

## PSYCHOSOMATIC CONCEPTION OF DISEASE IN HAHNEMANN

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Every discovery is followed by an unusual stir. Conception of disease in the old school of medicine was purely somatic till recently. But with the advance of knowledge in social sciences—eugenics, sociology and psychology—mental factors and conditions of environment have been recognized to play a considerable causative, influencing or modifying part in human sickness. Co-relation of mind and body was an acknowledged phenomenon since the days of ancient sages, but has had to be discovered anew to lend a new light, a new meaning, to conceptions of health and disease in the problem animal, Man.

Great men usually perceive and think much in advance of their times. People can only appreciate tomorrow or day after tomorrow what they think or do today. It is by this singular co-incidence of facts, as in every sphere of life in the case of great men, that Hahnemann propagated his psychosomatic conception of disease as early as the second decade of the past century, but much ahead of its time. A grand feature in his case was that he could demonstrate the practicability of his theory. But this even could not prevent him from fleeing his fatherland and taking refuge in a friendly country. If Homœopathy was a theory divorced from practice, Hahnemann must have been deported and thrown overboard into the deep waters of the Atlantic.

### *FROM THE MIND*

Hahnemann came to realize that mental factors often become exciting, maintaining or real causes in somatic or corporeal diseases. The following few selected passages will convince us:

"The sometimes dangerous illness resembling acute bilious fever, that often comes on immediately after a violent vexation causing anger, with heat of face, unquenchable thirst, taste of bile, nausea, anxiety, restlessness, etc., has such great homoeopathic analogy with the symptoms of Camomile, that Camomile can not fail to remove the whole malady rapidly and specifically, . . ."—*Materia Medica Pura*,—Vol. 1, p. 398.

*Epileptic attacks that come on in young persons after some great fright, before they become very numerous, may also be cured by a few doses of Ignatia.*—*Materia Medica Pura*, Vol. 1, p. 675.

If one looks upon something nauseous and becomes inclined to vomit, did a material emetic come into his stomach which compels him to this anti-peristaltic movement?—*Organon*, 6th ed., p. 101.

Most severe disease may be produced by sufficient disturbance of the vital force through the imagination and also cured by the same means.—*Organon*, 6th ed., p. 104.

Even Psora bears the impress of the mind, leaving some scope for the metaphysician to weave his theory of Psora out of the fabrics of the mind :

The itch-malady, as it manifests itself, composes the illimitable number of chronic diseases, and with one man assumes one form, with another another, according to the bodily constitution, defects in the education, habits, employment and external circumstances, and also modified by various psychical and physical impressions.—*Chronic Diseases*, Ind. ed., p. 143.

#### FROM THE BODY

Just as disease springs from the mind and affects the body, similarly it may proceed from the physical plane and stimulate, maintain or cause a single symptom or a complex of symptoms of the mind. The somatic disease, Itch, after it leaves the surface and becomes latent, to be designated as Psora, moves in the mental sphere and produces many non-physical psychical manifestations :

Disturbances of the mind and spirits of all kinds.

Melancholia by itself, or with insanity, also at times alternating with frenzy and hours of rationality.

Anxiety several times a day.

Mania of self-destruction (Spleen?)

A weeping mood, etc.

Attacks of fear, etc.

Attacks of passion, resembling frenzy.

Disinclination to work, etc.

Excessive sensitiveness.

Quick change of moods, etc.—*Chronic Diseases*, Part 1, pp. 140-142, Ind. ed.

Hahnemann noticed that in "all other so-called corporeal diseases the condition of the disposition and mind is always altered."—*Organon*, 6th ed., sec. 210.

How often some people, most dangerous, cruel, ungrateful and malicious, and so, disgraceful and degrading to humanity, appear to be of mild and soft disposition under the compulsion of disease and themselves compel the Physician to esteem and compassionate them! Those who were patient when well often become obstinate, violent, hasty, or even intolerant and capricious, or impatient or despondent when ill; those formerly chaste and modest often become lascivious and shameless. A clear-headed person not infrequently becomes obtuse of intellect, while one ordinarily weak-minded becomes more prudent and thoughtful; and a man slow to make up his mind sometimes acquires great presence of mind and quickness of resolve, etc.—*Organon*, 6th ed., p. 248.

