

THE INTERPRETATION OF SYMPTOMS

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Born in Saxony in 1755, and spanning nearly 90 years, our great Medical Master was linguist, chemist, musician, teacher, writer, traveler, astronomer, physician, reformer. A prodigious worker, slept little. It is written of him that for 40 years his custom was to study all night, one night in four. He published 116 large works, and some 120 pamphlets. His three classical works are (1) Organon of medicine : in which he states his theses and gives us his how and what and why of prescribing. (2) Materia Medica Pura : the language of provers to describe drug effects on healthy human beings (3) Chronic Diseases : the erudite, clairvoyant concept of vital resistance to disease by stimulation of the resistance of the patient.

Today, with all the advantages of many times the volume of materia medica at our disposal, a century and a half of experience, and progressive scientific progress, all of us should be masters of therapy. And we can be masters if we follow his methods.

In paragraph 3 of the Organon : "The physician should distinctly understand the following conditions : What is curable in disease in general, and in each individual case in particular ; that is, the recognition of disease. He should clearly comprehend what is curative in drugs in general, and in each drug in particular ; that is he should possess a perfect knowledge of medicinal powers. He should be governed by distinct reasons, in order to insure recovery, by adapting what is curative in medicines to what he has recognized as undoubtedly morbid in the patient ; that is to say, he should adapt it so that the case is met by a remedy well matched with regard to its kind of action, its necessary preparation and quantity, and the proper time of its repetition. Finally, when the physician knows in each case the obstacles in the way of recovery, and how to remove them, he is prepared to act thoroughly, and to the purpose, as a true master of the art of healing."

In paragraph 6 : "The physician observes deviations from the previous healthy conditions of the patient, felt by him, and recognized upon him by his attendants, and observed upon him by his physician."

In paragraph 14 : "Within the human body there is no curable disorder, nor any curable invisible morbid change, that does not make itself known as disease to the exact observer by means of signs and symptoms, quite in accordance with the infinite goodness of divine Wisdom."

In these few paragraphs from the Organon we have the clues to being a "true master of the healing art." We must evaluate, interpret :

First : the individual's deviations from his normal, healthy condition.

Second : Is this disease curable or incurable ?

Third : What drugs have the exact effects upon normal, healthy human beings ?

Fourth : The proper administration of this remedy.

Finally : The obstacles to the individual's recovery.

The key admonition is always : Individualize !

An old English receipt for rabbit pie begins : "first catch your rabbit," Out rabbit here is the patient's symptoms, and their apprehension is sometimes a real chore. But, get from the patient his deviations from his healthy state, his feelings ; from his attendants their observations of his deviations ; finally, what you, the physician observe and elicit by every means : questioning, physical examination, evaluation of family history, stigmata of previous disease, occupation and environment—all this for the interpretation of the patient's deviation from health.

Having taken the case and interpreted his individualized symptoms, the next step is to match these symptoms with those produced in a healthy human by a remedy. All of us must admit that some aid is indicated here. Our materia medica is so bulky and we must be exact—so some form of repertory is in order before we check with the materia medica.

This, the reconnaissance stage of our battle to restore health. As Dr. Morris Golden always said to us at this point

in his clinical sessions, "Gentlemen, what are we dealing with? Is this case acute or chronic, is it curable or incurable?"

So, as an aid to match symptoms and remedy, we classify them: General, if they conform to the patient's "I am..."; Particular, if the patient spoke of "My head..., My chest..., My knee..." The Generals separated into common to the disease and characteristic of this case; these into Mentals and Physicals. Likewise, the Particulars are separated into Common and Characteristic. Now we have an orderly composite of the patient's deviations from health and consultation with a repertory will lead us to selection of the remedy. The one important key to unlock the repertory is the modalities, the interpretation of patient's reaction to his environment, his likes and dislikes.

A man is the composite of his loves and hates.

All symptoms are valuable when interpreted. Often the common ones are real gems when individualized. "Constipation before menses and diarrhoea" (Graphites or Lachesis) "Coldness in the larynx" (CISTUS can. or Brom) "Band about the head" (Carbolic Acid, Carbo veg, Gels, Sulf). These individualized particulars are valuable.

Combination symptoms are leaders: "Fever with no thirst" (Apis, Puls) "Coldness with numbness of the heels" (Sepia) Emaciation of upper parts of the body with lower parts distended" (Lyc) "Diarrhoea with overpowering sleepiness" (Nux. Mos) "Copious sweat with copious urine" (Acetic Acid), These are concomitants, but they indicate the remedy.

A common symptom in disease is intolerance of noise, but when noise causes vertigo, only Theridion is the remedy. Noise felt in a special part, as the teeth, calls for Calc. Carb.

