

# THE HAHNEMANNIAN GLEANINGS

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## EDITORIAL

### PSORA

So far our study points to two fold conclusions: (1) Psora is the name, given by Hahnemann, to a disease-process or diseased condition, the original deviation from the state of health in a living individual; and (2) the efficient cause of Psora is a miasm, answering to the description of a living parasite or microbe, according to the modern bacteriological terminology. Thus we find that Hahnemann fixed the connotation and denotation of Psora; but while fixing the connotation of the term "Psoric Miasm", left its denotation vague and uncertain for obvious reasons. It is this uncertainty of the denotation of the 'Psoric Miasm' that is the root of all confusions, misunderstandings and divergences of opinions, often pushed to extremes, amongst the followers as well as opponents of Hahnemann and Homœopathy. Due to later developments in the science of Bacteriology, the syphilitic miasm is identified with 'Spirochaeta Pallida'; the sycotic miasm, with Gonococcus; but, as yet, no corresponding germ for Psoric miasm has been discovered. On the other hand Hahnemann's inclusion of so many non-specific as well as specific diseases under the one term Psora—some of which have been found to be associated with Specific microbes e.g. Tuberculosis, Leprosy

etc., while many, e.g. insanity, epilepsy etc., have not yet been traced to any specific germ—has made confusion (regarding the identity of the Psoric miasm) worse confounded.

Amidst the welter of confused and divergent opinions regarding the identity of the Psoric miasm we find a few opinions worth taking notice of. A predominant section of Homœopaths are of opinion that Hahnemann fell into the logical error of undue and unjust generalisation in tracing all diseases (excepting those of syphilitic and sycotic origin) to one primary disease-process or one primary infecting agent. The facts, however assiduously collected by Hahnemann, do not justify his stand. Dr. J. H. Clark, M.D. of London writes in the introduction to his book "The Prescriber": Since Hahnemann's day much has been done in tracing out the life-history of morbid diatheses, and there is no necessity to limit the number of chronic diseases to the three he described. It is open to original minds to find other miasms and their similars. The use of the nosodes in homœopathy, and the use of "vaccines" and "serums" in allopathic imitations of homœopathy are instances of possible developments on these lines (pp. 31). Dr. Wheeler and Sir John Weir also agree with Dr. Clarke. In fact, Dudgeon and many following him find fault with Hahnemann for this his supposed undue generalisation. Dunham, one of the ablest exponent of Hahnemannian Philosophy was not at all enthusiastic over the Psora theory and discreetly kept mum over the problem. He bypassed the problem by referring to the importance of anamnesis in the management and treatment of chronic diseases. There is another school of thought, the upholders of which are apt to regard Psora as a dyscrasia or constitutional deficiency and to ignore the existence of causative factor or infecting agent (living organisms) which were termed "miasm" by Hahnemann. To them Psora is more a predisposition to diseases rather than the disease-process itself. There is a third school of thought who have made Psora

Synonymous with chronic miasm. To our mind the phrases like "acute miasm" or "chronic miasm" are very unhappy. The inappropriateness of the terms becomes evident if we substitute the word microbes or bacteria for the word miasm: Acute bacteria or Chronic bacteria. Bacteria are bacteria—some may produce acute diseases while others may produce chronic diseases—for that reason, bacteria cannot or should not be qualified by terms, acute or chronic. It is only infection (or disease-process) that may be acute or chronic. But as we referred earlier, according to the Dictionary meaning the word Psora is an equivocal word, *i.e.* meaning both the disease-process as well as the disease-producing agent, the usage of phrases like acute miasm and chronic miasm came to be accepted in homœopathic literature. Even Hahnemann also used the phrase "Chronic miasm" (pp. 37, Chronic Diseases). That is why even Homœopathic stalwarts like the late lamented Dr. Roberts described Psora as chronic miasm in his masterpiece "The principles and art of cure by Homœopathy." Again I repeat there is a world of difference in meaning and implication between the expressions: "Psora is a chronic miasm" and "Psora is a chronic miasmatic Disease".

Now, who is to arbitrate on this debate? Let us refer it to Master Hahnemann himself. Nowhere in his writings he has described Psora as a miasm but always as a chronic miasmatic disease. These references have already been quoted in our previous paper. So there is no excuse for those who confuse Psora with a miasm and yet claim, themselves to be serious and careful students of Hahnemannian literature. But what about those who regard Psora as a dyscrasia or predisposition to diseases?

Hahnemann says "But the miasma of the itch needs only to touch the general skin, especially with tender children. The disposition of being affected with the miasma of itch is found with almost everyone and under *almost* all circumstances which is not the case with other two miasmata: No other chronic miasma infects more gene-

rally, more surely, more easily and more absolutely than the miasma of itch ; as already stated, it is the most contagious of all." This clearly indicates that Psora is not a predisposition but a disease brought on by infection of the human organism by a specific miasm. But this infection is almost universal ; practically no individual can escape this infection with the psoric miasm. In fact no predisposition *i.e.* prior state of altered health is a condition precedent to infection with psoric miasm. But Hahnemann seems to contradict himself when he writes thus in a foot-note to page 44 (Chronic Diseases) : "It was more easy to me, than to many hundreds of others, to find out and to recognise the signs of the Psora as well when latent and as yet slumbering within, as when it has grown to considerable chronic diseases, by an accurate comparison of the state of health of all such persons with myself, who, as is seldom the case, have never been afflicted with psora, and have, therefore, from my birth even until now in my eightieth year, been entirely free from the (smaller and greater) ailments enumerated here and further below, although I have been, on the whole, very apt to catch acute epidemic diseases, and have been exposed to many mental exertions and thousandfold vexations of spirit." Hahnemann admits then, though indirectly that there is a state of predisposition prior to getting infected with the psoric miasm. He described the signs and symptoms of latent psora but not those of the predisposing state to the condition where and when psora remains latent *i.e.* when a person may suffer from several or from a greater number of ailments (even at various times and frequently) enumerated by the Master under the symptom-list of Latent Psora (*vide* pp. 45-47, Chronic Diseases), and will still consider himself as healthy, and is supposed to be so by others. "He may also lead a quite endurable life in such a state, and without much hindrance, attend to his business as long as he is young or still in his vigorous years, and so long as he does not suffer any particular mishap from without, has a satisfac-

