

POSSIBILITIES OF HOMOEOPATHIC TREATMENT IN PLANT AND ANIMAL DISEASE

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Homoeopathy as a systematic law of cure was developed by Samuel Hahnemann (1755-1843), German chemist and physician, though its roots can be traced to Hippocrates and to the concept of *tadarthakari chikitsa* in the Ayurveda. Dissatisfied with the drastic and largely ineffectual medicines of his time, and aided by a providential experiment with quinine, he published in 1812 the first edition of the *Organon of Medicine*, followed in the next few decades by five more editions and by the monumental *Chronic Diseases; Their Peculiar Nature and Their Homoeopathic Cure*. In these two works Hahnemann enunciated the basic principles of Homoeopathy. He apprehended the existence within the human body of an ethereal substance similar to the soul which he termed the 'vital force'. It was this vital force and not the physical body which was initially attacked by disease. When thus attacked, the vital force attempted to transfer the disease force onto that organ of the physical body where it could do the least harm, viz., the skin. So it is that the first manifestation of that form of chronic disease which Hahnemann calls 'psora' and which comprises the vast majority of diseases known to man is an itching eruption on the skin. This condition should be treated, not by external applications of ointments as this only serves to suppress the eruption and send it inside the system where it can do more damage, but by internal remedies selected according to the principle of *similia similibus curentur*, let likes be cured by likes. Hahnemann had found through experiment and analysis that those substances, which, in a healthy body, were capable of causing a set of symptoms, were capable, if taken in minimal quantities, of eradicating those same symptoms. From this follows the third central tenet of Homoeopathy: that a substance increases in power the more it is reduced in quantity, a law similar to Einstein's theory of the atom. This concept of potentisation implies, firstly, that man exists not at one level only, that of the material, but along a scale of being, the two poles of which are the physical body and the ethereal vital force, and secondly that

1. This idea is not confined to Homoeopathy. Referring to a similar idea which obtains in biology Salisbury/Ross: *Plant Physiology*, Delhi, 1977 reprint, pp. 3-4, say: "The problem of understanding life as a functioning machine has sometimes proved so difficult that philosophers have proposed an alternative: that life functions depend upon something beyond the limits of physics, chemistry and engineering—a spirit or entelechy. This is known as the *vitalistic* theory, as contrasted to the concept of *mechanism*. Mechanism states that life can be understood on the basis of physical and chemical events. Vitalism has been completely unproductive in science. This is not to say that certain vitalistic principles may not be true—only that there is no way to study them in the laboratory."

the curative force of medicine to be effective should be reduced to the relevant level on a similar scale of existence, thus bringing about a correspondence between man and his medicine, vegetable, mineral or animal. A fourth major dictum in Homoeopathy that is relevant to the present study is that the totality of symptoms existing at the moment of taking up a case must be considered while making a diagnosis, and it is only if this totality matches the symptoms produced on a healthy person by a drug during its proving can a cure be expected.

Inherent in the homoeopathic conception of drug potentisation is the idea of similar existence patterns followed by man and nature because, as has been seen, a drug to be truly effective, has to be reduced to its essentials by a special process² and has to be administered at that 'potency' which corresponds nearest to the level at which disease exists on the scale of existence of a particular human organism. Each created object, therefore, seems to have its own 'vital force' in addition to the observable physical body. It is this idea of a unitary existence pattern in the created world which forms the basis of Hindu cosmology. As the eminent jurist and philosopher, H. V. Divatia, writes, "Nothing disintegrates or dies absolutely. It lives, moves and has its being in the *Brahman* which is a macrocosm of which each soul is a microcosm"³. Life moves in cycles of birth, death and rebirth, and this cyclic movement, central to Hindu thought, underlies the whole of creation. The parallel life-patterns of man and vegetable life form one of the central themes of the *Upanishads*: "The life of mortals, indeed, is like that of the corn which grows and ripens and is reaped, and like the grains that fall which spring again into life."⁴ Homoeopathy seems to confirm this idea in the principle which forms the foundation of the therapeutics of nosodes, viz. that a child often appears to inherit the qualities of his parents (particularly the medical) and is thus the microcosm to their macrocosm. Modern biology, especially, is fast coming to the conclusion, which confirms the philosophy of the *Upanishads* and the *Gita*, that "each atom of matter is a storehouse of energy and is a miniature solar system....."⁵

