Skeletons in the Medical Closet:

Pioneer Chiropractic and Osteopathic Schools in Western Pennsylvania, 1910-1944

by Russell W. Gibbons

The end of the first decade of this century was to American medicine a period of toil and turmoil in which a veritable sea of change overtook the institutions that had trained health care practitioners in America. One authoritative medical sociologist has described the period as a consolidation phase following the profession's own "civil war and reconstruction" period of the late 19th century.  

Americans had consistently expressed disdain for organized medical services and institutions through most of the first 100 years of the new republic. And doctors who came to practice in growing urban centers in the Jacksonian Democracy era, in the middle third of the century, found that society's most influential elements did not look with favor upon professions or callings whose members sought regulation of their occupations. Attempts at regulation were beat back as anti-democratic efforts to enact "licensed monopolies." The so-called "regulars" (practitioners who followed acceptable dogma passed along by the physicians of the colonial era and who taught in pioneer medical schools such as Harvard and Yale) noted a public as wary of medical authority as it was of political or religious institutionalism. Thus began an era of evolution and transformation in medicine, which, later, would include a sort of itinerant medical entrepreneurism among some of the sects rivaling the old school physicians.  

Pittsburgh, an industrial city of over 570,000 by 1910, would seem to be an unlikely locale for the training of alternative, or "sectarian" physicians in the years immediately before, during, and after World War I.

Russell W. Gibbons teaches history at Community College of Allegheny County in Pittsburgh and also edits Chiropractic History, the journal of the Association for the History of Chiropractic. His father was a chiropractor. He is presently completing a social history of the field. Right: Pittsburgh has a solid reputation as a medical pioneer, and this reputation includes a turn-of-the-century osteopathic school and hospital; the city was among a small handful nationally with such "alternative" institutions.
1890s, medical schools had proliferated dramatically; corresponding was the supply of generally ill-prepared physicians. One writer notes that “the immediate beneficiaries of this expansion in supply were the proprietors and professors of the (medical) schools.”

Reform was clearly necessary. The clarion call for it can be traced to 1870, the early years of a period of rapid urban population growth, when Harvard President Charles Eliott declared that “the ignorance and general incompetency of the average graduate of American medical schools, at the time when he receives the degree which turns him loose upon the community, is something horrible to contemplate.”

While debate about upgrading the quality of medical care occupied much of the profession, Pittsburgh’s only medical school, organized in 1886 as the Western Pennsylvania Medical College, attached itself to Western University of Pennsylvania (the University of Pittsburgh since 1908) in 1892 as a department. By 1909, the medical school had reorganized to the satisfaction of medical education’s foremost critic, Abraham Flexner. A non-physician commissioned by the Carnegie Foundation for the Advancement of Teaching to survey all medical schools in 1909-10, Flexner essentially condemned the state of medical education as “deplorable and wretched.”

Visiting Pittsburgh’s medical school in February 1910, Flexner observed that “a more thorough piece of house-cleaning within so short a period is hardly credible,” saying that only a year before “the so-called laboratories were dirty and disorderly beyond description.” Flexner tended to go overboard in his condemnation, each institution seemingly a candidate for “the worst” school (including the alma mater of brother Seimon Flexner, who became research director for the Rockefeller Foundation) and Pittsburgh was no exception: prior to the university takeover, it “was a highly prosperous concern to its managers; nowhere in the country were worse conditions found.”

Indeed, medical education in the first decade of this century was a money-making business. Of the 155 schools Flexner surveyed, fully 80 percent (122 institutions) were for-profit concerns. Most of the revenue, principally from student tuition and fees and occasionally from clinics of associated hospitals, went into what Flexner derided as “professional pockets.”

