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University of Nebraska College of Medicine

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ETHICS

In these days of faddism in the art of healing, of "paths," "ists," "ics" and "isms" it is a pleasure to recall the clearness and cleanliness of the Asclepiads interpretation of the ethics of their profession. This cult flourished as early as the sixth century and this oath bound each new member to the maintenance of their traditions:

"I swear by Apollo, the physician, by Asclepios, by Hygiea and Panacea, and by all the gods and goddesses, calling them to witness that I will observe this my oath and carry out these my undertakings to the best of my power and understanding.

I swear to honor him who has instructed me in this art as I honor my parents, to share his fate and, if occasion arise, to provide him with the necessities of life.

His descendants shall be as my own brothers, and I will, if desired, teach them the art without money and without bond, imparting precepts, lectures and other knowledge to my sons and to the students admitted according to the laws of medicine, but to none other.

"I will employ dietetic measures to the use and profit of the sick, according to my capacity and understanding; if any danger and hurt threaten I will endeavor to avert them."
"I will yield to no entreaty to supply a poisonous drug nor give advice to him who demands it.

"Nor will I give to any woman the means of procuring abortion. I will order my life in purity and piety and so practice my profession. Also I swear by the gods to cut no one for stone, but to leave this operation to those whose profession it is.

"However many houses I visit, it shall always be to the advantage and profit of my patients, and I will hold myself aloof from every intentional and injurious evil.

"I will keep silence on that which I hear or see in the course of treatment or in everyday life, which should not be repeated, holding such to be a secret.

"If now I keep my oath may I enjoy a happy life and a prosperous practice and be held in esteem by all men, but if I break it may the opposite happen."

The modern disciple of medicine might well wish that these principles might be re-invoked.

Rife as was the profession of the ancients with mysticism, superition and obscurantism, its ethics were well defined.

VOTES FOR WIMMEN

For the first time in the history of the "Pre-Med" Society at the U. of N. a girl has been elected to hold an office.

Miss Maud Miller will serve as Secretary for the coming year and will try to keep tab on all the numerous events of Ye Society both solemn and otherwise. The boys are requested to use only cigars at the "smokers" next year—they're easier to count.

We thank you!

DIGITALIS

The professional use of Digitalis is relatively recent. It was recognized by Wm. Withering of Birmingham as an ingredient of an old woman’s secret formula. After ten years of experimentation, he published his results in 1785. He was interested chiefly in the diuretic effect, and mentions the cardiac action only incidentally. In 1799 John Ferriar emphasized the evidence of the circulatory and diuretic effect. The cardiac slowing particularly attracted attention, and as late as 1851 Traube referred to the clinical effects entirely to this "depressant" action, hence, Digitalis was used in anemia, internal hemorrhage, etc., for which it would be entirely suitable. Ten years later Traube accepted the rise of blood pressure, which had been discussed in animals, as the basis of the therapeutic effect. This has been disproved only quite recently.

Strophanthus arrow poison was brought to Europe in the early sixties, and its cardiac actions were promptly discovered. Its introduction into medicine is due mainly to T. R. Fraser, 1885. The use of Scilla dates from the ancient Greeks, although its cardiac action was not recognized.
Apocynum was used by the early settlers as a hydrogogue, cathartic and diuretic; presumably they learned its use from the Indians.

Convallaria has also been used for several centuries in domestic medicine, against cardiac symptoms.

Digitalis, Strophanthus, Squill, Apocynum, Barium and a number of other drugs increase the tone, excitability and contractility of cardiac and arterial muscle. The Vagus center is also stimulated. With therapeutic doses, these actions result in slower but more powerful beats of the heart, which brings about compensation in valvular cardiac lesions and thus relieves the symptoms:—the irregularities, edemas, congestions, dyspnea, etc. Under these conditions there is often marked diuresis. The blood pressure is generally unchanged in man, usually increased in animals.

The active constituents of digitalis comprise a number of glucosidal principles, of which digitoxin is the best defined, the most abundant, most active, and therefore the most important of the constituents of the leaves, but does not occur in the seeds. It forms crystals, readily soluble in alcohol or chloroform, difficultly soluble in water or ether. It is readily destroyed by ferments. It produces all the characteristic digitalis effects, but some of the undesirable side actions are too prominent. Besides digitoxin, the leaves and seed contain Digitophyllin, Digitalin, Digitonin. Of the many commercial Digitalis and galenic digitalis preparations, the powdered digitalis is often used, but is rather more irritant, and no more effective than a less irritant tincture. All things considered, a good standardized tincture is still the best and most reliable preparation.

