

No wonder that the world is slow to accept Homœopathy when people have so convincing proof of its much usefulness and superiority as shown by Hahnemann and his faithful followers. The remodelling of Homœopathy in free India would have taken a different shape in the hands of the pioneers, if they were now living.

G. Dirghangi.

### EMOTIONAL CONFLICTS AND THE PROBLEM THEY PRESENT TO THE PHYSICIAN

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Emotional conflict is a major cause of disease. Everyone suffers in some degree from such conflict. The more an individual lives in his emotions, the more strife will he encounter both from without and from within. Conflict produces tension, stress, strain of both body and mind. If intense and long continued, physiologic equilibrium cannot be maintained and dysfunction will begin in the weaker structures of the organism. If uncorrected, organic disease will ultimately result.

It is impossible to live without conflict. Even a passive, vegetative existence implies effort, for life cannot manifest without struggle. However, it is not so much the resistance from without that is detrimental, it is the turmoil within.

Inner conflict signifies the presence of antagonistic drives, motives and desires. There may be one or many such battles raging more or less simultaneously. Like subterranean fires they smoulder within the depths of the mind, sometimes erupting in violence when the internal pressures become extreme. Indecision, vacillation and a divided mind have a depleting and disintegrating effect upon the constitution, whereas earnestness of purpose and concentration of effort are constructive and health building.

Many people are torn between what they want to do and what duty or necessity compels. Some, finding it impossible to travel in contrary directions at the same time, throw scruples to the wind and neglect duty in the pursuit of pleasures which in the end elude them.

Much stress and conflict may be avoided by cultivating the reflective faculty, thinking first and then acting. Many act first and think afterward, if at all.

It is often impossible to prevent the occurrence of an event within one's circle of environment, but what may be controlled is one's reaction to the event once it has occurred. However, the reaction of an individual may be determined by patterns so firmly established as to amount almost to compulsion, habit having made the mind its prisoner.

The homœopathic *Materia Medica* and the Repertories placed great emphasis upon mental and emotional states and their correlation with bodily function and disease many decades before the word *psychosomatic* began to be quarried out of the dictionary on a mass production basis.

In taking case histories it is important to discover anything of possible significance that may have happened prior to the onset of the first symptoms. Inquire regarding any emotional shock or upheaval that may have turned the constitution in a wrong direction. When a patient says, "I have never been well since—", his entire case may be wrapped up in what immediately follows, be it mental or physical. Of course the patient may be wrong in his opinion as to what originally caused his trouble. That is a matter for the physician to determine. If an event important to the patient and directly affecting him occurred prior to, and especially just before, the appearance of the first symptoms it may easily have been the initial cause of the ensuing disorder; if after, it has only added insult to injury and should be listed as contributory.

Since most people live in their emotions, this aspect of the case is important not only from the standpoint of

etiology but for therapeutic purposes as well. Effort should be made to cover all the mental and emotional symptoms. This may require information which some member of the family can supply in addition to that given by the patient.

Much depends upon the type of emotional complex present. The following are of frequent pathologic significance:

*Anxiety.* This in varying degree affects practically everyone, even the person who "never worries about a thing." Fright is often the cause of both acute and chronic illness and is included under this heading as it is anxiety or fear experienced in its most extreme form. Fright produces a shock reaction and may even disturb the function of the endocrine glands.

There are over forty remedies in the *Materia Medica* which are frequently indicated in patients who have never been well since a severe fright. There are many more which are occasionally indicated. *Aconite, Arsenicum, Lycopodium, Opium, Phosphorus* and *Phosphoric Acid* are especially related to complaints resulting from fright.

*Thuja* is seldom required following the shock of a severe fright, yet it proved to be the remedy in the case of a girl whose menses were suppressed for two years following a very narrow escape from a sex maniac. With the suppression of the menstrual function a growth of coarse hair appeared on the face. The periods returned in a little over two months after the remedy and gradually the coarse hair was replaced by that of a finer texture. Improvement in health and mental attitude began within a few days following the prescription.

Many suffer or at least appear to suffer from "free floating anxiety." As soon as one problem is solved they find something else to worry about. Negative, introverted individuals often show this tendency. Unless corrected it may become a fixed habit of mind.

There are two hundred remedies listed in the repertoires under the rubric ANXIETY. Even this by no means

covers the drugs which have expressed the symptom pathogenetically or removed it clinically. This further emphasizes the state of anxiety and fear in which humanity exists, for drugs only unfold that which is already present or latent within the constitution.

*Frustration.* It is impossible to live without experiencing frustration. While often detrimental in its effect upon the individual, it is nevertheless beneficent in the totality of its action. Without it the world would have gone out of business long ago. There are many kinds of frustration. Even grief comes under this classification for it means the loss or denial of what should have been years of continuing happiness.

