

SIMILITUDE AND EPILEPSY

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TREATMENT AND RESULTS

Within the field of neural psychiatric pathology the epileptic suffers a disease in which the treatment permits a clinical and electronecephalographic (EEG) control which is objective and exact: the convulsions are produced or not. The EEG record becomes normal and permanent with its changes.

For this reason this disease was selected in order to see whether homœopathic therapeutics had any demonstrable action. At the outset we began this work not without certain doubts, since our experience with epileptics was not very broad and we had happened to attend patients who rebelled against all treatment.

On the invitation of Professor Escardo to carry on this experiment we began, Dr. Paschero and I, to treat children who already were sent to us.

The last congress of medical ethics went on record as paying official respect to Homœopathy, making it clear that: "Homœopathy is a system of cure with a coherent doctrinal basis and with important centres of practice in many parts of the world", and concluded that "hospital resources should initiate with the maximum scientific precision and free of all prejudice *critical studies* on the value of the homœopathic remedies and permit the collaboration of homœopaths of recognized integrity".

We have treated 39 epileptic children who when sent to us had already been studied from the clinical, EEG, humoral, and psychosocial point of view.

To the clinical history of the patient we added that of the homœopathic symptomatology, seeking to integrate the picture not only bearing in mind the type of convulsions, their timing, and related factors, but also looking for the perfect *similimum* which is the only medication that will cure the patient and transform the diseased state.

We commenced the treatment by seeking with strict homœopathic technic the *similimum* by repertorization or consultation among ourselves for the selection and classification of the symptoms. We have administered *a single remedy at a time* in differing medicated forms: powders, doses in globules or liquid to be taken in a single day.

We administered a placebo in the intervals between doses. To avoid any factor of suggestion in the patient and especially in his family, we administered the remedy without labeling it and without their knowing that we were using homœopathic remedies. For this we depended upon a traveling medicine case in the same room where the consultation was held.

The results obtained in the treatment of 39 epileptic children we can group as follows:

I. 10 children with convulsive syndrome and equivalents with abnormal EEG who with homœopathic treatment were cured clinically and electroencephalographically;

II. 9 cases in which there was clinical improvement, practically without convulsions, but in which the irregularities of the electroencephalogram persisted;

III. 8 patients with clinical improvement also without convulsions, but with whom we have not been able to repeat the electroencephalogram;

IV. 11 patients of mixed convulsive syndromes, uremia, traumatism, mongolianism, that we have been unable to follow up for various reasons;

V. 1 patient whom we consider our only failure, in whom the convulsions continued in spite of treatment and of the different remedies administered, but in whom we hope to be able to control the convulsions. The mother is continuing the treatment with enthusiasm, since, although the convulsions have not disappeared, the conduct has improved.

We have observed that homœopathic medication does not bring about the second disturbances which the classical anticonvulsives produce. The barbiturates, etc make the patient more aggressive, of more ungovernable conduct, and increase the problems of conduct, while the homœopathic medication favours the solution of these problems, spontaneously and without specific psychotherapy. The patients become more docile and less aggressive.

We call attention to the necessity, once a homœopathic treatment begins, of *not suppressing suddenly all the anticonvulsion medication*, but of giving the homœopathic medication *gradually* in low and more frequent doses while reducing the sedatives until they are eliminated. Not proceeding as we indicate is the reason that many epileptics give up the homœopathic treatment which could give them such beneficial results.

Of the children we have treated several were refractory to the classical convulsion medicines. With our treatment not only did the convulsions disappear, but their changes of the EEG became normal.

Allopathic therapeutics tells us that there is no treatment for epilepsy, but of each epileptic, that the treatment should be individualized. The individualization which they claim consists only in administering a drug to each patient, or most frequently, a combination of them, with the final result of suppression of the convulsions, which is not always attained, or with the consequences of their toxic effects.

Does the prescription of the proper remedy in solving the treatment of the epileptic child suffice for us homœopaths? We think not. Here more than ever arises the necessity of psychosomatic hygiene for the young patient and family. One must inculcate the idea that epilepsy is a perfectly controllable disease, that the crises take place one at a time and the best thing is to do

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17. Weddell G. F. and Pattle R. E.: The electrical activity of voluntary muscles in man under normal and pathological conditions.
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nothing at that moment; only protect him from biting his tongue. One must avoid excessive protectiveness which becomes an obsession and makes the epileptic into an invalid.

One must treat him as far as possible like a normal child, watch over him in sports or in dangerous places without his realizing that he is being watched. One must give him the feeling of responsibility like other children. Terror at the crises is the cause of an atmosphere charged with anxiety and the over-protectiveness so prejudicial to the small epileptic. One must not forget the psychogenic causes which arise from many crises. One must always make a constructive psychotherapy dependent upon the atmosphere in which the child evolves and develops.

Somatic hygiene implies the correction of dietary errors, norms of life, study (not to overload him as is done at present) school, English, dancing, music, without sufficient time for the minimum physical requirements of exercise, sleep, sociability and recreation. Only in this way shall we have favored cure and not failure when the homœopathic remedy is the proper *similimum*.

—The Layman Speaks, Oct., '60
