

Bryonia, whether perceived as proving picture, or disease process, or as personality type, or as a plant, everywhere expresses the common denominator of all its forms of appearance and symptoms, the search for stability, the search for security.

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A COMPLETED PROVING OF BUTYRIC ACID WITH CLINICAL CONFIRMATION

BY WILLIAM B. GRIGGS, M.D.

In presenting a proving of a drug done according to the method of Hahnemann, I feel rather apologetic because of the fact that when I scan the recent homœopathic literature I realize that I am alone in this particular type of work; but this has been my real hobby for over forty years, and the only excuse I have for doing it is the fact that I have gathered valuable information not in the orthodox materia medica. My proven remedies are the tools I use to help restore the sick to health.

Furthermore, when brought face to face with the fact that in our materia medica I can find no positive curative remedies in the treatment of cancer, tuberculosis, diabetic coma, acute leukaemia, etc., I feel as though I must start to seek for new remedies which may help in these types of cases, for I believe there is an antidote for every morbid poison, and the wise architect of the universe, I believe, has so ordained it.

Therefore, in my meager and humble way I have worked, mostly alone, but in a logical manner to find the curative effects of some basic substance not in the orthodox materia medica. I may say also that I have met with many adverse criticisms where they were least to be expected, but the

law of *similia similibus curantur* is a fact, and I know Hahnemann's theory rests immovably on the eternal laws of nature. I am a disciple who follows him.

There are three acids of fermentation in the universe—acetic, lactic, and butyric. *Acetic and Lactic acid* have been partially proven in the old materia medica, but *Butyric acid* was not proven until I introduced it in the Hering Laboratory of Medical Research, located in the Hahnemann Medical College of Philadelphia in 1915, when I was director of the said laboratory. My assistant at that time took care of the male students, but did not come in contact at all with the female provers whom I had taken care of.

Later on, I took two male provers and three female provers, who were nurses at St. Luke's and Children's Medical Centre, Philadelphia. They were given a very thorough physical examination, including the heart, lungs, blood, urine, weight, etc., and all were found to be in excellent health. The provers kept their day-books very accurately. *Sac. lac.* was given to all the provers for six days to observe any peculiar reactions. There were thrills and anxieties in this new field of endeavour. The remedy was given in the 2x every two hours during the waking hours and was continued for three weeks; then the 30x was given every two hours for four weeks. Symptoms began to develop about the tenth day and, strange to say, the characteristic symptoms which I will offer were developed in at least four of the five provers.

Butyric acid affects principally the gastro-enteric tract. Few mental symptoms developed and few tissue changes were observed. The gastric symptoms began in the mouth with a profuse salivation. There was loss of appetite, or the appetite was not as large as usual. Two provers had an aversion to food and said, "I do not care to eat." They complained of severe cramps in the pit of the stomach. These were dull—they came and went—and there was a feeling as though the stomach was overloaded. Crampy

pains in the stomach were followed by palpitation of the heart—this was worse after eating. There was a sense of soreness and fullness over the region of the liver; a general sense of fullness in the upper part of the abdomen with severe palpitation and painful breathing. There were a great many eructations with bitter taste; at times they had a sour taste or rancid taste, and at times were tasteless. Many pains were developed in the abdomen below the umbilicus, apparently in the transverse colon. These pains came suddenly, lasted for a while (5 to 10 minutes) and often left just as suddenly. A tremendous amount of gas developed in the abdomen and large quantities of gas were passed through the rectum which gave temporary relief. Often the stools were preceded by much gas, and frequently the prover thought he was going to have a stool and only great volumes of gas were passed. Cramps in the abdomen awakened them at night. These cramps would cause the prover to draw his limbs up and were immediately relieved by passing gas. There were frequent and tense crampy pains in the bowels with desire for stool, but only gas passed. This was observed in all five provers. One prover developed sharp cutting pains through the abdomen—they were intermittent and would come and go during the day. Pains below the umbilicus, colicky in nature, were constant in three provers.

By way of differentiation I might digress to say, in comparing *Acetic*, *Lactic*, and *Butyric* acid, that *Butyric acid* is the most gaseous of the three acids of fermentation. It lacks the burning, gnawing, and ulcerative pains in the stomach of *Acetic acid*. It lacks the constant nausea and the hot, acrid fluid eructations from the stomach to the throat of *Lactic acid*.

The provers developed soreness and colicky pains over the region of the ileocecal valve. This was accompanied by tenderness on pressure. This proved to be a valuable symptom as will be detailed later on.

Stools varied in colour from very dark brown, formed, and offensive, to light yellow. The dark stools were expelled with an enormous amount of gas, sometimes offensive. There was always a great deal of straining and urging to stool.

The daily examination of the urine did not show any pathology except a great quantity of amorphous urates, and developed somewhat of an odour as if the provers had eaten asparagus. The female provers developed a sudden urging to void and it had to be attended to immediately. No male sex symptoms were developed.

The female provers were in normal health at the time of the proving and developed a scanty, watery and mucous leucorrhœa which, when wiped from the labia, seemed to contain many small bubbles, and it has the odour of stale brewer's yeast. This cleared up after the drug was stopped. At the time of menstruation the provers developed a sore mouth with an offensive, thick but scanty, fluid discharge from the gums. Their feet began to swell.