The country was well into the Reform period, and for many the state of American education was an obvious target. The injunction of the president of the Carnegie Foundation in 1910 laid the basis for Flexner’s sweeping, if not revolutionary, recommendations, deploring the situation in which “American youth, too often the prey of commercial advertising methods, is steered into the practice of
medicine with almost no opportunity to learn the difference between an efficient medical school and a hopelessly inadequate one." Henry S. Pritchert, the Carnegie's head, warned that "such a boy falls an easy victim to the commercial medical school, whether operating under name of a university or college, or alone." One can only speculate as to how many students were flushed into the alternative or "sectarian" schools by the declining proprietary medical school system. It may be a coincidence of institutional chronology or a pattern of the itinerant alternative healers themselves, but as medical education underwent reformation in Western Pennsylvania, the advent of sectarian medical education took place.

Surveying the pioneer years of both osteopathic and chiropractic education in this watershed period of medical reform shows that the experiences within both disciplines were distinct. Torn between the orthodoxy of traditional medicine and the radical philosophies of those leading the two break-away fields, early practitioners and school administrators chose different roads of advocacy. Those seeking the right to practice medicine and surgery as well as manipulative therapy came to dominate osteopathy. Chiropractors, however, would continue their internal strife for a third of this century, with a reform movement becoming viable fully a generation later. Today osteopaths are physicians and surgeons by law as well as concept, while chiropractors, with more than double the number of practitioners than their manipulative cousins, confine their health care primarily to spinal manipulative therapy.

In the year that Flexner's seminal work was published and the reorganized and politically confident American Medical Association began to assert itself, the first of several "offbeat" medical schools appeared in Pittsburgh. An appropriate way to illustrate some key historical tenets of this development is to trace the careers of two self-described sectarian "schoolmen" — the profession's term for its early educators — who practiced in Pittsburgh in the early 1900s. They are Andrew P. Davis and Joy M. Loban. Both were, in effect, "present at the creation" of osteopathy and chiropractic.

Davis and Loban were but two of several pioneer chiropractors who took literally the injunction of Daniel David Palmer, who founded the chiropractic profession, to "teach and practice." Along with five others who either studied under Palmer or graduated under Palmer's students, Davis and Loban worked at no less than thirty-two institutions in 14 states and the District of Columbia between 1896 and 1924.

Though his tenure in Western Pennsylvania was the shortest, Davis is especially fascinating because he personifies a small but apparently influential minority in those schools of practice that parted from regular or "allopathic" medicine. Born in the southwestern New York state hamlet of Allegheny in 1835, Davis followed a path familiar to 19th century physicians. According to a medical colleague, Davis was "taken into custodian-ship by a learned gentleman, who drilled, trained and graduated him in the Regular school of medicine and supervised his early practice." Davis found that "the inconsistencies of the Regular practice were too palatable for his discerning mind," observed an associate, and he investigated, studied, and graduated in the homeopathic school. The homeopaths, founded by the German physician, Samuel Hahnemann, in the early part of the last century, saw illness as an expression of disorder within the "vital force" of the body; positive expressions of this force were believed to be the body's innate healing capacity.

Andrew Davis did not stop with homeopathy, however. By all accounts he explored virtually every known alternative healing school, and with all of the outward attributes of a professor, clinician, author, lecturer, and school administrator pursued a vigorous pattern of practice, publishing, and schooling in at least eight states before his arrival in Pittsburgh.

Davis was a veritable travelling exponent of healing therapy. When he arrived in Pittsburgh in the summer of 1910, his vita listed a degree from Rush Medical College in Chicago, which during this period could be considered the midwestern companion to Harvard and Johns Hopkins as an untarnished non-proprietary medical school. In addition, his vita listed homeopathic Pulte College of Cincinnati as another alma mater, postgraduate homeopathic work in New York, Cincinnati, Chicago and St. Louis, and ophthalmology training in Chicago.

It was in Missouri and Iowa, however, that Davis associated himself in the formative years of the two "manipulative protest schools." In Kirksville, Mo., he took up osteopathy in the small town where Andrew Taylor Still had founded his American School of Osteopathy in 1892. Still believed that man was essentially a mechanism whose body, accordingly, was subject to mechanical laws. Commissioned in the Civil War, he had a questionable medical education that was typical of this period, reportedly attending the College of Physicians and Surgeons in Kansas City. "His training was similar to and probably better than many of the physicians of his time," according to his biographer.

