

SOME ASTHMA CASES

DR. F. K. BELLOKOSSY, M.D., COLORADO

Case I—W.D.L., now four years old, became the unlucky target of the luxuries of our civilization and of the miracles of the present medical progress immediately after conception. Instead of comfort and happiness they brought him only pangs and agonies as soon as he was born. A good measure of his troubles he inherited from his father who is a chain smoker, alcoholic and schizophrenic. The mother, devoted and conscientious, sought the services of an expert as soon as she found herself expectant. Her selection was wrong, however. She consulted a pseudo expert who advised her to take thyroid extract regularly every day of her pregnancy, a complete absence of any thyroid deficiency notwithstanding. The effects did not tarry. A generalized dermatitis appeared in the child at three months of age, a hypertrophic rhinitis and mucous colitis at six months, and bronchial asthma at nine months. She did not take this drug during another pregnancy and the other child is not suffering from any similar troubles.

Since in all toxic states the brain suffers first and most, we don't wonder that our patient gradually developed a great number of mental symptoms. Every new crop of physical symptoms had been preceded by an increase in the number and intensity of the mental. He became impatient, excited, irritable, rebellious, defiant, selfish, contradictory, bossy, wilful, shouting "I want my way," capricious, fearful, afraid especially of dogs, street sweepers and high places, disobedient, fussy and grouchy at awakening, angry at trifles, averse to being touched, sensitive to high pitched noises, and extremely restless.

There were some queer discrepancies in his physical symptoms. He felt better in the blazing hot sun and dry summer of New Mexico, but everything that touched his skin had to be cool. Bed, pillows and seats had to be cool, bath lukewarm and wool was unbearable. He had to be rubbed with cool hands only. He could not stand warm indoor air, but he liked

warm outdoor air, cool room air was beneficial but cool night air made him itch more. Dampness and winter and fall aggravated him, during and several hours before storms his dyspnoea was worse. It was especially queer that fall sun aggravated while summer sun relieved. In the daytime his clothes had to fit his body tightly, but he was afraid to be touched by anybody and he uncovered at night. Though he shouted all the time "don't touch me, don't touch me," he scratched himself so hard that he rubbed off his fingernails and produced ulcers in his skin. Where clothes prevented his scratching, he dug through them with such a rage that he made holes in his jeans. This was an indication that the seat of the itching sensation was not only in the skin but deep in the subcutaneous connective tissues. His toenails grew slowly and were turned under like chicken claws, his stools were large, his skin dry, scaly, myxoedematous, and in many places covered with weeping eczematous patches. The feeding, so important in such cases, was very difficult because, besides his allergies to many pollens, fungi and house dust, he was allergic to almost all foods. To goat's milk, which agreed at first, he also gradually became allergic.

The allopathic treatment having given no result, he was taken to our friend and member of this society, Dr. Beach of Albuquerque, New Mexico, who treated him for three years choosing his remedies with the assistance of the flocculation-colloid method of Dr. Garth Boericke. His treatment wrought good results but relapses followed all the time. The family then moved to Denver, so Dr. Beach referred the patient to me with the remark that he was the toughest case he ever saw.

In February 1957 when I first saw him, he was in status asthmaticus with one degree of fever and a general dermatitis. The search for the similimum was difficult, so *Sulphur* cc was administered as the closest remedy and most apt to antidote the thyroid intoxication of his foetal life. The ensuing help from it was only partial. Three weeks later *Bacillinum* cc had to be given. Later *Ammonium muriaticum* cc, *Arsenicum album* cc, *Veratrum album* cc were given because every remedy would work only two to three weeks. His asthma was com-

pletely relieved, but his dermatitis and his mental condition fluctuated up and down and showed no permanent improvement.