Dreams that recur indicate special remedies, as constant dreams of the dead is Calc. Sil.; of hard labor or exertion is Rhus Tox; of fire, Hepar Sulf; of falling from a height, Digitalis, Sulf, or Thuja.

From all symptoms, then, outstanding characteristics lead to the remedy. Even such a common symptom as burning heat is important if it is intense, and leads to one of the prize burners: Ars. Alb, Carbo veg or Sulphur.

With acute cases procedure is easy, yet we proceed on Hahnemann's precepts to get the individual characteristics of this particular set of symptoms, modalities, type of discharge, reaction to weather, heat and cold, lying, motion, time of aggravation, food habits, where the cough tickles, etc., in short a case history that exactly matches a remedy with these same characteristics.

It is very disconcerting to the routinist to be confronted by cases that do not respond to his accustomed treatment. No two humans are exactly alike mentally or physically nor in reaction to identical environment. Today, tension and worry are ever present entities in all individuals, there are many reactions to them and the physician must evaluate them in his cases.

Recently, a splendid young woman came to me after going the rounds : Gyn, ENT, Internist, Neuro, et al.—with a wealth of wholly unrelated symptoms without plausible modalities. Symptoms ! She had them by the pageful ! So many and so unreasonable that I abruptly stopped the Lachesis-like volubility and asked, "Now, can you give me a picture of your environment ?" That did it ; Came the floods, with a sobbing story of her mother, a widow, living in her home and dominating the home, the children, the expenses, everything. The ensuing hour was not exactly Homœopathic but she left with a balanced outlook on her problem and a dose of Puls. Four weeks later she was back, changed and with none of her symptoms, in fact, when I read a portion of the record to her she stopped me, "Now Doctor, that is like a bad dream, let's forget it. I have no more pains, I live for my husband and children and my mother is no longer an ogre but a pathetic, frustrated person who excites my pity but not my resentment." Score one for Puls ? Interpret the symptoms.

Then there was Miss Y, headaches at irregular intervals so severe that she was bedfast for several days. Her symptoms repertoried Lachesis every time I checked them, I had repeatedly asked about injury, falls, automobile accidents always without clue until one day I talked to her mother (paragraph 6, Organon). Yes, she remembered that when Thelma was about 12 years old she fell down the cellar steps, struck her head on the concrete

floor and was unconscious for two hours. Nat Sulf took over and no more headaches for nearly a year.

An urgent call to an old patient in the country—left testicle enormously swollen, red, tender. History : went out in a sudden Spring rain to close the young turkeys in their house, became wet and chilled. Steady there ! Almost missed that one ! In the pause when I was hunting Dulc, I asked, "George, when did you have mumps ?" Oh, When you were away fussing with Hitler." "Did you have swollen testicles then ?" "Did I ! This same one was so big I thought it would burst, Old Doc K. had me soaking it in lead water and laudanum for three weeks before it went down." He got Puls IM and in four days the testicle was only slightly tender. Interpret means investigate, too.

Early one morning an emergency call on Mother B—complete collapse, could barely whisper as she held my hand before her mouth and breathed on it, "So hot when I wakened." What else but Sulphur ? The strange, rare and peculiar symptom leads to the remedy ! She was sitting in her living room reading the evening paper when I called on her 12 hours after my morning call.

Again, John M came to me with an intolerable itching of the face, "Feels like cob-webs over my face." John is pudgy and chilly, costive, indolent—a ringer for Graphites.

Mrs. B is a fleshy woman given to eczematoid rashes periodically. If she works in the garden she is sure to develop a rash within a few hours that becomes a weeping, spreading, itching, burning misery. Her usual cheerful personality reflects her skin condition, with the rash she swears, fumes, hates her family, wants to be alone but raises the roof when she is. She says that she sweats when she is not covered, that her head never sweats, that she stinks when she does sweat, that her mouth is full of sores, and that she has a lump in her throat and prevents swallowing. Sure, she is a classic for Thuja which has kept her symptom-free for over two years since her first dose. Inquiry led to the information that she had "nearly lost her arm when she was vaccinated as a six-year-old."

Mrs. B is a case that Hahnemann could have used to

exemplify his chronic disease picture : the underlying disease entity long established, the unrouted miasm that must be reckoned with before a patient can regain health.

The treatment of chronic disease states is a separate chapter in Homœopathy and one that reemphasizes the individualization of symptoms. The not uncommon return of eczema after treating a bout of asthma is a job of salesmanship for the Physician—to convince a patient that the remedy is curing his dis-health by restoring the detested rash is something that faith alone can sustain. Yet we have seen such faith and the curative effect of the remedy.

