

## INTRODUCTION TO HOMŒOPATHY

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*(The introductory Lecture to the Educational Course delivered at the Royal London Homœopathic Hospital on October 11th, 1951).*

I appreciate the honour of being called upon to present this inaugural address to you at the beginning of your course at this Hospital.

No doubt we are all interested in Homœopathy because we have heard of its dramatic results in certain cases.

To indicate that, even in the gravest emergency, speed of action of the *correct* homœopathic remedy is not unusual, I would like to mention Dr. Borland's statement that when a patient is having his first attack of angina pectoris, and is certain he is going to die at once, is terrified and unable to keep still although any movement aggravates his distress, a dose of Aconite 10M will give almost instantaneous relief. He states that almost before a patient had swallowed the powder he was feeling better. Dr. Borland then mentions that at a subsequent attack Aconite had no effect, because the anxiety and fear were nothing like so marked because he had come through one attack before. For subsequent attacks, Cactus is suggested. The patient also has some fear and anxiety, but it is more a conviction that he has an incurable condition that will eventually kill him, than an overpowering terror of imminent death, which is the indication for Aconite.

### WHAT IS HOMŒOPATHY ?

Now we come to the question "What is Homœopathy?" Gould's Medical Dictionary defines it as "a system of treatment of disease by the use of agents that, administered in health, would produce symptoms similar to those for the relief of which they are given."

Hahnemann did not confine Homœopathy to medicines, but used pox vaccination and treated frostbite by cold and recent burns by heat.

In 1925, Professor August Bier, of Berlin, who had been using irritant therapy (that is, non-specific protein therapy) for every form of chronic inflammation, traumatic, rheumatic, gouty, gonorrhœal, tuberculous or of any other origin, discovered that while irritant therapy was homœopathic in that it could produce similar symptoms to those for the relief of which it was given, in addition he found that a small dose was advisable, and that it should not be repeated until the effect of the dose had worn off, exactly corresponding to the homœopathic tenets.

Hahnemann had shown very clearly that much smaller doses of drugs are required to bring about a reaction in diseased tissues than in normal tissues; and especially in chronic disease, the affected parts of the body react more intensely than the remainder of the body. Bier's assistant, A. Zimmer, showed that it required 250,000 times as much formic acid to produce symptoms in the healthy as it does in the gouty.

Bier went on to say that "no doubt irritant therapy, as advocated by us, is a form of Homœopathy in the original sense of Hahnemann." It is interesting to note that it was *not* Homœopathy which led to our theory of irritants, but reversely the irritants led us on to Homœopathy. We can think of homœopathic remedies as irritants, which stimulate the vital powers, particularly in the diseased organ and are selected because they are most closely related to the particular organ and disease.

According to Schultz, the great bulk of remedies do not act by neutralising, dissolving, disinfecting, etc., in a metabolic manner, but by irritating certain organs. The latter are thereby stimulated to an activity which promotes the healing process. Since symptoms of disease often are merely an expression of the healing reactions of the body, the remedy merely augments the natural healing process.

Let us now consider treatment by artificial sunlight. It also acts as an irritant, the erythema (or redness) of the skin develops after a latent period of 2—6 hours, and subsides after 18—24 hours. A very small dose must be given at first to ensure that the patient can tolerate it, and subsequent doses are repeated at intervals of two or more days depending on whether the erythema has worn off or not.

Overdosage may cause a serious general reaction, especially in the presence of active infection, for one of the immediate effects is a lowering of the white cell count, although a gradual increase in white cells is induced as a result of properly graduated treatment.

In some ways ultra violet ray therapy is similar to Homœopathy; for example: 1. It acts as an irritant. 2. It is given in small dose. 3. It is not repeated till the effect of the reaction of the previous dose has ceased. 4. Small dosage has a therapeutic effect, producing a leucocytosis. Large dosage has the opposite action, i.e. leucopenia as well as other ill-effects.

Two other immaterial agents which are used in therapy without question by the dominant school, may be considered homœopathic, in that they are used for the treatment of cancer and are known to be able to produce it. I refer to radium and deep X-ray therapy.

While referring to electro-magnetic radiation, it is of interest to note that according to the Quantum Theory, these waves give up their energy on little packets, each having the same quantity of energy and do *not* act as if the flow was continuous. It is as if the energy was supplied in tiny particles. This may lead ultimately to a theory that there are particles much smaller than an electron, in which case even our high potencies may be considered to be material.

#### SELECTION OF A HOMŒOPATHIC REMEDY

In selecting a homœopathic medicine, we pay particular attention to the patient's symptoms which differ from the

usual symptoms of the disease which is diagnosed. This does not mean that we disregard the symptoms of the disease; these also have to be taken into consideration, but the individual's peculiar reactions to the illness are more important in indicating what homœopathic remedy will be effective. For example, two patients in the one household take influenza, both having severe headache, aching in the limbs, fever, sore throat and cough. Although these symptoms may be sufficient on which to diagnose influenza during an epidemic, they are not sufficient for accurate homœopathic prescription. Now, suppose on further investigation, we find that they are both drowsy and flushed, the man states that his eyelids feel so heavy he needs match sticks to keep them open; that when he went down to answer a telephone call from his office his head felt so heavy he had to support it on his hands; and his legs were like lead when he came upstairs again. When questioned about his headache, he complained that the back of his head felt as if it might burst at any moment, till he passed a tremendous amount of water about half an hour previously, adding as an afterthought that he didn't know where all the water came from because he hadn't drunk a thing all day.