Nay, a revolutionary unequivocal declaration in the body of the *Organon* helps us to leave aside all inferential evidences and reach a positive proof: "Almost all the so-called mental and emotional diseases are nothing more than corporeal diseases." The argument that is given follows:

Corporeal diseases, in which the symptom of derangement of the mind and disposition peculiar to each of them is increased, whilst the corporeal symptoms decline (more or less rapidly), till it at length attains the most striking one-sidedness, almost as though it were a local disease in the invisible subtle organ of the mind or disposition—*Organon*, 6th ed., sec. 215.

After the tendency to mental derangement in physical diseases has grown further, as is usually the case, only a pure picture of mental sickness is left.

#### THE PRACTICAL APPROACH

The creative genius of Hahnemann engineered and left behind no theory or idea that could not be verified and validated in practice. The discovery of the psychosomatic character of disease, therefore, led him to devise ways and means to meet the challenge of human sickness, in conformity with its peculiar innate nature, newly discovered.

The correlated psychophysical character of disease necessitated Hahnemann's formulation of a correlative

therapy in which the complex of mental and physical symptoms of the disease would point to a similar drug, capable of similar mental and physical pathogenesis. Hence, speaking of mental diseases, he says :

They are to be cured in the same way as all other diseases, namely by a remedy, which shows, by the symptoms it causes in the body and mind of a healthy individual, a power of producing a morbid state as similar as possible to the case of disease before us, and in no other way can they be cured.—*Organon*, 6th ed., sec. 214.

Not only this, in all diseases mentals are the first ranking particulars, indicative of the patient, and without their inclusion in the anamnensis, no homœopathic cure can be achieved.

We shall, therefore, never be able to cure conformably to nature—that is to say, homœopathically— if we do not, *in every case of disease*, even in such as are acute, observe, along with the other symptoms, those relating to the changes in the state of the mind and disposition, and if we do not select, for the patient's relief, from among the medicines a disease-force, which in addition to the similarity of its other symptoms to those of the disease, is also capable of producing a similar state of the disposition and mind.—*Organon*, 6th ed., sec. 213.

Further, "the physician asks what more can be told in regard to these parts and these functions, or the state of his disposition or mind." He has to ask :

What is the state of his disposition, his humour, his memory? What kinds of food and drink are most relished? What are most repugnant to him? etc. How does he behave during sleep? Does he whine, moan, talk or cry out in his sleep, etc.? Whether he is morose, quarrelsome, hasty, lachrymose, anxious, despairing or sad, or hopeful, calm, etc. Whether in any way (he was) dull of comprehension?—*Organon*, 6th ed., pages 175-177.

The physician is to probe deeply into the life history of the patient to discover what there may be that might have caused, induced or maintained a diseased state. For a true picture of the disease, he must decide whether there is in it a history of "unfortunate love, jealousy, domestic infelicity, worry, grief on account of some family misfortune, ill-usage, balked revenge, injured pride, embarrassment of a pecuniary nature, superstitious fear, etc." (*Organon*, 6th ed., p. 179.)

Disease proceeds from the mind and vice versa. So, in the cure of mental diseases, the past history of the physical diseases is a potent factor, and must be studied with due care :

To this collection of symptoms belongs in the first place the accurate description of all the phenomena of the previous so-called corporeal disease, before it degenerated into a one-sided increase of the psychical symptom, and became a disease of the mind and disposition.—*Organon*, 6th ed., sec. 218.

On the other hand, Psora, a physical phenomenon, is at the root of many mental cases :

If, however, insanity, or mania (caused by fright, vexation, the abuse of liquours, etc.) has suddenly broken out as an acute disease in the patient's ordinary calm state, *although it almost always arises from internal Psora, like a flame bursting forth from it.*—*Organon*, 6th ed., sec. 221.