Davis came to Kirksville in 1896, and like several of the old school physicians who took up the new protest school, he joined Still's faculty. He published a large volume called Osteopathy Illustrated in 1899, the same year that he located in the Mississippi River town of Rock Island, Ill., across the river from Davenport, Iowa. Soon he came into contact with another unorthodox doctor who had gained a following in Davenport. Daniel David Palmer, a magnetic healer of some prominence, had announced a new concept of health and disease in 1895 called chiropractic. In 1897, he began formal instruction on the top floor of the Ryan Building, which housed Palmer's School and Cure, later known as the Palmer School and Infirmary of Chiropractic. Not the first "old school" healer to be converted — a
homeopathic physician named Andrew P. Seeley had that distinction — Davis paid Palmer $500 for his instruction, graduating in 1898. He began practice in Rock Island a year later, before moving to nearby Moline.

Taking advantage of itinerant physician provisions in various state medical registration acts, which allowed practice in the given state for a monthly payment, Davis began an odyssey that would eventually bring him to Pittsburgh. In tracking his path in the century’s first decade, it should be recalled that this was the growth period of the two dissenting manipulative schools, which had to fight for political and legislative survival at the same time they were developing their own institutions. They also became absorbed with infighting that had become characteristic of all sectarian dogmas. Davis, for instance, came to the aid of Palmer in 1903, when he helped circulate a notarized statement which asserted that osteopathy and chiropractic “are as distinct from each other ... as day is from night.” Coming from one who had studied under both “The Old Doctor” (Still) and “Old Dad Chiro” (Palmer), his statement carried weight in the courtroom battles significant to both emerging professions.¹²

His travels are all the more remarkable given the geography he covered. Retaining his M.D. credentials while exploring and practicing new therapies, Davis called himself a “Neuro-Ophthalmologist” and later a “Neuropath” while continuing to advocate both oste-
opathy and chiropractic. His literature proclaimed “The New Method for the Cure of all Human Ills.” In mid-1901, Davis was in Battle Creek, Mich., home of the famous Kellogg natural hygiene sanitarium, where he joined forces with a one-time Methodist minister, Allen Raymond, who had completed his courses under Palmer in February. Adapting a period terminology, they coined the “Davray” practice, which was advertised as the Davray Neuropathic System of Treatment. In 1902, Palmer went to the West Coast and his son, Bartlett Joshua, assumed direction of the Davenport school and infirmary. Davis returned there for another course before going to Chicago, where he completed additional study in ophthalmology at a shadowy medical institution, McCormick Optical College. Ophthalmology appeared to dominate Davis’s therapeutic bag for the balance of his career.\textsuperscript{13}

In 1904, Davis was in Dallas, where he was conducting a school for healers in the tradition of his mentor, Palmer, who had declared his graduates fully equipped to “practice and to teach” the new science. In Dallas, he published his second book, Neurology, which he contended had supplanted both osteopathy and chiropractic as viable therapy, although he used the term neuropathy interchangeably with neurology in this period.

As with many of his counterparts, contradictions abounded in his writings and practice. His book was advertised among osteopaths and chiropractors as an adjunct to their clinical work. According to Merwyn V. Zarbuck, an Illinois chiropractor who has researched the itineraries of many of the pioneer medical dissidents, Davis went from Dallas to Rockford, Ill., St. Louis, returned to Dallas, and then located in Los Angeles in less than 10 months between late 1905 and Fall 1906.\textsuperscript{14}

His whereabouts for the two years after his arrival in Los Angeles are not clear, but in 1909, he turns up in Portland, where the senior Palmer had formed a new school and was completing his manuscript for what is considered his seminal work, The Chiropractor’s Adjustor. Davis renewed relationships with chiropractic’s founder and exchanged correspondence and concepts, sometimes bitter and sarcastic, about their differing ideology.