On the symptoms of heavy head, heavy eyelids, bursting headache in the occipital region, relieved by copious urination and fever without thirst, you know that Gelsemium is the remedy that will cure him quickly.

The patient's wife had become quite suddenly ill since the doctor was summoned. Now, she was dusky red in appearance and very drowsy, almost as if she had taken an overdose of some sedative. When questioned about taking drugs, she replied in the negative and promptly went to sleep. Some further information must be obtained, so she is roused again, and on being asked how she feels, makes what is apparently a most irrelevant reply, namely, that she feels as if she was scattered about the bed and couldn't get her bits together and before you have time to ask any more questions she falls soundly asleep again. Her tem-

perature is found to be 104, and her daughter volunteers that the patient has had two violent attacks of diarrhoea, which occurred without any warning.

On these symptoms of rapid onset, dull red face, drugged besotted appearance, high temperature, dropping asleep while answering, sudden violent attacks of diarrhoea, and the strange, rare and peculiar symptom, feeling scattered about the bed, and cannot get herself together. Baptisia is selected with the certainty that she will be quickly cured by its action.

Now you may ask, how on earth do we know that homœopathic remedies produce such peculiar symptoms? Because nothing of this nature is described in the ordinary pharmacopœa.

This was just the problem which occurred to Hahnemann, when he evolved the theory that a medicine was able to cure symptoms of disease, if these symptoms could be caused by the same medicine. He realised that an entirely new *Materia Medica* would have to be compiled which would contain minute details of the symptoms resulting from administration of remedies to healthy people. Hahnemann describes the great care taken in proving homœopathic medicines, which was done on "persons as healthy as possible, and under regulated external conditions as nearly as possible alike. But if during the experiment some extraordinary circumstance from without happened, which might even be supposed to be capable of altering the result—for example, a shock, vexation, a fright, an external injury of considerable severity, or any other circumstances of importance—from that time to symptom that occurred in the experiment was registered, they were all rejected, so that the observation should contain naught that had a suspicion of impurity about it.

If some little circumstance happened during the experiment, which could hardly be expected to interfere with the effects of the medicinal action, the symptoms subsequently noticed were enclosed within brackets as not certainly pure."

## MATERIA MEDICA AND PROVINGS

Knowledge regarding the symptoms produced by medicines has been obtained from accidental poisoning, industrial diseases and people with idiosyncrasies, but the bulk of homœopathic Materia Medica knowledge is based on the symptoms produced by experimenting with healthy human volunteers taking homœopathic medicines.

This work has not always been without risk, but the opinion appears to have been reached that it is not detrimental to one's health. As an instance of the risk sometimes involved. I will describe what Clarke states about Hering, who is responsible for that excellent snake poison remedy, Lachesis. In 1828, Hering was botanising and zoologising on the upper Amazon for the German Government. The local natives recounted tales of the dreaded Surukuku, which grows to over seven feet and has fangs one inch long. Hering offered a good reward for a live specimen, and at last one was brought in a bamboo box. Those who brought it immediately fled and all his native servants with them. Hering stunned the snake with a blow on its head as the box opened, then, holding its head in a forked stick, he pressed the venom out of its poison bag upon sugar of milk. The effect of handling the venom and preparing the lower attenuations resulted in him having a fever, with tossing, delirium and mania, much to his wife's dismay as she was now alone with him. Towards morning, he slept and on awakening, immediately asked her what he had done and said. She remembered only too vividly and her report was the first instalment of the provings of Lachesis. This extraction of the venom from a live snake seems unnecessary when it could easily have been extracted from a dead snake, but one of the fundamental principles in the preparation of homœopathic medicines is that they should be made from the fresh live plant or animal, as the real virtue is only present when the remedy is prepared immediately.

As well as this difference in the preparation of homœopathic remedies, the method of recording the effects of provings is also different from that of the orthodox materia medica, in that the patient's own words are used. You will appreciate that this is most helpful because you are then able accurately to compare the patient's own words with those of a prover, which would not be so if the provings were translated into technical medical language.

*(To be continued).*

## LIVING PATHOLOGY

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The introduction of a foreign substance into the living body invariably induces a reaction or response on the part of the cells and tissues of the individual, whether plant or animal.

This reaction is in almost every instance both rapid and widespread, involving not merely the port of entrance and its immediate environment but the tissues of the body as a whole.

An example of the widespread nature of cell sensitization—one form of reaction—is the effect produced by a primary tuberculous infection on cells as remote from the portal of entry of the foreign agent as those situated in the skin. The evidence of the alteration of sensitivity of these cells is the positive reaction obtained by the injection of a minute dose of tuberculous antigen intradermally.

Various exogenous agencies may gain entrance to the body: should the entrant be a hostile agent, bacterial, chemical, or other, the result will be a toxic reaction—a reaction accompanied by a greater or lesser degree of damage to tissue cells and disturbance of function.

The nature and extent of this reaction and response is of far greater import than the identity of the agent which