Once we accept this idea of a unitary pattern of existence it follows that plants and animals suffer from basically the same disease patterns and are responsive to essentially the same treatment as human beings⁶. This thesis is

2. This process has two aspects: 'dilution' and 'succussion'. Soluble substances are 'diluted' in rectified spirit, and insoluble substances in sugar of milk, in the ratio 1:10 or 1:100 or 1:50,000. The first is known as the 'decimal' scale, the second the 'centesimal' scale and the third the 'fifty millesimal' scale. Dilutions can continue *ad infinitum*. For example 1:10 is the first potency; one drop of the first potency in 10 drops of alcohol or spirit makes the second, and so on. 'Succussion' is the method of jerking to ensure proper dilution.

3. *The Art of Life in the Bhagavad Gita*, p. 41 (Bombay), 1970.

4. Rajagopalachari, C.: *Upanishads*, p. 2 (Bombay 1973).

5. Divatia, p. 120, of Hill/Popp/Grove: *Batany* (Delhi, 1976 reprint), p. 15, for a discussion on the cell which establishes conclusively that man, the lower animals and plants follow a similar life-pattern.

6. Rush: *Veterinary Homoeopathy*, Pelczar/Reid/Chan: *Microbiology*, p. 678 (Delhi), 1977

accepted in conventional veterinary medicine as well as in veterinary Homoeopathy, and there seems to be no reason why it should not apply in agri-horticulture as well. On the assumption that it does, some experiments and trials were conducted (appended at the end of this paper) which hold forth a certain amount of promise. Whether Homoeopathy in the long run and on a large scale can effectively cope with agri-horticultural problems is a point on which it is too early to comment, since its acceptance will depend on statistical tests conducted in strictly controlled conditions.

Homoeopathic treatment of disease falls into two broad categories, the 'individualised' treatment which forms the essence of the science, and which envisages that each patient must be treated as an individual—in other words, treatment of the patient, not of the disease; and specific treatment of specific disease conditions. The implication of the first mode of treatment is that, even given similar disease syndromes existing within similar environmental conditions, treatment of two individual patients might vary considerably. While the advantage of individualised or 'constitutional' treatment rests on the fact that it is permanent in nature, and consequently of value in production of better strains in succeeding years, the main disadvantage is that it cannot be used in what Clarke calls 'genius epidemicus' because neither the time nor the facilities exist during severe epidemic diseases for treating thousands of diseased plants as individuals. In situations, therefore, where an entire crop is threatened, as in the case of potato blight, specific treatment can be the only answer. Keeping these broad principles in mind the following approaches are suggested to the treatment of plants and animals by Homoeopathy:

(a) *Aetiological approach*: Where a disease condition, whether chronic or acute, can be related to a definite aetiological or causative factor, an indicated remedy often proves extremely effective. The term 'aetiology' should not, however, include drugs which in the course of artificial proving in homoeopathic research laboratories have produced a certain set of symptoms. The importance of aetiology in Homoeopathy cannot be overemphasised*. Potato blight develops, for instance, seemingly as a result of excessive rainfall. Here the aetiological factor is water, and the projected course of treatment should take this factor into consideration. A remedy such as *Natrum sulphuricum*, which has 'damp' among its causative factors established during its proving, might, therefore, be well indicated and effective.

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7. Clarke, J. H.: *The Prescriber* (England, 1977), p. 34: "The doctrine of *genius epidemicus* is another practical aid in prescribing. Just as one proving gives only a partial idea of a drug, so one case of an epidemic disease gives only a partial idea of the disease. It is perfectly legitimate Homoeopathy to take a number of cases and having found the drug disease which corresponds most closely to the disease in all its developments, to give that drug in a routine fashion to all cases which do not manifestly call for some other drug".
8. Sankaran, P.: (ed.) *The Importance of Aetiology in Homoeopathy* (Bombay, 1972), p. 1: "—we must make it clear that the concept of aetiology in Homoeopathy is vastly different from the concepts or connotations given to the term in other systems of medicine—every little attendant fact, incident or accident—(every little contributory or determining element)—is given its due consideration".

A second system of treatment along aetiological lines is 'Schuessler Biochemistry'⁹. The biochemic logic might equally well be applied to Homoeopathy, and remedies can be inserted into the soil as, and when required in certain quantities or potencies⁹.