In early 1910, Davis again returned to the Midwest but soon formed a partnership with a Pittsburgh osteopath named M.A. Kassmir, a German-born therapist who had earned a chiropractic degree in Minnesota from one of Palmer’s early graduates and a doctorate in osteopathy from a West Virginia college. Kassmir had operated a sanitarium in Duluth, Minn., before coming to Pittsburgh, where he opened the Mt. Clemens Sanitarium on Liberty Avenue downtown.\textsuperscript{15} Kassmir then formed the Union College of Osteopathy and affiliated it with his Pittsburgh Osteopathic Hospital, which occupied a three story building in the Oakland section of Pittsburgh, site of the University of Pittsburgh and its medical school. Andrew Davis became dean of the faculty at the Union College, which, despite its title, embraced most of the therapeutic offerings that he had become acquainted with in his travels and studies during the previous 10 years in a dozen communities across eight states.

The 1910 announcement of the college includes a faculty photo of eight men and two women, five of them claiming M.D. degrees, with an equal distribution of osteopathic, chiropractic, “naturopathic” and “ophthalmologic” degrees. There are also indications that one faculty member, Callie Mounts Davis, listed as “Professor of Ophthalmology and Physical Optics,” was Andrew Davis’s wife.\textsuperscript{16}

Kassmir and another colleague on the faculty were the only faculty osteopaths listed among those registered in the city directory for Pittsburgh in 1910, and the balance of the medical pedigrees are conjecture.\textsuperscript{17} E.R. Booth, an early osteopathic historian, reports on the so-called “pseudo osteopathic schools” that “. . . have proven injurious to osteopathy as an historic fact.” The mainline American Osteopathic Association had sought to eradicate institutions like Union College, but this was not before they produced osteopaths who would in turn perpetuate the “pseudos.”\textsuperscript{18}

Before leaving Pittsburgh, 13 graduates of Davis’s “class of 1911 in Neuropathy and Ophthalmology” signed a statement expressing their “entire satisfaction with [his] method of teaching.” The statement, used in the 1911 announcement of the Bullis & Davis School of Neuropathy, Ophthalmology and Chiropractic in Los Angeles, was signed by two osteopath-chiropractors, a physician-chiropractor, an osteopath-naturopath and a pharmacist. The eight others did not list degrees.\textsuperscript{19}

Like so many of those prominent in the early landscape of chiropractic, Davis — who by then was 78 years old — disappears from the literature after helping a California chiropractor, B.S. Bullis, launch a school in 1913 in Oakland, Calif., that became the California Chiropractic College.\textsuperscript{20}

The life of Union College and the Pittsburgh Osteopathic Hospital were apparently brief, for city directories contain no references to them after 1912. That was the year, however, that another institution would make its appearance in Pittsburgh. Its life would embrace three decades and two world wars, much of it directed by a colorful figure little known outside the field of chiropractic, Joy Maxwell Loban.

Loban was one of those enigmatic personalities drawn to Palmer’s Davenport center in the early years of chiropractic. Unlike Davis, there is no evidence that Loban had any formal medical training, though his grasp of philosophical and scientific topics in two decades of professional prominence as an author, educator, and practitioner suggest more than the year’s schooling he received at the hands of both Palmers.

His travels were brief and confined to four states and the nation’s capital. In 1908, Loban and B.J. Palmer — writers in the field call the latter “B.J.” to distinguish him from his father, D.D. Palmer — exchanged extraordinary
rhetorical outpourings about the other, all the more remarkable because in two years they would become bitter antagonists and rival schoolmen. Consider this dedication to Loban by B.J. in the fourth edition of his Science of Chiropractic (1908): “[O]ne small wily, sincere and conscientious man, whose whole object is the uplifting of this philosophy ... he is more than an acquaintance or friend, but a companion such as gives backbone to my research and to me personally and professionally.”

Loban returned the accolades to B.J. in the pages of The Chiropractor, the monthly journal founded by D.D. Palmer in 1904, an article entitled “What is Genius?”: Through the efforts of “that one man,” wrote Loban, “backed by the fire of his genius, the truths and the principles of this grand science ... are being evolved ... never have I met such a man who possessed this faculty for original philosophical thought (and which accounts for) his undisputed title to the leadership in the chiropractic world.”

