

homœopathy and their theoretical significance for its future. These two are entirely different and independent investigations and were initiated in this Country by respectively, the late Dr. Bach of London and Dr. William Boyd of Glasgow.

—*Health through Homœopathy, May, 1949.*

## PROSTATE TROUBLES

S. PHILIP CLEMENTS

Hypertrophy or enlargement of the prostate gland is a condition that is very common. It is surprising the large number of men who are around 60 years of age or over, who experience these symptoms, yet nothing can be done by the orthodox medical practitioner to cure the condition, and he can offer no treatment apart from the surgical removal of the gland. This gland, which in good health is about the size of a chestnut, is situated at the outlet of the bladder. Indeed the neck of the bladder and the first part of the urethra or outlet of the bladder passes through the gland. It is very plain therefore that the main symptoms will be associated with micturition, that is the passing of water.

The actual cause of the condition is unknown and it has been described as an inflammatory condition, process of degeneration, and an adenoma.

There is one fact which is peculiarly interesting and that is that whilst it is extremely common in Europe and North America the condition is almost unknown among the Mongolian and Negro races.

It is a very difficult matter to decide just when the disease commences. The symptoms are so very slight as to be almost unnoticeable in the early stages, but sooner or later the patient notices an increasing difficulty and fre-

quency in micturition. It is said that the symptoms are rarely noticed in a patient of under 54 years of age, although it is almost certain that the actual enlargement would start earlier than this, and that the symptoms become more noticeable as the bladder fails to compensate for the prostate enlargement. The frequency of micturition is usually more prominent at night, and very often at the earlier stages the patient will report slight hesitancy or delay in the starting, but as the condition becomes more advanced and the prostate becomes more enlarged, the stream is actually reduced in force until at the later stages it may consist of a mere dribble. In some cases the original symptoms may be the sudden and compelling desire to pass water with a forceable contraction of the bladder which makes it necessary for the patient to make every endeavour to relieve the pressure in order to avoid an "accident".

Usually it has been found that straining hinders rather than assists the attempt to pass water since it tends to contract the neck of the bladder and so aggravate the obstruction. Pain is rarely felt in the earlier stages and is usually only associated with retention, but there is often a feeling of fullness or weight in the region of the bladder, and occasionally a certain amount of dull aching at the base of the spine, or a sensation as if sitting on a ball.

Whatever is the actual cause, there is no doubt that our mode of living to-day plays a great part in the development of this condition, and wherever possible the patient should make every endeavour to adopt as natural a diet as possible. Flesh and fish of all types should be avoided and also condiments, sauces, spices and highly-flavoured seasonings of all kinds. The maximum of fresh green salads, fruits and vegetables should be taken, and these where possible should be grown under the rational method used by those producers who practise Organic Husbandry. Much relief will be found from the drinking of parsley tea, which is undoubtedly of great assistance in most cases of prostate troubles.

It should be understood that this condition represents only an alteration in part, and the treatment should be designed to satisfy the needs of the patient as a whole. Every endeavour therefore must be made to give constitutional treatment in order to achieve the maximum benefit, and where possible the sufferer would be well advised to secure the services of an experienced practitioner. Where this is not possible, the following suggested remedies may be of assistance, but in all cases the totality of the symptoms must be considered and should there be any difficulty in matching the symptoms of the patient with those given under the suggested remedies, then reference should be made to a *Materia Medica*.

*Argentum nit.* This remedy should be employed where the water passes unconsciously day and night. Always few drops pass after finishes. Divided stream. Patient feels better when out of doors in cool air. Worse at night or when warm.

Dose: 3 pilules of the 3x potency every 4 hours.

*Chimaphila umbellata.* This has been used with success when the patient has to lean well forward with feet wide apart when urinating. Frequent desire. Must strain before flow commences. Feeling as if sitting on a ball. Most symptoms aggravated in cold damp weather.

Dose: 3 pilules of the 1c potency every 4 hours.

*Conium.* This remedy is of value in chronic hypertrophy of the prostate, and should be used when the patient reports much difficulty in voiding urine. It stops and starts. Dribbles and there is a catarrh of the bladder.

Dose: 3 pilules of the 12c potency morning and evening.

*Ferrum pic.* This is alleged to be one of the best medicines for prostatic enlargements in the aged, and should be thought of when the desire to pass water is most marked at night, with full feeling and pressure in the rectum.

Dose: 3 tablets of the 3x potency every 4 hours.

*Lycopodium.* When the patient has the characteristic symptoms of this remedy; dry, flatulent, lack of vital heat,

much straining with pain in back. All symptoms worse 4 to 8 p.m.; this remedy will prove curative.

Dose: 3 pilules of the 12c potency every morning and evening.

*Sabal serrulata*. This remedy is useful in the acute stages of inflammation and hypertrophy. The gland is hot, painful and swollen. Difficulty in passing urine with burning pain on passing.

Dose: 3 pilules of the 3x potency every 2-4 hours.

*Thuja*. Frequent pressing to urinate with small discharge, patient strains much. Urinary stream split and small. Sensation of trickling after urinating. Stitches from rectum to bladder. Discharge of prostatic fluid in the morning on wakening. Desire sudden and urgent; but cannot be controlled.

Dose: 3 pilules of the 3c potency every 4 hours.

—*Heal Thyself, July, 1949.*

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## PHOSPHOR

EDWARD WHITMONT, M.D.

(Continued from Page 383)

A—The close similarity between the mental symptoms of *Phosphorus* and the lipoid-soluble anæsthetics, which, as we shall see, is paralleled by almost identical physical effects, signifies a fundamental basic correlation between *Phosphor* and the anæsthetics. We are entitled to the conclusion that those physical symptoms which are common to both of them, express the organic changes which result from a reduced state of consciousness and ego-control, the weakened inner "light man."

1. Anæsthetics paralyze the central nervous system by virtue of their lipoid affinity and solubility. Apparently,