In February this year he developed a virus cold and his temperature rose 106.5°. Under *Belladonna* cc, *Rhus toxicodendron* cc and *Tuberculinum* (Heath), 1M, given two hourly and for two days each, brought no relief and his temperature would not abate. Asthma returned, skin became worse and he was getting weaker and emaciated. I realized that I would lose him if I could not find the proper remedy quickly. On the supposition that he was still sensitized to thyroidin, I gave him *Thyroid 500*, every two hours one day and *Thyroid* 1M every two hours the second day. This brought his temperature down to normal the third day and saved his life. Four days later his cough was still racking his tiny body, his stool was still foul and bloody and watery, so one dose of *Mercurius iodatus flavus* 1M was administered with good results. A week later the tendency to fever returned, red maculae and papulae developed on his face, wrists and ankles, itched violently, and dry cough tortured him again, so *Sulphur* 1M was administered which worked well a dozen days. Then the weight of clothes started to aggravate him and fever returned again, so now *Opium* cc was prescribed. This had a very good effect. Fever and asthma disappeared completely and the dermatitis was reduced to his hands and feet, but now swollen lymph glands appeared on the sides of his neck and in both fossae ovales on the upper thighs for which *Lycopodium* cc was given. After three weeks of this remedy the glands were smaller but his restlessness became so excessive that *Arsenicum album* 1M was given. A week later his restlessness was even worse. Like a maniac he ran around the room without resting a second. For this *Tarentula* cc was given which gave a short lasting peace two days later.

After another two weeks he again started to wheeze, became pale and weak and now, considering the spongy appearance of his denuded skin and the fact that the blazing hot sun agreed with him, *Silicea* cc was given. This proved to be his best remedy. His complexion improved in two days, his bronchi cleared up completely, itching diminished, eruption dried up,

he became much quieter and joyous and started to grow and to gain weight again.

Case 2—B.H., a 49-year-old rancher, 6 ft. 8 in. tall and weighing 380 lbs., had suffered from hayfever and asthma ever since his second year. Between his 14th and 23rd years he was somewhat relieved, but then suffered an attack of pneumonia and mumps and was once hit by lightning all of which made his condition progress steadily. When he first consulted me, he was crushed by despair, thinking of suicide and believing that he was beyond recovery since he had not received any help from the many treatments in the past.

He was fat, flabby, pale and perspiring day and night and better in warm sunny weather. *Calcareo carbonica* cc. was prescribed and in two months he was able to work on his ranch again and has worked ever since. From time to time his wheezing returned and intercurrent remedies had to be prescribed. In February of this year he took a vacation and spent two months in Arizona where he danced and enjoyed himself like any other healthy man. After his return he complained of obstruction of his nose and loss of smell and now *Calcareo carbonica* was repeated in the 500th potency. Polyps which had been found in his nose disappeared and he reported that he smelled now too much and that his asthma was completely cured.

This patient was allergic to most of the pollens, house dust, and animal danders which created problems because his work was mostly around cattle and horses as well as grass and hay. He was also allergic to almost all foods, except beef and mutton and one or two vegetables and cereals, which created more problems because he was a glutton. He could not avoid many of these allergens but the treatment which was directed against his allergic diathesis succeeded nevertheless.

Case 3—S.H.C., a boy of six years, with bronchial asthma of five years' standing, with bilateral kryptorchismus, enlarged lymph glands on neck and in groin, dwarfism and bedwetting. Had been heavily drugged for five years without result.

He is wide awake in the evening and agitated at bedtime, sleepy in the morning, worse after a nap, gasping for breath

and coughing when waking up. Worse in summer than winter, worse from draft and cold air, better indoors and on the ocean. Cannot tolerate suspenders, is talkative and clairvoyant, sulky and obstinate but has an excellent memory and a very good disposition. The first remedy given was *Lachesis* cc. The bedwetting and asthma were stopped in a week, but returned. Then *Phosphorus* cc was prescribed which cured permanently. He is still under treatment for kryptorchismus and dwarfism.

These three cases, among so many others, prove that Homœopathy can cure people with asthma even after they have been heavily drugged by allopathy. Dietetic measures, if properly applied, and avoidance of allergens accelerate the recovery but do not effect it by themselves.

DISCUSSION

DR. ALLAN D. SUTHERLAND [Brattleboro, Vermont]: Mr. President, about the only discussion I can make is to sympathize with Dr. Bellokossy's difficulties in that first case especially, and to say that I am glad it came to him and not to me!

DR. ROGER A. SCHMIDT [San Francisco, California]: I apologize for talking all the time, but when he described the first case, the possibility of *Graphites* occurred to me as he unfolded the picture, especially considering the alternation of skin manifestation and asthma. I think *Graphites* is a good remedy.

DR. BELLOKOSSY: *Graphites* wouldn't stand the summer heat of New Mexico.

DR. SCHMIDT: Sometimes you cannot have all the modalities of a remedy. Although we are taught so, and justly so (I would say in the great majority of the cases that you have to have some of the modalities corresponding to your remedy), I have found, at least several times, that a remedy like *Psorinum*, which is so terribly chilly, is necessary in the course of treatment of those deep allergies, in spite of the fact that the patient might be very warm-blooded; and so on for other remedies when they are indicated.

