnishing a haven for many of the 2,500 M.D.'s who have never before had hospital privileges, it is little wonder that the California Medical Association invested hundreds of thousands of dollars to eliminate the osteopathic profession and to acquire its hospitals for such use.

Other fruits of recognition, California style, are equally sickening. Specialists trained and certified under the aegis of the osteopathic profession have already been told by hospital administrators that no vacancies exist on the staff *in their areas* of specialization. Other specialists are being informed that they can do their own work in a limited area but can accept no more "in the hospital" referrals. It is reliably reported that medical specialists in the various fields have verbally informed former D.O. specialists that they had better not apply to specialty colleges for membership as in that way they will be saved the embarrassment of rejection. It is being pointed out to them that they will not be certified by medical specialty boards.

In a way, it is fortunate for osteopathic physicians in the other states of the Union that the California disaster occurred when it did. By observing



what goes on there, the rest of the profession is having an opportunity to learn what organized medicine means by merger. It is readily apparent that the merger consummated in California has but one purpose—the total destruction of the osteopathic profession and the physicians who make up the profession. The fact of the matter is that organized medicine never promised to do anything else. The wishful thinking was done and the exorbitant claims of benefits to result from “recognition” were made by deluded leaders of osteopathy—not by medicine—in California.

It is unfortunate that a college, over 2,000 individual osteopathic physicians, and a state licensing act had to be sacrificed to make it clear that D.O.'s who agree to merger are partners in their own destruction. Osteopathic physicians in California have actually “recognized” themselves out of existence. Despite the obvious lesson, there are still those so blinded by the greed for recognition that they, too, are walking the path toward destruction. A small group in Washington and another in Pennsylvania would sell their futures for a mess of pottage.

It is ironic that in these two instances the leaders are general practitioners and some of the followers are specialists who have been threatened with a boycott if they do not go along. Aside from the moral injustice of such pressure, the stupidity of the maneuvers is appalling. These osteopathic general practitioners have failed to read the handwriting on the wall. Certainly no thinking man could believe that organized medicine would spend thousands of dollars in the various states for the future benefit of those who have been members of the osteopathic profession.

The osteopathic general practitioner is the attraction, and he has inadvertently become the Pied Piper leading the osteopathic profession toward elimination.

The need to show these general practitioners what is being done *to* them—rather than *for* them—in merger proposals is paramount. On this point, and perhaps this point alone, will depend many of the happenings in the year to come. This next year, 1963, should be the beginning of a new era for osteopathic medicine, an era in which the headlong pursuit of recognition for recognition's sake will be abandoned and the profession will turn its attention to development through service.

As Mrs. Franklin Delano Roosevelt was laid to rest in Hyde Park last month, it was said that “she was a follower after the truth, and the truth which she found made her free.” Physicians should be followers after the truth, and if they are, their goal will never be merely recognition. It will be service. As we enter the new year, may we together seek truth through service, for the truth will also make us free.

## Editorials

### THE JOURNAL OF THE AMERICAN OSTEOPATHIC ASSOCIATION

This periodical is the official publication of the American Osteopathic Association.

Editor	George W. Northup, D.O.
Associate Editor	Katherine Becker
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### “The judgment is reversed”

With these four words, the legality of converting the College of Osteopathic Physicians and Surgeons in Los Angeles was critically questioned by California's District Court of Appeals.

It will be recalled that the “College Trust Suit” was initiated by the chairman and two members of the C.O.P.S. Board of Trustees who charged that the defendants violated a charitable trust in converting the college to a medical school. When the suit was first presented before a lower court, the complaints were dismissed without leave to amend. The three district judges, after hearing oral arguments from both sides, unanimously agreed that the plaintiffs had a cause of action for alleged violation of a charitable trust. Although the total effect of the appellate court's decision cannot be fully determined until subsequent litigation transpires, the ruling of the three appellate judges is significant. It will be published in the March issue of THE D.O., and it should be read by every osteopathic physician.

In this dramatic reversal, the California District Court of Appeal ruled that three trustees of the California College of Medicine had clear cause to sue the other trustees for breach of a charitable trust in converting the school from an osteopathic college. The judgment read, in part:

It is the respondents' contention that only the attorney general may prosecute an action to enforce a charitable trust. We do not agree. The true rule is that the attorney general or any person having a special interest in the enforcement of the trust may sue but that the attorney general must be made a party to the action. . . . The plaintiffs as trustees of COPS have a special interest in preventing its assets from being diverted to other than that specified in its charter. COPS has no members, its trustees are self-perpetuating and as fiduciaries are charged with carrying out the charitable purposes set forth in its articles of incorporation. . . . As to ordinary matters of administration the decision of the majority of the trustees is final but neither a majority of the Board nor the entire Board can, by vote, change the charitable purposes declared by the articles in incorporation. . . . Each trustee has a duty to see that the funds of the corporation are not diverted to purposes other than those set forth in its articles of incorporation and in the event the attorney general fails to act, any trustee may do so.

In another context, the judgment stated, "it is the duty of the Board of Trustees to carry out the charitable purposes with which the corporation's assets are impressed." Continuing further in answering the lower court's finding for a dismissal, the appellate court stated:

*A threatened change in the charitable purposes set forth in the COPS' articles of incorporation as interpreted by its trustees for nearly 50 years is thus clearly alleged and a cause of action for equitable relief stated. We are not impressed with the argument that even though COPS becomes an accredited College of Allopathic Medicine it may still teach osteopathy. The primary charitable purpose of COPS, if the allegations of the complaint are true, is the teaching of osteopathy, not the teaching of that art of healing as a subject secondary and subject to the primary purpose of teaching allopathic medicine. Further the complaint alleges*

that the majority of the Board intend to abandon the teaching of osteopathy. The fact that COPS may and does teach subjects other than osteopathy does not alter the fact that its primary purposes must be the teaching of the art of healing through the theory of osteopathy. [Italics supplied.]

The court further ruled that the California Osteopathic Association is a necessary party to the suit and held that the C.O.A. could now be enjoined as a defendant.

It is too early to claim a victory. Nor must we dote over one, if achieved. The important fact is that for the first time a high court has seriously questioned the legality of converting the primary purpose of an osteopathic college to that of an allopathic medical school. It is a tragedy that the legality and morality of abandoning the education of osteopathic physicians could not have been considered before rather than after the fact.

Regardless of the outcome of the "College Trust Suit," the position of the American Osteopathic Association and its divisional societies now has strong legal support. Osteopathic medicine belongs to the people and is not the sole possession of the profession or a group within it. It cannot be bartered and sold like wares in the market place. People of the profession and for the profession, who have invested of themselves, their monies, and their lives in the development of this school of medicine, will not be compromised by those who care little for the public trust.

"The judgment is reversed" may well become the four most significant words to emerge from the State of California.