tory income, does not live in vexation or grief, does not overexert himself; but specially if he is of quite a cheerful, equable, contented disposition." (*Vide* pp. 47—Chronic Diseases). Thus Hahnemann hints about a predisposing factor to actual infection with psoric miasm. Even the psychological, environmental and personal hygienic factors are not enough to rouse the latent psora unless the individual is already infected with the psoric miasm. As for example, every man would be overwhelmed with grief over the loss of his only son; but to a man, who is previously psoric, the death of his only son might prove to be a last straw on the camel's back and throw him completely off his gear and develop insanity. Thus Haehl, (the biographer of Hahnemann) writes: "To Hahnemann psora is a disease or disposition to disease, hereditary from generation for thousands of years and it is the festering soil for every possible diseased condition. At the same time it is the most infectious of all. Contact with the general external skin is quite sufficient for transference of the disease in contrast with sycosis and syphilis, in which cases a certain amount of friction on the tenderest parts of our bodies, where most nerves are congregated and where the cuticle is thinnest, is requit for infection. But everyone is exposed to psora almost under any circumstances." Is it not very very strange that Hahnemann, whose life-work consisted in handling patients, both acute and chronic, managed to remain immune from psoric miasmatic infection? Yet Hahnemann fails to mention what was the nature of that immunity or what constitutes that immunity. Here Dr. Kent steps in and offers an explanation. According to him adherence to the path of rectitude supplies immunity to the living organism and deviation from the path (i.e. wrong thinking, wrong feeling and wrong action) lowers the natural resistance to the psoric miasmatic infection. This constitutes the endogenous factor which together with the exogenous factor i.e. the presence of the psoric miasm—brings about the altered state of the vital

force of the vital principle which manifests itself in altered sensations and functions, the totality of which constitutes, for our practical purposes, the disease itself. Thus we come to the inevitable conclusion that psora is not a predisposition to diseases (as many still like to assert) but the diseased condition itself, the beginning of the morbid dynamic alteration of the vital force, manifesting in and through the organism as sensational, functional and structural changes in course of time. We find, this, our idea, corroborated by Stuart Close in his book on Homœopathic Philosophy: "The primary error consisted in regarding psora merely as a dyscrasia or diathesis, which is directly opposed to what Hahnemann taught as we now understand it. Instead of regarding psora as a dyscrasia Hahnemann included several of the dyscrasiæ among the morbid conditions and diseases caused by psora". (page 94)

In this connection another feature must not be overlooked. Homœopathic treatment is often construed as constitutional treatment. But Hahnemann's theory of chronic diseases at first glance has nothing to do with the doctrine of constitutions. In contrast, the division into syphilis, sycosis and psora is distinctly related to exogenous causes of disease. Further, Hahnemann expressly stresses that even the most robust constitution or the healthiest mode of living and diet cannot remove a psora which has once succeeded in getting a foothold and developing in the organism. But the conceptions of the most robust constitution and the soundest mode of living are too general and inadequate for scientific terminology which must have precise and fixed connotation and denotation. According to Hahnemann only the form and manifestation of the psora will be modified by the constitution of the individual concerned, furthermore by the influence of the milieu, fate, mode of living and weather influences. And still the three divisions of Hahnemann have become an important part of the conception of constitutional disease and therapy in the homœopathic school. This has its basis in that, according

to Hahnemann, the three forms of life damage are so fundamental that they bequeath definite predisposition to disease from generation to generation. (O. Leiser: Textbook of Homœopathic Materia Medica).

B. K. S.

## BROKEN DOWN CONSTITUTIONS—NOSODES

By NEMO

So far in this series, we have confined ourselves to remedies from the mineral and vegetable kingdoms. This month, by way of a digression, we will look at the nosodes, and although our main object will be to indicate their use in broken down constitutions, we will also examine them from a rather wider point of view. And if space will permit, we will conclude with a brief account of the symptomatology of one nosode—*Tuberculinum*.

A nosode is a preparation from the morbid tissue of a person suffering from the disease for which a remedy is required. For example, *Bacillinum* is prepared from a sample of pus taken from the diseased lung of a person suffering from tuberculosis, potentized in the same way as any other remedy, and administered according to the same law of similars. It is important to note that, generally, only diseased matter from human beings is used and not, as in the case of vaccines used by the allopathic profession, matter from the bodies of animals. The only exception which I know to this rule is Professor Kent's *Tuberculinum bovinum*, which he obtained from the glands of tubercular cattle. Possibly he used this remedy because some of his cases of tuberculosis were of the bovine type, contracted from infected milk.

Hahnemann himself was the first to use nosodes, and he introduced *Medorrhinum*, the nosode of gonorrhœa,