All five provers developed foot sweat which was so copious that they had to change their stockings daily. Two provers developed a very offensive sweat of their feet. The feet felt cold. These symptoms also stopped when the remedy was discontinued. The provers developed a severe backache at the lumbosacral junction. This was described as a constant, dull pain which went down into the hips and was worse while standing.

In the fourth week dull aching pains developed in the arms. At the end of the fourth week they all developed very wet and perspiring hands, and after one week of the profuse sweating hands they could not manicure their nails as they would easily break and split.

The provers developed a very tired aching in the lower extremities, particularly down the calves of their legs. The consensus of opinion was that this feeling was as though

they had been sick for a long time and the limbs were weak and tired. This symptom has been found highly curative.

The sleep symptoms were paradoxical. For the first week the provers slept better than usual. Then they developed restless sleep and I believe the restless sleep, after close questioning, was due to crampy gas pains in the abdomen which were always relieved by the expulsion of gas.

Very few mental symptoms developed in my provers, but I observed they had a tendency to worry and to become apprehensive. The dreams were irrelevant, but in the female provers they seemed to be very real and made a deep impression on them. They developed also a sense of worry about trifles and became somewhat impulsive.

Palpitation of the heart was observed in every prover. It came on particularly after eating a full meal and was accompanied by a sense of heaviness and fullness in the liver region.

Along about the fifth week two of the provers who had developed profuse salivation discontinued the remedy and the salivation suddenly stopped. Then the gums became sore and the breath became somewhat foetid. A little thick, black blood oozed from the gums and would lie on the teeth. The mouth had to be rinsed frequently. This has been a most valuable symptom and had been confirmed in a very serious disease.

I will now give you some confirmed clinical experiences with *Butyric acid* by myself and associates.

It has truly helped those infants who had an inability to digest the fat of normal quantities in their formula and developed the symptoms of fat dyspepsia. I have cured fat dyspepsia in young infants who had some allergy to fat and regurgitated sour, rancid milk curds, and had a great deal of gas in the bowels.

I also cured a case of brittle, dirty-looking finger nails with *Butyric acid* after the failure of *Antimony crud.*, *Graphites* and *Thuya*.

Butyric acid cured, permanently, a case of foul foot sweat which was very profuse. It was prescribed after the failure of *Silica*, *Graphites*, *Psorinum* and *Thuja*. I prescribed the *Butyric acid* when I discovered the patient had profuse sweating hands and the foot sweat was cold.

I had cured cases of flatulent dyspepsia with excessive accumulation of gas in both the stomach and intestines after the failure of *Arg. nit.*, *Asafoet.*, *Carbo veg.*, *Lycopodium*, *Magnesium mur.*, *Momordica*.

This simple basic acid has a very broad field of action in the gastro-intestinal tract which I have verified over and over again.

Another case of segmented enteritis, or ileitis, with a ruptured ulcer that was operated on in the Women's Homœopathic Hospital of Philadelphia, and had all the modern post-operative treatments and some homœopathy was finally completely benefited while under the care of Dr. Robert H. Farley by *Butyric acid* which I suggested he might try in this case as it was a very serious one and at the time hope was well-nigh abandoned.

The only dramatic cure that I have been able to observe with *Butyric acid*, and I believe I am the first to use it in this dreadful disease, was in typhoid fever. To me this has been a real find. It was a case of advanced abdominal type of typhoid fever where *Rhus tox.* and *Baptisia* had been prescribed. The patient had been ill for approximately three weeks and the case was going bad. The mouth and intestinal symptoms appeared to me to look like *Butyric acid*, which I prescribed with the result that in 48 hours the mouth symptoms had almost disappeared. The patient's temperature was absolutely normal in nine days, and the patient made a perfect and uninterrupted recovery. The second case was a very serious one with marked sordes on the teeth, the mouth was foul, abdomen distended with much gas, extreme tenderness over the ileocecal region, and the attending physician feared hæmorrhage might be coming

on. *Butyric acid* here, within 72 hours, relieved the abdominal tenderness, relieved the gas symptoms, and in less than a week cleared up the symptoms pertaining to the buccal cavity. The patient's temperature came to normal, and recovery was uneventful.

These are facts and show the possibilities of this neglected basic fatty acid. I have prescribed this remedy in the 30 \times and 1,000th potency almost exclusively. When indicated it has been a prompt acting remedy.

The provers have been thanked years ago for their grace of perseverance and personal sacrifice. Only those of us who have conducted a systematic proving can appreciate the amount of labour demanded in such work. I hope it will prove to be of some particular value to the profession and new symptoms added through experience.

Please accept my humble effort in developing another working tool in the materia medica. The profession is asked to put it to the test in suitable cases and report the results. Only in this way can we make our materia medica a practical and useful working instrument.

—Heal Thyself, February 1952

HOMŒOPATHY IN THE UNITED STATES, 1951—52

BY DR. RAYMOND E. SEIDEL, M.D.

The Pan American Homœopathic Medical Congress was fortunate this year in receiving a report about Homœopathy in practically every state and section of the country through its regional director. The Congress is divided into three International Directors; one each for U.S. and Canada; Mexico and the Antilles; and South America. The International Director has the power to appoint, with the approval of the President, as many regional directors