Digitalis principles are stable when dry or in alcoholic solutions; but like all glucosides, they are subject to decomposition in the presence of water, bacteria, moulds and acids. The tinctures and preparations containing at least 50% of alcohol do not deteriorate materially. Sharp and Lankaster 1910 and Hale 1911 claim a slight deterioration after a year.

Explanation of Clinical Effects

Digitalis, and the allied drugs, are used mainly to restore broken compensation in heart lesions. They do this by increasing the tone of the heart muscle, thus lessening the dilation; narrowing the leaking valvular ring; and increasing the amplitude of the systolic contraction and the time output. They slow and regulate the generally rapid rhythm toward the normal optimum. They tend to remove irregularities, particularly auricular fibrillation. In all these ways they increase the efficiency of the circulation, insuring a better filling of the arteries, improving nutrition and oxygenation, and relieving the congested veins. The heart is among the first to feel the effects of this improvement. The vicious circle of poorer circulation is reversed by the improved circulation and stronger heart so that the effects outlast the administration of the drug, and the improvement is perpetual. At the same time, the circulation in
the kidney is improved by the faster flow of blood, the increase of arterial pressure and relief of the venous pressure. The kidneys are thus placed in the best condition for filtration or secretion. The anuria is relieved. If there has been edema, the improved kidney action results in extensive diuresis and thus in the absorption of the edematous fluid. This in turn improves the heart action and the whole circulation by relieving them of the compression caused by the edema.

All of the effects of the therapeutic stage of Digitalis action may therefore contribute to its clinical usefulness: The increased tone, by diminishing the cardiac dilation; the increased amplitude, by increasing the output and thus balancing the leakage or obstruction of defective valves; the inhibitory action, by restoring the rhythm and rate towards optimal and by partially blocking the response of the ventricle to excessively numerous auricular impulses (in auricular fibrillation); and the vasocostruction, by shifting the blood from the congested venous areas into the depleted arterial system. Their action upon blood pressure as such has no important share in the action; for it rarely occurs clinically even with intravenous injections. The action in health and disease are the same, whether the heart is normal or abnormal, the action is the same, but results are quite different.

Value of Digitalis in the Various Cardiac Derangements

Cardiac Dilation. In this condition, it restores the tone and contractions of an exhausted, fatigued, but otherwise normal heart muscle, It is most useful in those conditions in which the ventricular muscle is called upon to do an amount of work which exceeds its capacity, and which therefore induces the dilation. This occurs particularly in valvular lesions where the incomplete emptying of the heart places the muscle under an ever-increasing strain. The response will depend upon the quantity of muscular tissues on which the digitalis can act; it is therefore more effective in ventricular dilation (mitral and tricuspid insufficiency) than in auricular dilation (mitral and tricuspid stenosis). However, if the cardiac muscle is degenerated as in cardiosclerosis, digitalis will be useless or even harmful by the imposing of too great a task upon the few weakened muscle fibres. It is of little value against simple collapse since this is not due to muscular exhaustion, nor is it very effective against the toxic cardiac dilation of acute fevers. On the other hand, most striking results are produced by intravenous strophanthin injections in threatened acute failure from pure myocardial exhaustion.

Cardiac Irregularities. Especially effective in "absolute irregularity" of auricular fibrillation. Other irregularities are not so much improved and may even be exaggerated. Digitalis is rather dangerous in partial heart block. Overdosage may provoke any of the clinical types of irregularity even in a healthy heart and this will occur more readily when the heart is disposed with them by disease. It is therefore quite necessary to watch carefully for the appearance of any irregularities.
Auricular Fibrillation. This is the condition in which digitalis produces the most striking and rapid improvement. The rhythm does not become normal but the rate is reduced to about normal, the irregularity becomes less and the dyspnea and other symptoms of heart failure are relieved. This improvement is probably due to the lessened conductivity, by which many of the superfluous auricular impulses are blocked from the ventricle.

To obtain the best results the digitalis must be started with full doses and smaller doses must be continued for a long time. If auricular fibrillation occurs in cardiosclerosis or when the myocardium is excessively weakened, digitalis is much less effective and much more dangerous.