August A. Dye, an early sanctioned Palmer historian, writes that B.J. “discovered Loban, whom he thought proper material to take his place as Lecturer on the Philosophy of Chiropractic.” Dye adds that Loban, not content with teaching, left the Palmer School in 1909 to enter private practice. One year later he returned and associated himself with the Palmer rebels who in April 1910 had walked out of B.J.’s lecture, marched down Brady to Sixth Street in Davenport and formed the Universal Chiropractic College. The founding of the college marked the first significant challenge to Palmer hegemony in the field.

Loban left the Universal faculty, where he was dean, and went to Washington, D.C., where he became dean of the Washington School of Chiropractic and was listed as Chair of Symptomatology, Theory and Practice, Vertebral Palpation and Adjusting. His wife, Ethelyn G. Loban, was listed as chair of Physiology and Histology. Loban wrote his first book, Technique and Practice of Chiropractic, in 1915 and another volume, Diet and Exercise. Moving on from Washington, he practiced in Atlanta before coming to Pittsburgh about 1916; he was listed as dean of the faculty of the Pennsylvania College of Chiropractic in 1917. The college had emerged in 1912 under a Delaware charter held by a physician and a chiropractor in a downtown office building. After several moves, a mansion on South Fairmount Street in the fashionable East End of the city was acquired, and a faculty assembled that included five physicians, a pharmacist and several chiropractors.

It may have been inevitable that within a year the Pittsburgh institution would open talks with Universal College in Davenport, which was competing with the Palmer School for the allegiance of the newly discharged veterans who were re-entering civilian life after World War I. Universal College was under poor management, and Loban became the impetus for the merger, which occurred in 1918. The successor institution became the Universal Chiropractic College, with the physical properties and clinics of the Pittsburgh college its new home.

Loban guided Universal as president until 1927 and co-authored a Textbook of Neurology with Charles R. Bunn. After leaving Pittsburgh, Loban went to Denver, where he entered into practice and publishing ventures with Bunn, a former faculty member of Universal College in Davenport. Neurology was praised in chiropractic journals and received a good reception at the colleges which occupied the middle and broadest scope of the profession in the 1920s and ’30s, and the conception and content of the text is still intriguing. According to Lloyd Reiker, a chiropractic faculty member at New York Chiropractic College with a background in physiology, the volume represented “a sophisticated understanding of a complicated science that was important to chiropractic yet not fully explored by its practitioners in those years.”

An intriguing question persists: could a person with even better-than-average intelligence, limited to a restricted overview of the basic sciences at the Palmer School in 1907-08 and the dogma of the Palmers, become proficient in so complex a discipline? Loban was a talented writer and articulate teacher who could have grasped enough knowledge to write the book with a colleague. (Perhaps his pre-chiropractic training was in the basic sciences, with possibly even an exposure to the study of medicine, but as with many of his contemporaries in Davenport, this is not known.) We know nothing of his co-author Bunn other than his faculty appointment at Universal College, adding to the enigmatic flavor of their collaborative effort.

The quality of Universal instruction in Pittsburgh for the two decades it was located in the East End (two later moves were to Fifth Avenue and then Meyran Avenue, both close to the medical/hospital/university district of Oakland) was evident in its alumni, who constituted a significant part of Pennsylvania and eastern state practitioners. Two prominent 1920s graduates were Vinton Logan, a college president whose father founded the St. Louis college bearing the Logan name in 1935 and which stills exists there, and Frederick W. Illi. Illi was the Swiss chiropractor who advanced some of the first original research in structure and body dynamics in Geneva through the decades before and after World War II. The war terminated the Universal experience, its students transferring in 1944 to Lincoln College in Indianapolis, which later merged with National College in Chicago.