(b) *Nosodological approach*: While a nosode¹⁰ is a homoeopathic medicine prepared along accepted homoeopathic principles and under accepted pharmacological laws, it has a sphere of action which is deeper than other remedies. In plant diseases there are two ways, we feel, in which a nosode can be used. Firstly, where it is known that a plant was grown from parents which were diseased and whose seeds were consequently diseased, a medicine prepared from the diseased plant can be utilised to remove the susceptibility to the same disease in successive generations grown from its seed. Scientifically and intelligently used, nosodes can be used to develop purer strains in years to come. Secondly, the diseased organs of a plant can be triturated in sugar of milk, potentised, and used to treat the plant¹¹.

(c) *Symptomatic approach*: While the symptom approach, based on the symptoms in a particular case being matched against a set of symptoms which have emerged in a remedy during its proving¹² is the classical homoeopathic approach to the treatment of disease in that it takes into cognisance both the totality of symptoms as well as the individuality of the patient, it is unsuitable except in certain cases owing to the reasons given above. There is also the added difficulty of diagnosis because the subjective symptoms will be totally lacking.

(d) *Genius epidemicus approach*: It is this method of treatment which offers perhaps the best hope of success, at least when taken in conjunction with any or all of the approaches already discussed. This involves taking the major symptoms easily observable in an epidemic, and basing the prescription essentially on these symptoms. Some of the experiments cited would seem to bear this out.

(e) *'Modalities' approach*: In the modalities or 'conditions' and timings

9. Sri N. Goswami is experimenting with Borax ϕ in boron deficiency.

10. A nosode is the medicine prepared along accepted homoeopathic pharmaceutical laws from the product of a disease organism, unlike a *sarcode* which is the product of a healthy organism. Thus *Hydrophobinum* a medicine prepared from the saliva of a rabid dog is a nosode; whereas *Lachesis*, the poison of the bushmaster snake is a sarcode.

11. The principle of urine therapy is similar. As Clarke records under Urinum: "A youth for crops of boils which nothing could remedy was recommended to drink every morning for three mornings a cupful of his own urine. He was cured on the ninth day". (*Dictionary of Practical Materia Medica*, 1975, Delhi, reprint, p. 1481, vol. III).

12. The properties of homoeopathic medicines are determined through 'provings', whereby healthy persons take crude or potentised doses of a particular remedy over a certain period, and record the results on their bodies and minds. The sum total of several such 'provings' of a drug on many persons constitute the symptom totality of the drug.

of aggravation and amelioration might possibly be found an answer to the problems of diagnosis implicit in symptomatic treatment. This, however, calls for acute observation. It might be useful where observation has already identified certain aggravation patterns, as in a disease of barley caused by the fungi *Cochliobolus sativus* and *Helminthosporium sativum*, among others. "Disease development is usually more severe in late-grown grain or in a warm soil.....Leaf infections develop under warm, moist conditions".¹³

(f) *Nosological approach*: The relevance of this approach is apparent. Pure Homoeopathy does not consider different 'diseases' such as dysentery and cancer, but only one central 'disease' of which the symptom-syndromes known as 'cancer' and 'dysentery' are only symptoms. However, 'clinical' materia medicas such as that of Clarke¹⁴ seek to bring about a marriage between the potentised remedies of Hahnemann in Homoeopathy and the specific 'diseases' in which these remedies have been found by experience to be useful. Where a plant is found to be suffering from a definite pathological 'disease' a possible mode of treatment might be to administer the remedy indicated against the particular disease in a clinical materia medica. There may be a difficulty however in plants where disease-labels seldom correspond with those in the case of human beings or animals.

(g) *Constitutional approach*: The conclusion that follows logically from the 'individualised' approach of Homoeopathy is that each individual is himself a 'type', having certain definite psychosomatic characteristics. The three basic types are the 'psoric', the 'sycotic' and the 'syphilitic', based on the three 'miasms' or sources of chronic disease according to Hahnemann. These three types are divided among several hundred homoeopathic remedies, each distinguished from the other by certain definite features. People also are categorised according to their symptoms among these medicines. Thus a person who is 'fair, fat and flabby' is known as the *Calcarea carbonica* type, these being the keynote features of that particular remedy. Other types are the 'lean, dyspeptic' *Nux vomica* people, and the 'apprehensive, dreamy' *Argentum nitricum* characters.