Excessive doses of digitalis may produce auricular fibrillation.

Paroxysmal Tachycardia, digitalis is said to be practically ineffective.

Periodic Changes in Sinus Rhythm which occur in nervous exhaustion rather than in cardiac disease are not benefited by digitalis. On the contrary, the vagus stimulation would tend to render them more marked.

Extrasystoles would not be removed by digitalis since they are probably due to heightened irritability of the myocardium—a condition which would only be exaggerated by digitalis.

Partial Heart Block is always exaggerated by digitalis, may be converted into a complete heart block. However, it may be cautiously used to relieve the symptoms even though it exaggerates the partial block.

Complete Heart Block. Digitalis can do no further harm for it does not slow the spontaneous ventricular rhythm. It would tend to quicken the beat. It might therefore be of some use (Bachmann). Irregularities in the strength of the cardiac contractions (Pulsus Alternans.) As this condition is attributed to exhaustion of myocardium, digitalis therefore should be of value. Should be used with caution, however.

Mitral or Tricuspid Insufficiency: As there is excessive dilation in these conditions, digitalis is very useful.

Mitral Stenosis. Digitalis would be less efficient in this lesion.

Tricuspid Stenosis. Digitalis often fails but restores the auricular tone.

Aortic Stenosis: As there is dilation, often irregularities, digitalis is very useful as long as heart muscle is able to respond to it.

Aortic Insufficiency: The usefulness of digitalis in this lesion has been much disputed. Older clinicians, since Carrigan, held it to be detrimental, fearing especially that the prolonged diastole would give the blood in the brain a chance to gravitate back into the heart and thus cause syncope. This danger is doubtless exaggerated especially if the patient is kept in bed. The improved tone of the ventricle may more than offset the hypothetical objection, at least digitalis is generally used in these cases if mitral insufficiency is also present. It should be employed more carefully and would be well to continue it with nitrite.
Absorption of Digitalis: Very gradual absorption from alimentary canal, more rapid with rectal and especially with intra-muscular administration. The dose influences the rate of absorption materially. Not absorbed from stomach. About 35% to 45% of drug is absorbed in two hours from intestine using digitalis leaves. Acidity of gastric juice destroys small part of drug, but too slight an amount to be important. After injection the drug disappears almost immediately from the blood, the fate of the drug is not definitely known, but supposed to be stored in cardiac tissue and blood vessels, less in liver and other organs. Excretion is partly by urine, mainly by feces (Hatcher 1909.)

Onset of Action. If administered by alimentary canal, the effects develop very slowly; 24 to 36 hours for circulatory action and 72 hours of the diuresis. If given intravenously, digitalis and its principles act almost immediately. The duration lasts from one to two weeks according to total dosage; this is explained by persistence of the digataloid in the tissues, or by persistence of cardiac changes after drug has disappeared.

Cumulative Action: The same dose continued day by day tends to produce ever increasing effects. The dose must therefore be diminished or toxic phenomena results, often quite suddenly. This cumulative action is explained in part by the slow and uncertain absorption and excretion. The principal factor, however, is the persistent and progressive action so that the total dosage is more or less summed up.

Toxic Effects: The effects of the drug vary according to condition of the heart, according to absorption and cumulative, etc.

Digestive disturbances occur early, such as nausea, great malaise, distressing headache, and if the drug is continued vomiting will occur. Diarrhea is not so common with digitalis, more frequent with strophanthinus, squill and helleborein. If these symptoms do occur, the dosage should be reduced or stopped. They will subside in one or two days.

Cardiac Irregularities. Most common is Sinus Irregularity, ventricular extra systoles are common; next stage is partial heart block. Dosage must be changed according to body weight, activity of preparation, absorption, individual susceptibility and nature of heart lesion.

Contra Indications: Digitalis should be avoided in partial heart block, and in advanced myocardia degeneration. Used with caution in coronary sclerosis, aortic insufficiency and irregularities, particularly auricular. Renal diseases emphasize the tendency to cumulative. Should never be used in hemorrhage.