A young man was obliged to give up his medical course at the end of his second year. For a number of years he was able to secure anatomical specimens through a friend at the medical school and spent long hours studying anatomy in the basement of his home. This was a compensatory reaction which probably saved him from serious illness or mental aberration. Fortunately this man's wife allowed, or at least did not prevent, the expression of the deep inner urge. Had it been suppressed, a serious tragedy might have occurred.

Many cases of illness are caused by grief and the rubrics GRIEF and AILMENTS FROM GRIEF should be consulted much more frequently than they are. Grief is not limited to the death of a loved one. In the case cited above it was the death of a life's ambition.

*Resentment.* This emotion produces more tension and generates worse toxins than any of the others. A deep, longstanding resentment is the underlying cause of many a case of gastric ulcer and such ulcers often undergo malignant change.

There are many kinds of sickness caused by emotional disturbance. Much depends upon the chemical structure of the poisons generated and the direction of susceptibility in the individual constitution. Ulcer is merely one of the

many serious consequences of profound resentment. If for no reason other than "enlightened self interest" envy, hatred and resentment should be forever banished from the mind and heart.

In Kent's Repertory we find the rubric ENVY and scarcely more than a dozen remedies listed. JEALOUSY which is very similar to but not always identical with envy includes almost a score of drugs. There are about the same number under HATRED but here we are referred to MALICIOUS which covers more than sixty remedies and to MISANTHROPY under which about thirty medicines are listed.

Care is needed in using all parts of the Repertory but confusion of terms is especially marked in the mental and emotional fields. Envy, jealousy, hatred, maliciousness and misanthropy all express the same underlying emotion of resentment.

Frustration is conspicuous by its absence in the Repertory but the rubrics GRIEF, AILMENTS FROM GRIEF, DESPAIR, DISCONTENTED and DISCOURAGED may be consulted as indicated by the symptoms. Sometimes frustration may turn the mind toward INDIFFERENCE, INDOLENCE, SADNESS, MORTIFICATION or even PROSTRATION OF MIND.

Extreme frustration may drive the negative, introverted person farther within himself in the direction of schizophrenia, whereas the active, extroverted type may react with resentment and this may turn such a one in the direction of manic-depressive insanity.

In prescribing for patients in whom the emotional factor is an important one the following program will generally prove effective:

1. Clear the field by discontinuing all medication.
2. Unburden digestive tract and rid the system of food toxemia.
3. Correct diet and see that it is adequate and well balanced.

4. Prescribe the remedy *after* removing obstacles to recovery.

5. Try to secure the patient's earnest, lasting cooperation.

In some cases the patient will need sound psychiatric advice. This he will probably receive in better spirit after the remedy has been prescribed and is acting curatively as he will then be in a more cooperative frame of mind and will have gained confidence in his doctor.

If there is no improvement mentally and emotionally following the remedy either the prescription was incorrect or considerable pathology is present. If the latter, one or more of the nosodes or a deep antipsoric may be required to arouse the vital force.

Recurrence is the word in many chronic conditions, especially in mental and nervous disorders. Progress toward recovery appears to stall before the goal of cure is reached. In some cases one or more of the underlying causes of the trouble may have remained undiscovered or uncorrected and is still feeding the diseased state. Again, some of the obstacles to recovery may not have been successfully and permanently removed and this may include more or less concealed emotional factors or environmental circumstances beyond the patient's ability to modify.

Homœopathic treatment of emotional conflicts and complexes is far superior to any other therapeutic approach. It lacks two important essentials to popularise it—a sufficient number of well qualified homœopathic physicians and the all persuasive power of modern advertizing. Unfortunately many of the real Hahnemannian practitioners are content to jog along on the basis of an occasional brilliant prescription which helps to offset the seventy or seventy-five percent errors made in daily practice. What does the average practitioner really know about diet and nutrition? Almost nothing. What progress is he making in the study of modern psychiatry and psychosomatic medicine? Per-

haps he is awaiting the opportunity to take a special "refresher" course in the subject at some uncertain time in the future.

There is nothing but himself to prevent any physician from keeping up with the times and as for clinical material every patient is in some degree both a psychotic and a somatic problem.

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## SMALLPOX VACCINATION

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This subject has been chosen for several reasons. The practising Homœopath is brought face to face with the question, innumerable times, from families that have been led to believe by the Health Authorities, that there is only one means, one dependable method of prevention of smallpox, and one alone. The public is oftentimes so misinformed through official statements and even campaigns, with the result that fear, and not reason too often influences decisions. It is, therefore, healthful and good that Doctors of Medicine, irrespective of school, periodically take stock of both methods and means of practice.

Our literature, from the Organon to the present day, offers undisputed evidence that the homœopathic school advocates and practices prevention sincerely. We do not believe, however, that campaigns of fear have any place in the intelligent, scientific practice of medicine whether preventive, palliative or curative. We accept from the enlightened and scientific knowledge and discovery, all that is best in medicine to date. We correlate it and study it and try to apply it in the framework of our knowledge of homœopathic philosophy and good practice.