DR. WILBUR K. BOND [Greensfork, Indiana]: I have seen *Silicea* operating in warm-blooded individuals too. *Silicea* cured a very stubborn case of asthma which was reported by Dr. Rust.

DR. SCHMIDT: Hot flashes at night have been cured by *Silicea* too.

DR. SUTHERLAND: It is well known that many remedies have opposite effects. One can be known as a "hot" remedy but also as a "cold" remedy. So it is with *Sulphur*, when damp, cold weather is not well tolerated by the patient.

DR. ELIZABETH HUBBARD [New York City, New York]: I would be interested to hear from other doctors as to whether they have had any experience with thyroid apparently producing asthma. Of course, we all know that gross iodine will often give skin rashes in sensitive people, but in New York, among the usual brethren, they are likely to give a pregnant woman a bit of thyroid, even though the metabolic rate doesn't justify it. In those cases I have never seen them suffer from either eruption or asthma. I was just wondering whether Dr. Bellokossy is justified in feeling this case was seriously contributed to by the repeated dosage of thyroid. I would like to ask whether she had any of the thyroid over-dosage symptoms, such as the sweating and the tachycardia and so on.

The remedy that I thought of as he began telling about the case was *Dulcamara*, which is a "honey" for alternation of eczema and asthma with that dreadful restlessness. Curiously enough, although it is aggravated in the fall, it does well in the hot sun, which was a peculiarity of this case.

DR. SUTHERLAND: Mr. President, I have had one case who was an asthmatic woman past middle life. In this instance, the asthmatic manifestations were due to a substernal thyroid making some pressure on the trachea. This was demonstrated by x-ray. I don't know what happened to her eventually. I believe she was operated upon. Whether this helped the condition I can't say because she drifted away from my care. I couldn't cure her asthma because there was a mechanical element there.

DR. BELLOKOSSY: I want to thank Dr. Hubbard for the suggestion of *Dulcamara*. I never thought of it. I am sure I should have given it. It looks to me as though I may need it in the future.

As for *Silicea*, this is cold-blooded in chronic cases, but if a case of *Silicea* is acute or sub-acute, then it is usually hot-blooded, warm-blooded. Kent talks about the case in his *Materia Medica*. I think he was warm-blooded himself; when he had a sore throat and laryngitis and a cough and he couldn't get well, *Silicea* cured him as quickly as he contracted this cold, because he was an acute case and he was not cold-blooded; he was warm-blooded then.

Now, this case was cold-blooded insofar as the general condition was concerned, but the skin condition was too warm, too hot; therefore, he wanted coolness on the skin, and the general condition he wanted to keep warm.

Graphites has mental symptoms that would not have been indicated in this case, because he was a very bright, intelligent, quick-thinking boy. *Graphites* is slow-thinking. *Graphites* likes medium temperatures, not too hot and also not too cold. It is sensitive to both heat and cold.

DR. HUBBARD: Before we pass on, Mr. Chairman, could I just mention that that remark about *Silicea* being both warm-blooded and

chilly under different circumstances is a very provocative one. I find that often the case.

When I am wondering whether *Silicea* may be my remedy, instead of considering the general warm-bloodedness or chilliness of the patient, I try to find out how much bed cover they want and whether they like their food hot or cold, and those two things will bring you nearer to *Silicea* than the general warm-bloodedness or chilliness. The *Silicea* patients want the soup and coffee to cool. They want to be loaded with cover in bed at night. They will go out on quite an icy day with relatively little on.

—*The Homœopathic Recorder, Oct.-Dec. '58*

A CASE OF TUBERCULOUS NEURO-TOXEMIA

(*Contd. from Page 319*)

for some passing acute condition. The patient is now enjoying better average health than ever.

LABORATORY AND X-RAY EXAMINATIONS have always been essentially negative, some pulmonary fibrosis with small calcified areas. Blood counts and blood sugar readings all within normal limits. Sputum negative. No malarial parasites discovered.

The central nervous system has consistently been the point of attack in this case. The tuberculous dyscrasia has undoubtedly been the chief etiologic factor. The most correct diagnosis would therefore appear to be that of tuberculous neurotoxemia.

—*The Homœopathic Recorder, Oct.-Dec. '58*