Choice of Preparations: Of the various preparations of digitalis, a good tincture physiologically standardized has many advantages. The infusion is uncertain and unstable. The powder may be used, but has no advantage and is apt to be more irritant. The pill of Digitalis, Squill and Calomel, known as "Grey’s Hospital Pill" seems needlessly complex. The oral method of administration is best, except perhaps in acute muscular failure of advanced heart disease, where immediate effects are de-
sired. The digitalis is very irritant to the skin and usually leaves a painful point at place of injection following intravenous injection. All things being equal, as stated above, the best preparation is tincture of Digitalis and given orally it gives the most satisfactory results.

THE PTOLEMY SOCIETY

The Ptolemy Society is a national organization of Masonic students and Practitioners of Medicine. This organization had its origin in Jefferson Medical College about 20 years ago. A number of Masonic students, with Dr. Justus Sinexon who was a member of the teaching staff, organized the first Sarcophagus, and Dr. Sinexon is now and has been for many years, the Amen Ra, or presiding officer, of the Ennead, or Supreme body. There are now 320 members at Jefferson Medical College, among whom may be mentioned Dean Patterson, Prof. J. Chalmers, DaCosta, and many others of national repute. The extension of the organization from school to school has been gradual but progressive. Sarcophagi are now to be found at Jefferson Medical College, Uni. of Penn., Northwestern Uni., Uni. of Ill., and Nebr. Uni. with negotiations being carried forward in several other schools. Only applications for membership from schools recognized by the American Medical Association are considered.

The purpose of the organization is to advance, by all honorable methods, the study and practice of the art and science of Medicine, to make more enjoyable its associations of Brother Masons, and to assist in any way possible, those of our student body who may be interested in Masonic work. Membership in this society is gained by petition and application is open to any member of the Student body, graduate of this school, or member of the faculty who is a Master Mason in good standing at the time of making application. The society is very desirous of becoming acquainted with all of the Brother Masons within the student body.
body, alumni or faculty and with all those who are contemplating taking up any of the Masonic work, and would appreciate it very much if such men would make themselves known to any of its members. The Ptolemy Society is not intended to interfere or conflict with any of the Greek letter fraternities, but should serve to bring about more friendly relations between the organizations, and it is desired that each Fraternity as well as the non-Fraternity men, shall have a large representation in this society.

Nebraska Sarcophagus No. 7 was organized in May 1919, with the following men as charter members:

H. E. Harvey '20
L. D. Rose '21
B. T. Baer '21
W. O. Lewis '21
H. L. Wolfe ex. '22
C. B. Huestis '20
A. D. Davis '21
A. W. Anderson '21
G. H. Beck '21
L. T. Swanson '22
E. H. Camp '20
W. T. Johnson '21
J. D. Davis '21
O. C. Nickum '21
Dr. C. W. M. Poynter

The initiation of the first class of men was held at the Masonic Temple, May 7, 1919, and the following men were initiated:

A. E. Hansen '22
Dr. A. L. Cooper '19
Dr. J. R. Nilsson
Dr. R. D. Bliss
Dr. A. R. Knodle

Dr. C. Rubendal
Dr. W. F. Callfas
Dr. C. H. Ballard
Dr. I. S. Cutter
Dr. H. A. Wighton

The first annual banquet was held at the University Club May 9, 1919, at which the Hon. A. C. Epperson, The Grand Master of the Masonic Lodge for the State of Nebraska was the guest of honor.

An informal dinner was held at the University Club Apr. 28, 1920, after which the following men were initiated.

F. A. Humphrey '21
C. R. Carlson '22
H. H. Kretzler '23
D. H. Morgan '21

G. H. Moates '23
E. E. Simmons '21
C. A. Owens '23

THE WOMAN QUESTION

By D. H. Ela

Once Adam woke from dreamless sleep,
Or pleasant dreams—who knows?
But peaceful sure, or light, or deep
For angels guarded his repose;
And quiet too; for there as yet
Existed none else human.

A quiet brief; for, while he slept,
His rib was made a woman.
He woke to gaze with dazed surprise
Upon a wondrous vision—
Himself; but 'twas himself revised,
And bettered by revision,
And mixed and strange the surging tide
Of feelings that came o'er him,
With sense of loss, he sure had gained
The beauteous one before him.

'Twas gain in loss; the paradox.
His sons have settled never,
He found himself with one rib less,
Yet more a man than ever,
And happier he than all his sons
Who traffic in that mart;
For what he purchased with a rib,
They have to pay a heart.