Apart from these standard types, other classifications have been made on the basis of character or constitution. The physician von Grauvogl, for instance, divides people into three central groups, the 'hydrogenoid', 'carbonitrogenoid' and 'oxygenoid', each of which has its own typical characteristics¹⁵. Father Muller has classified mankind broadly into 'physiological' and 'pathological' constitutions.¹⁶

Treatment by constitution might certainly ease the work of the prescriber but for an almost insuperable difficulty in the case of plants, viz. the total

13. Dickson, J.: *Diseases of Field Crops*, p. 48 (Delhi reprint).

14. Clarke, J. H.: *Dictionary of Practical Materia Medica*, 3 vols. (Delhi reprint, 1975).

15. von der Goltz: *Biochemical Practice*, pp. 10-11 (Cal: 1965 ed.).

16. Muller Augustus: *Manual of Homoeopathy*, pp. 1-3 (Kankanady 1975).

lack of subjective symptoms. Diagnosis on the basis of purely objective symptoms will be risky. A wide field of speculation is opened up if attempts are made to relate plant constitutional states with those of man and animals, as for example, whether *Calcarea carbonica* will prove effective in fleshy plants such as begonias, or whether 'licey' remedies such as *Staphisagria* will prove effective in plants amenable to attack by aphides, such as H. T. roses.

(h) '*Tautopathic*' approach: This mode of disease control is to some extent both aetiological as well as nosological. When it is known that a particular plant or group of plants has been treated with conventional chemical fungicides, germicides or pesticides, and have developed a certain sickness, the conclusion that the one is the causative agent which has resulted in the other cannot be overruled. Treatment according to homoeopathic principles will involve potensising the relevant chemical and applying it to the diseased plant. This form of treatment is particularly important in view of the wide and often indiscriminate use of chemicals which is the legacy of the 'green revolution'¹⁷.

Whichever approach or combination of approaches is ultimately adopted the emphasis must be equally on cure and prophylaxis. It is felt that preventive treatment will embrace one or more of the following points:

(a) *The nosode*: This has already been discussed above. It needs to be reiterated that nosode treatment has a potentiality which has not yet been properly explored. It is believed that if a nosode is prepared from the diseased leaves or other organs of a blighted potato its proper and timely use might eliminate the susceptibility of certain strains of potato to this terrible disease. Experience is required to determine which part of a diseased plant can best be used to prepare the nosode.

(b) *Specific treatment*: A specially selected medicine such as *Thuja occidentalis* for the fungus growth of begonias can be used not only to cure plants afflicted with such growths but also, if given in good time, to abort them entirely.

(c) '*Biochemic*' approach: Tissue salts are fed to human beings and animals both as curative for diseases and as tonics for maintenance of health. Homoeopathic medicines can be used similarly.

THERAPEUTICS: (i) Homoeopathic medicines, as already noted, are prepared along three 'scales'—decimal, centesimal, fifty-millesimal. Decimal scale remedies are denoted by 'X', centesimal by 'C' and fifty millesimal by 'O'. Thus the third decimal potency is 3X, the third centesimal 3C, the third fifty millesimal O/3. The potencies which are normally used in the decimal scale are 3X, 6X, 12X, 30X and 200X. In centesimal scale, the potencies used normally, and hence called 'active', potencies, are 3, 6, 12, 30, 200, 1000, 10,000.

17. Work in this line seems to have been started by Ramanlal Patel, of Parangot Malekal, Kodimatha, Kottayam, and recorded in *Tautopathy*.

50,000 and 100,000. An equally clearcut list of 'active' potency is not yet available in the fifty millesimal scale, and all remedies from 0/1 to 0/30 (in some cases 0/50) are used. The basic tincture from which the potencies are prepared is common to the three scales and is known as the 'mother tincture', denoted by ϕ .

(ii) Several methods of application of the remedies can be used, immersion or soaking of a diseased plant in a 1:10 ratio of ϕ in acute cases, less diluted in less acute cases; spraying onto the leaves; applying to the roots inducing absorption. The frequency of application is a matter best left to experience, but generally once a week should be sufficient.

(iii) Where potencies are used it is immaterial as to how much water is used to dilute the medicine: three or four pills in half a bucket of water should normally suffice.