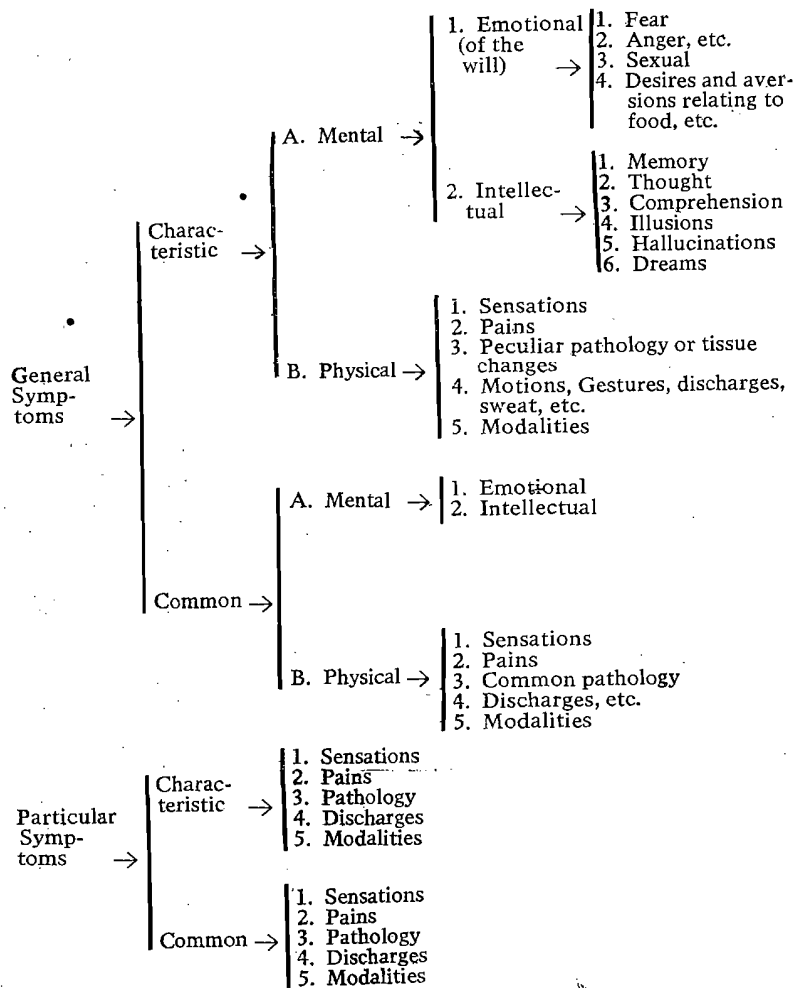
In chronic cases, carelessness and haste in prescribing are the barriers to success. But with certain symptom interpretation and drug selection to single does must be allowed to work, days, weeks, months. There are lots of incurable cases but no incurable disease. Here is where the physician must judge the incurable in general and in the individual case. This is the big field for interpretation of the individual symptoms.

You have given the remedy, carefully selected, expect :

1. Prompt recovery in acute cases.
2. No response—wrong remedy, get back on case study.
3. In chronic cases of not too long standing, where organic degeneration has not appeared—complete recovery.
4. Aggravation in chronic cases is a very good indication of correct prescribing—may last days or weeks.
5. Dramatic improvement of a case with definite pathology—bad !
6. Amelioration then aggravation—the R is right but there is enough pathology to mean slow recovery.
7. Return of old symptoms with general improvement—expect recovery.
8. Some symptoms improved, generally no better—wrong remedy.
9. Typical proving of remedy—you are dealing with Tuberculosis give nosode.
10. Favorable response followed by a new drug picture—Tuberculos.

11. Long aggravation followed by decline of patient—
—incurable.
12. Best of all responses is mild aggravation followed by
cure.

The classic of symptom classification is the following.



The direction of symptoms in a correctly diagnosed case with a correct prescription is :

1. Above downward.
2. Within—outward. Mentals improve first.
3. In the reverse order in which they occurred.
4. Return of old symptoms or backward track motion of the case—a time factor to be reckoned with here.

In every case a dietary and chemical contact investigation must be made if the remedy is to have a fair chance to cure. Coffee, tobacco, cosmetics, tooth-paste, mouth-washes are absolute barriers to any remedial agent (Paragraph 3, Organon). Likewise, all medication other than the remedy must be stopped : the camphor and lard in Johnnies croup, the horse liniment for Pop's rheumatism.

Again, every symptom must be interpreted and individualized—record Location, Sensation, Modality, classify as General, Particular, inquire into Mind, the systems of the body, the Sexual and Genital, especially in women.

We have reviewed the application of the Law : no half-adherence, no half Homœopathy. "Unless the physician imitates my method, he cannot expect to solve the highest problem of medical science, that of curing those important chronic diseases which have remained uncured up to the time when I discovered their true character and proper treatment."

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