And still his paradox was she—
Alternate crown and cross,
He found at first his loss a gain,
And then his gain a loss;
For wild the earth; and desolate,
Where'er his steps might roam;
And not till woman came it bloomed—
His beauteous Eden home.

Yet she, fair sharer of his bliss,
By serpent arts beguiled,
Changed the sweet bowers Elysian
To desolation wild.
Ah! when, without a wife to guide
His erring footsteps thither,
Did man e'er find a paradise,
Or fail to lose it with her?

When Adam found, so Milton says,
And he, you know, discloses
More in detail the whole affair,
And most as true as Moses—
When Adam found what Eve had done,
And knew the sad disaster,
The question rose, to stay alone,
Or eat, and follow after.
His choice, a dread dilemma's horns,
Each threatening to impale him;
And, whichever, he chose, quite sure,
It nothing would avail him.
If he refused, and stayed alone,
It Eden were no more;
Or, if he ate, and followed her,
His Eden life were o'er.

Not long delayed he, though he held
The fate of all things human;
When choice 'twixt wife and Eden stood,
He quickly chose the woman.
And wasn't he right? I ask, and own
The paradox consuming;
'Twasn't Paradise till she came;
She ruined it by coming.

Just so full many a son of his
Has deemed his garden patch
Would like another Eden bloom
With he beneath his thatch,
And many a one whom she has led
From Paradise, not thither,
Has said, "Who'd live without a wife?"
One can but just live with her."

But ever since that solid sleep
When that one rib went out,
Man's had a certain weakness on
That vacant side, no doubt;
And as we always cling the most
To what is loved and lost,
So man has clung to that old rib,
Regardless of the cost.

DISPENSARY NOTES

Attention, Juniors:—The T. B. Ford is in need of repairs, so the story goes. Who will volunteer their services?

From May 1st to 6th, inclusive, we admitted 53 new patients and had 220. We feel that the move March 1st has been a benefit to the patients hence the increase in the number.

We are very glad to have Dr. Fred Niehaus with us again after having spent some five weeks at the City Emergency Hospital.

The sign painters visited us last week and all departments are now properly designated by a sign on the door.
SOPHOMORE CLASS NOTES

On account of the constant discontent shown by certain members of the class over the awards made last month the Board of Directors decided to supplement the list by the following additional awards:

Brazda—The poisoned olives.
Algorta—The barbed wire necktie.
Thompson—The cement ear muffs.
"Kitchen Sink" Hansen—The rock ballasted mattress.
Best—The hand painted oil can.
Moritz—The Kerosene filled fire extinguisher.
Schwartz—The folding stomach pump.

Swanson has entered his racer in the International Sweepstakes race at Indianapolis this summer and expects to win.

The police interrupted two men and Alex Cameron the other day after Cameron had paid them $35.00 down as a first payment on the First National Bank Building.

Schwartz is suing Mr. Turpin for non-delivery of his dance hall. Schwartz has it more than half paid for.

THE MATHEMATICAL COOTIE

They add to your troubles
They subtract from your pleasures,
They divide your attentions,
And multiply like h—

Heard around the Nu Sig eard table, playing with sugar.
Schwartz: "I open it for two ounces."
Noble: "I'll raise it two lumps."
Hinkle: "A hand like this is worth a pound. I'll stay."

Bunton to Chet Johnson: "Don't you like me, Chet, in my new gray suit and derby?"
Chet: "Oh me, you look sweet enough to kiss."

THE STAR CHAMBER

What significance has that heading to the Freshman along about now?
We are willing to wager that if a vote were polled at quiz time Herod would win over Dr. Poynter in a popularity contest.

There is an accouchment scheduled in the family of an adherent of a certain religious cult. Will some one kindly page Rose, Mr. Lewis has just left.

Fifty odd Juniors and not one who knew whether a vitamine was a Battle Creek product or one of Crile's endocrines?

In the event that everybody weathers quiz week won't there be a wild time in the various soda-palaces?
Notice! Is it senile or senile, etiology or etiology, adult or adult?
You may have read all the literature extant concerning measles, you
may be so familiar with that exanthem that you can diagnose it in the
dark but ye editor doth depose and say that unless you’ve had ’em in
adult (or adult) life then, in vaudeville parlance, why, “you ain’t heard
nothin’ yet.”