(iv) While homoeopathic remedies are by and large harmless, certain preparations should be used with caution. One such is 'external mother tincture', denoted Ext., which is meant only to supplement through external application the action of the internal remedy.

(v) Soil testing prior to medication, we feel, is unnecessary, though where available, facilities for such testing may be taken advantage of. Where a homoeopathic remedy is introduced into the soil, there are two ways in which its action might be impeded or even antidoted: firstly, if there is anything in the soil inimical to it, and secondly, if there is anything in the plant itself that is inimical.

Orthodox homoeopaths, taking their cue from Hahnemann, impose a sizable list of dietetic restrictions on their patients, thus giving the impression that a homoeopathic remedy is easily antidoted. Hahnemann (aphorisms 259-62 *Organon of Medicine*, 6th edition) says:

259. Considering the minuteness of the dose necessary and proper in homoeopathic treatment, we can easily understand that during the treatment everything must be removed from the diet and regimen which can have any medicinal action, in order that the small dose may not be overwhelmed and extinguished or disturbed by any foreign medicinal irritant.

260. Hence the careful investigation into such obstacles to cure is so much the more necessary in the case of patients affected by chronic diseases as their diseases are usually aggravated by such noxious influences and other disease-causing errors in the diet and regimen, which often pass unnoticed.

261. The most appropriate regimen during the employment of medicine in chronic diseases consists in the removal of such obstacles to recovery, and in supplying where necessary the reverse: active exercise.....nutritious, unmedicinal food and drink etc.

While entering into a discussion as to whether a homoeopathic remedy is antidoted by anything an organism imbibes from its environment, or anything that is in the environment itself, it should be remembered that Hahnemann was writing during an age when people were openly sceptical about

his new therapeutics. Hahnemann therefore would have wished to avoid anything that would bring Homoeopathy into disrepute. Hence his elaborate restrictions. Further, Hahnemann himself has shown that every object has its own medical use. How then can any item of food or drink be termed 'un-medicinal'?

Experiments conducted by Sankaran¹⁸ seem to have conclusively established that dietary restrictions are unnecessary in Homoeopathy, as it is extremely difficult to antidote a homoeopathic potency. This opinion is shared by others¹⁹.

The point we are trying to establish is that dietary restrictions are not necessary in Homoeopathy, and neither are environmental controls. Patients normally cannot afford to control their environment (except, perhaps, to remove the contributing cause, viz. where a patient is aggravated by or whose complaints arise as a result of dampness, moves to a drier area), but Homoeopathy seems to be working well for all that. Keeping in mind the similar existence-patterns between man and plants, we feel that similar observations would also apply to the latter. As far as possible, however, camphor should not remain in the soil when medication is in progress.

(vi) When using potencies it should be ensured that (a) the medicine is not repeated till its 'acting period' is over, though many homoeopaths administer a 'booster dose' shortly after the first dose to supplement the action of the latter; (b) potentised remedies which are antidotal to the administered remedy should not be administered simultaneously with it; (c) the cyclic pattern which has often to be followed, viz. Sulphur, Calcarea, Lycopodium, Sulphur, is not violated²⁰.

While Thuja has been the principal remedy in our experiments²¹ there are several other medicines which can be tried out. A separate paper on these will follow.

Finally, some of the positive gains which will result from homoeopathic treatment should be indicated. First, treatment is totally safe, both for humans and for the plant itself. Secondly, there is no pollution whatsoever of the atmosphere, or of the soil and water. Thirdly, Homoeopathy, offers a means to improve flower, fruit or vegetable strains. Fourthly, treatment is

18. Sankaran, P.: *Dietetic Restrictions in Homoeopathic Practice*, p. 2 (Bombay 1975).

19. (i) Gallavardin: 'The Administration of Homoeopathic Medicines in Foods and Drinks', *Homoeopathic World*, 27, 538 (1892); (ii) Stevens Grace: "Homoeopathy—The Scientific Medical Treatment", *Homoeopathic Outlook*, 1 (1939), p. 239; (iii) Phatak, S. R.: 'Do Allopathic Medicines Disturb Homoeopathic Medicines', *Indian Journal of Homoeopathic Medicine*, April-June, 1975.