Antipsorics are, therefore, our sheet anchors, in mental cases, as in physical diseases, either at the first instance or as a complementary remedy to a previous polychrest that was indicated by its peculiar, characteristic, mental and/or physical symptoms. The procedure is the same with purely mental or emotional cases, caused by "continued anxiety, worry, vexation, wrongs and the frequent occurrence of great fear and fright" (*Organon*, 6th ed., sec. 225), as "the fundamental cause in these cases also is a Psoric miasm" (*Ibid.*, sec. 227).

A scientific observer of facts, and a great seer of events, Hahnemann could not fail to note the existence of purely emotional and mental cases that arose out of continued anxiety, worry, vexation, etc., as hinted above. Similarly, the presence of cases, caused by social phenomena and environmental stresses, e.g., "faults of education, bad practices, corrupt morals, neglect of mind, superstition or ignorance," could not miss his searching eyes. But these cases, again, lead to the destruction of "the corporeal health, often to a great degree." Even in mental and emotional cases resulting from physical diseases, a psychical behaviour towards the patient, as part of a moral remedy, is strictly enjoined :

In emotional and mental diseases resulting from corporeal maladies, . . . an appropriate psychical behaviour towards the patient on the part of those about him, and of the physician, must be scrupulously observed, by way of an auxiliary mental regimen. To furious mania we must oppose calm intrepidity and cool, firm resolution—to doleful, querulous lamentation, a mute display of commiseration in looks and gestures—to senseless chattering, a silence not wholly inattentive—to disgusting and abominable conduct and to conversation of a similar character, total inattention—*Organon*, sec. 228.

Incidentally, but curiously enough, in his prescription of the psychical remedies of purely mental and emotional cases, e.g., “a display of confidence, friendly exhortations, sensible advice, and often (by) a well-disguised deception,” he rings the note of a clever psychotherapist. What savours of the same trend is quoted below :

A warning dream, a superstitious fancy, or a solemn prediction that death would occur at a certain day or at a certain hour, has not unfrequently produced all the signs of commencing and increasing disease, of approaching death and death itself at the hour announced, which could not happen without the simultaneous production of the inward change (corresponding to the state observed externally); and hence in such cases all the morbid signs indicative of approaching death have frequently been dissipated by an identical cause, by some cunning deception or persuasion to a belief in the contrary, and health suddenly restored, which could not have happened without the removal, by means of this moral remedy, of the internal and external morbid change that threatened death.—*Organon*, 6th ed., pages 104-105.

A purely psychical remedy, irrespective of any physical approach to the problem, is advocated here, though antipsoric treatment is often a necessity to prevent any further recurrence of such cases, which are basically miasmatic (*Organon*, 6th ed., sec. 227). But Hahnemann could see a limit to such a procedure, and it was advocated exclusively in cases of purely mental or psychical cases with no reference to any physical malady whatsoever. He observed that any injudicious application of the same method in mental cases resulting from, or depending upon, a physical malady, would only aggravate the symptoms, instead of destroying them. In that case, “the melancholic would become still more dejected, querulous, inconsolable, and

reserved, the spiteful maniac would thereby become still more exasperated, and the chattering fool would become manifestly more foolish"; for, as he observed :

It would seem as though the mind, in these cases, felt with uneasiness and grief the truth of these rational representations and acted upon the body as if it wished to restore the lost harmony, but that the body, by means of its disease, reacted upon the organs of the mind and disposition and put them in still greater disorder by a fresh transference of its sufferings on to them.—*Organon*, 6th ed., p. 255.

#### PROGNOSIS AND THE PHYSICIAN'S MISSION

Prognosis also is determined in the limelight of psychosomatic correlation in disease. In all diseases, psychical or physical, mental factors like grief, vexation, etc., constitute potent elements which foretell the curability or otherwise of the case, and are often decisive in the course of action to be taken by the physician :

But if the relations of the patient can not be improved in this respect, and if he has not sufficient philosophy, religion and power over himself to bear patiently and with equanimity all the suffering and afflictions for which he is not to blame, and which it is not in his power to change; if grief and vexation continually beat in upon him, and it is out of the power of the physician to effect a lasting removal of these most active destroyers of life, he had better give up the treatment and leave the patient to his fate, . . . The continuation of the fairest edifice is foolish, when the foundation is being daily undermined, even if but gradually, by the play of the waves.—*Chronic Diseases*, Ind. ed., part 1, p. 195.