Davis and Loban were part of the classical period of chiropractic education, taking the injunction of founder D.D. Palmer literally to “practice and teach.” While sectarian to the members of the regular medical fraternity, they shared most of the fundamentals of the basic sciences in their efforts to spread the new healing doctrines that came into their own in the first two decades of the century. In the great American tradition of advocacy, utilizing the opportunities of mobility in
Chiropractic and osteopathy were revolts against established medical education and treatment, and interiors at the Pittsburgh College of Chiropractic, c. 1922, are a study in vernacular oak "Mission" furniture, generally seen as a design revolt against the old-fashioned ornamentation of the Victorian era. A patient waiting room, middle, and the adjusting rooms of Dr. Joy M. Loban, right, and Dr. A. Galbraith, top.
the post-frontier decades of growth, they became itinerants of healing and the pioneer educators of a profession in formation.

---

2 Ibid.
3 Ibid.
5 Ibid.
6 Ibid.
7 Henry S. Pritchert, in introduction to Flexner’s *Medical Education*.
8 Ibid.; various college announcements. Only three of these institutions survive today: Palmer in Davenport, Iowa; Western States in Portland; and Cleveland in Los Angeles. Early chiropractic schooling appears to have been essentially an itinerant function performed by those who encountered the senior Palmer in an academic setting or who had been instructed by his graduates. Palmer ran schools in California, Oklahoma, and Oregon during his two extended absences from Davenport (1902-03 and 1906-1913).

Like Palmer, Davis and Loban were authors, and their works became texts in the schools that they ran. Books were one of the few profit-making ventures (other than tuition and fees), and all of these early practitioners took advantage of the opportunity for extra income.

9 F.L. Rowe, in introduction to Andrew P. Davis, *Osteopathy Illustrated* (Cincinnati, 1899).
10 Announcement, Union College of Osteopathy, 1910-1911.
11 E.B. Smith and Andrew Taylor Still, *American Osteopathic Association* (Chicago, 1965). Still was an eccentric non-conformist, abolitionist and sometime lay preacher whose father was a missionary to the Shawnee Indians in Kansas. Still's ideas for medical reform were rejected at the university his family had helped found in Baldwin, Kan. In 1874, Still returned to Missouri, where, according to Smith, he “flung to the breeze” his new theory of health — osteopathy. When he founded the American School in Kirksville, the charter specified that practitioners would strive to “improve our present system of surgery, obstetrics, and treatment of diseases generally.”
13 Records of Davray Neuropathic Institute, 1902, Battle
SKELETIONS IN THE MEDICAL CLOSET

Creek, Mich. McCormick surfaces in "drug-less" literature for the better part of this century but was anonymous in the watershed Flexner Report of 1910. A full page advertisement in The Medical Brief for August 1903 advances Davis’s beliefs. He wrote that he denied “luxations being the cause of nerve


imprigements" (sic), thus challenging the basic tenants of both schools.
15 Announcement, Union College of Osteopathy, 1910-1911.
16 Ibid.
17 Folk City Directory, Pittsburgh, Pa., 1910 and 1911.
18 E.R. Booth, History of Osteopathy (Kirksville, Mo., 1924); Norman Gavitz, The DO's: Osteopathic Medicine in America (Baltimore, 1982).
19 Announcement, Bullis & Davis College of Chiropractic and Neuropathy, 1911.
20 Stanford Research Institute, Chiropractic in California (Los Angeles, 1960).
24 B.J. Palmer, History in the Making (Davenport, Iowa, 1957). A parade in 1913 resulted in patricide allegations being leveled against B.J. and a series of bizarre events that strained relations between the surviving Palmer and Loban. In the incident, B.J.’s auto struck his father near Universal College, but a two-year-long legal proceeding ended without a criminal indictment being filed, despite attempts by the Iowa attorney general to secure one. Loban had been named by D.D. Palmer as the administrator of his estate, and after Palmer’s death, Loban filed a civil suit against B.J. The suit was later withdrawn.
25 Announcement, Washington School of Chiropractic, 1912.
26 Announcement, Pittsburgh College of Chiropractic, 1917.
27 The textbook, Neurology, was reviewed in the National Chiropractic Journal 4 (July 1935): 7; Lloyd Reiker, personal correspondence, 1991.