20. Charts of drug relationships, aggravation patterns etc. are available viz. Kent: *Repertory of the Homoeopathic Materia Medica*, pp. 1437-1455 (Calcutta ed., 1969).

21. Anjan K. Nath of Nonghynmai, Shillong 3, has tried Thuja in begonias, both as prophylactic and curative. He has used both the mother tincture and the 1x potency, and reports promising results.

extremely cheap yet very effective. Fifthly, application is easy. Lastly, medicines are readily available within the country.

SELECTED CASE RECORDS

(a) Dog, Bhutanese, aged 13 years. Suffering from paralysis of both fore and hind legs. Incapable of independent movement, had to be carried from place to place. Normally no pain, but immediately after wetting or a shower seemed to get worse. Appetite normal, tendency to irritability in that disliked anyone except owner coming close. *Rhus tox.* 200, two doses on successive days cured completely, and dog was running.

(b) Dog, Bhutanese, aged 7 years, suffering from acute mange. fur had totally fallen off and sores had developed on the skin. Marked improvement with Sulphur 3 and 6, fur has grown back, sores have dried up, itching ceased. One dose of Sulphur 30 has been administered to complete the cure.

(c) Two Bhutanese dogs, aged 7 and 5, were bitten by a confirmed mad dog which was subsequently killed. Kept in isolation and administered *Hydrophobinum* 30 and *Belladonna* 30, seven doses, over a week; followed by *Hydrophobinum* 200 and *Belladonna* 200, once weekly for a month; followed by *Hydrophobinum* 1M (1000) and *Belladonna* 1M. Total symptomatic relief. Blood has been sent for testing, and results are awaited.

(i) A few Tuberous begonia plants raised in pots in proper pot mixture started developing an unhealthy look. The lower leaves rotted away and the stem showed signs of rot at collar. The stem looked soggy. At this stage, the plant was treated with Thuja mother tincture. The doses used 10 drops in about 1 litre of water. Pot was watered with the above mixture once daily. No other watering was done during the treatment period. The treatment was continued for 3 days and thereafter, it was stopped for 7 days. The treatment was repeated again for 3 days after the gap period.

The plant showed signs of recovery after the initial treatment. New leaves developed normally and the soggy look of the stem was practically gone after the initial 3 days of treatment. Thereafter the plant grew normally and flowered, though the flowers were rather small for the variety. This perhaps can be attributed to the initial sog the plant got. The tuber was well developed though somewhat deformed.

(ii) There was a severe attack of black spots disease on a few rose bushes of hybrid T variety. A similar treatment as described in (i) was tried. In this case, the entire plant was sprayed with the solution besides watering with it. The treatment programme was similar to that tried in case of Begonia. No further spread of disease was noticed after the treatment. The attacked leaves did not recover but the new flashes escaped spread of the disease. This experiment will need to be repeated before efficacy of the medicine can be reported as the effect of the water condition could not be ruled out.

(iii) Few Cymbidium plants showed a heavy infestation with scale insect. The plants were treated with mother tincture of *Staphisagria* wetting the places

where insect infestation was noticed. Treatment was done in the same way and doses as in case of Begonia described in (i) above. Spread of the insect was controlled.

All the 3 above experiments can be taken as giving indicative results only before they are repeated and results studied.

Blue Vanda, Winter 79-80

Editorial comment : Drugs do not become *homoeopathic* merely because they are listed in the homoeopathic materia medica or because they are potentized as directed by Hahnemann in the *Organon of Medicine*. It is a common mistake one makes in association. Drugs become homoeopathic to the diseases only when their homoeopathicity is established on the basis of the law of similars which takes into account the totalities of expressions of both the phenomena. In the circumstances, the use of term 'homoeopathic' in the above paper sounds a misnomer.

Nevertheless, the philosophical introduction by Sri Dhruvanand Das to his paper is a beautiful example of logical integration of the concepts drawn from the various fields of knowledge and speak highly of his versatility in thinking pattern. His example should serve as an eye-opener to homoeopathic physicians of the quality of thought process demanded of them to perceive the homoeopathic practice in its totality.

The above comment is by no means intended to undermine the noble work in the research field carried out by Sri Goswami and Sri Das. Their findings will have far reaching rewards if they reach the cultivators and the veterinary physicians through the media to which they have access. THE HAHNEMANNIAN GLEANINGS caters only to a special class of physicians who treat the human beings.