Still, the physician's duty is not only to give medical aid, but to render a clergyman's service, a neighbour's helpfulness, if he aims at "restoring the sick to health" :

As the good physician will be pleased when he can enliven and keep from ennui the mind of the patient, in order to advance a cure which is not encumbered with such obstructions, he will in such a case feel more than ever the duty incumbent upon him to do all within the power of his influence on the patient and on his relatives and surroundings, in order to relieve him of grief and vexation. This will and must be a chief end of his care and neighborly love.—*Chronic Diseases*, Ind. ed., part 1, p. 194.

Conditions of mind and disposition after the ingestion of the medicine are positive signs deciding the correctness of a selected remedy or otherwise, and are prognostic of a cure or not :

In the case of ever so slight an improvement we observe a greater degree of comfort, increased calmness and freedom of the mind, higher spirits—a kind of return of the natural state. In the case of ever so small a commencement of aggravation we have, on the contrary, the exact opposite of this.—*Organon*, 6th ed., sec. 253.

Homœopathic medicines, being psychosomatic in nature, are to be taken during rest, when the mind is in repose, and the nerves have not to undergo any strenuous efforts :

He must avoid during this hour, as indeed throughout the treatment, all disagreeable excitement, nor should he strain his mind immediately after taking the dose, in any way, either by reading or computing, by writing, or by conversations requiring meditation.—*Chronic Diseases*, Ind. ed., part 1, p. 234.

#### THEORY OF WHOLENESS

From that much of the evidence as adduced above, it may be safely concluded that Hahnemann's conception of disease was neither physical nor mental exclusively, but was an intermingling and correlation of them both. Mind-and-body existence of things in health and disease was an accomplished fact to our Master. But this is not all. A mind saturated with religious and spiritual feelings, Hahnemann, like the ancient sages, believed in the trio of existence—soul, mind and body. He believed in the existence of soul and the existence of the other world, as we find in this statement: "If perchance a higher call to eternity had called me away before the completion of the book—an event not so very improbable in my seventy-third year."

Hahnemann's conception of man was in his complete self, as manifested in soul, mind and body; his conception of the patient was in his whole self, as expressed in the vital principle and the syndrome of symptoms, mental and physical. Hahnemann never endeavoured to see the human organism in fragments, in its severed parts alienated from the whole, or in other words in diseased organs. He looked at his patient as a whole—his vital energy, mind and body considered together. The dictum: "Treat the



patient and not the disease," and the conception of the "totality of symptoms" constitute, therefore, the central ideas of Hahnemann's revolutionary medical therapy. This conceptional wholeness of man, along with the therapeutic wholeness of suffering individuals, as envisaged in Hahnemann's psychosomatic conception of disease, is a medical philosophy that has yet to be properly assessed.

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## SOME SUGGESTIONS FOR THE IMPROVEMENT OF HOMŒOPATHY

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1. So long as Homœopathy is not fully recognised by the Central Government, it is the duty of every sincere and devoted Homœopath to see that the system of medicine continues to be recognised by the people, for recognition of the people cannot but lead ultimately to the recognition by the State. There are certainly many difficulties in the way of laying a solid foundation to the teaching and practice of homœopathy in this country by a purely non-official organisation independent of the State and this is true not only of Homœopathy but of any other branch of theoretical or practical science. But the solid logical foundation on which homœopathy is based and the innumerable practical tests through which it has passed during the past century and a half leave no ground for any doubt as to its final and permanent acceptance as an efficient, if not the most efficient, system of medicine. Moreover, the growing recognition by the modern physiologists of a vital force beyond the reach of physics and chemistry, on the one hand, and the attempts at finding out an explanation of the effects of succussion and potentisation in terms of modern scientific theories, on the other,