For the benefit of the African polo artists we quote this justification
from Kiplings Certain Maxims of Hafiz:
If He play, being young and unskillful, for shekels
of silver and gold,
Take His money, my son, praising Allah. The
kid was ordained to be sold.

Did that instructor realize, we wonder, the paens of envy and unrest
he aroused in his hearers as he told of student days in Prague, Paris and
Vienna?

Are the immortal triad, w. w. and s. to be relegated forever to the
limbo of forgotten things?

Just at random, how is this?
“Their predilection for moxibustion and acupuncture explains the
fact that the blood-shy Chinese physicians seldom make use of venesection;
cupping, dry and with copper cupping vessels, on the other hand,
is amongst the usually practised derivitive procedures and comes into play
in several diseases.”

DISCOVERED!
The Cause of Red Hair!

Dr. Barker’s latest story on prenatal influence tells of a small boy
with fiery red hair. It follows further that this boy was the only member
of a very large family who possessed hair of the aforementioned hue. The
boy’s singular good fortune was explained by the fact that the mother had
received a very severe fright by the house catching on fire. (So the papers
say! Eh, wot?)

A farmer suffering from a severe attack of indigestion went to an up­
to-date hospital seeking relief. After the operation he was told that a
wonderful feat had been performed, his stomach, which was found to be
entirely worn out had been replaced by a goat’s stomach. Can the
“Meds” kindly inform the anxious wife as to the proper diet, and tell his
sympathetic friends if they are correct in expecting him to chew his cud.

Doctor—Did you take the medicine?
Patient—No.
Doctor—Why not?
Patient—The instructions said “Keep bottle tightly corked.”
WANTED THE BEST

"Gimme one o' dem plasters fo' mah back," said Uncle Rastus in a drug store.

"One of the porous plasters?"

"No, sah; I don't want one o' de poore's plasters; I want one o' de bes'."

KNEW WHAT HE WAS ABOUT

A member of a national medical association tells the following story at the expense of a physician, says Harpers.

"Are you sure," an anxious patient once asked, "are you sure that I shall recover? I have heard that doctors have sometimes given wrong diagnosis and treated a patient for pneumonia who afterward died of typhoid fever."

"You have been woefully misinformed," replied the physician, indignantly. "If I treat a man for pneumonia, he dies of pneumonia."

Doc: "Now, keep these pills on your stomach all night."
Next morning.
Doc: "Well, pard how did you make it?"
Patient: "I tried my best Doc but they kept rollin' off."

Latimer: "Doesn't she look like a beautiful Rose?"
Scions: "The Lord must have worked over time on her stems."

"Be it ever so Homely
There's no face like your own."

Martha: "Of all sad words of tongue or pen are these few words:
"We're short of men."

A small girl after having been absent one afternoon from school brought the following note to the teacher:

Dear teacher: Please don't teach Dorothy any more about her insides. It ain't decent and besides, it puts her off her feed.

SURE CURE

Little Willie from his mirror
Slicked the mercury all off,
Thinking in his childish humor
It would cure his whooping cough.
At his funeral Willie's mother
Sadly said to Mrs. Brown;
"'Twas a cold, cold day for Willie
When the mercury went down."
I'LL DIE BEFORE I DIET
Words and Music by Norral.
If I were forty 5 or 6 — — or fifty pounds 2 fat,
I'd say, "I'm glad I'm hefty," and let it go at that
I will be darned if I'll refrain, from eatin' carbohydrates
And go around so hungry, that I could eat the pie plates.
I ain't agoin' to cut out spuds and vegetables and sweets,
And abolish from my menu, all pastry, nuts and meats.
Though fat reducing may substraet, I ain't agoin' to try it,
I'll go through life an over-weight, I'll die before I'll diet.

THE HIGH COST OF FEEDING
The high cost of feeding is making me broke,
For a quarter square-meal I long and I choke,
All you get for two-bits you can rub in your eye,
The price of a meal is too gosh-durned high.
It takes a small fortune to board for a week,
All you get in a month you can stick in your beak.
If I founder in this burg it sure will be odd,
For the high cost of living is shooting my wad.
And when at last I have taken my fill,
I go up in an air-ship to look at my bill.
The nickle-plate days are a thing of the past,
And the high cost of feeding has taken my last.

LAST PRIZE
Adelia with that nose so pug,
Each time I look upon your mug
I can't help thinking in a race
For beauty, you would win last place.
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