

human beings. Even provings on the sick are not accepted, since sickness modifies the response of the organism to drugs, and from the sick no true drug-picture can be obtained.

The late Wilfred Trotter pointed out: "Experiment in man is the one wholly unexceptionable method available for the solutions of problems of human health and disease." *B.M.J.*, 1930, ii:134.

(To be continued).

—*Jour. of the Am. Inst. of Homœopathy, Dec.-Jan. '56*

THE ART OF CURE BY HOMŒOPATHY

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Art is the systematic application of science or skill in effecting a desired result. Every art has its foundation in science and every science finds its expression in art.

Homœopathy is a science and an art. The science of Homœopathy is learned by the study of the principles and rules laid down in the *Organon* and *Chronic Diseases*; observation and experience teach how these principles and rules may be applied in the treatment of the sick, but art measures the perfection of their application. No matter how much the physician knows of the science of Homœopathy, he cannot hope to cure even a reasonable number of his cases if he is lacking in artistic ability. I say, "a reasonable number," for even a master prescriber is unable to find the *similimum* in all cases. Hering is quoted as saying that, in his own experience, the average was 55%, which, incidentally, is the proportion of correct diagnoses established by Cabot of Boston many years after Hering died by comparing the cause of death as noted on the death certificate with that which was confirmed by autopsy. Mark, however, that Hering was speaking only of the *most* similar remedy. He was perfectly aware of

the fact that hundreds of cases have been cured by a series of similar remedies. He called this "zigzagging" the patient back to health, a method which has been used intentionally by well-informed homœopathists who knew that in many cases of advanced disease the *similimum* may cause irreparable damage, even death.

It has been said that medicine is not exact science. This is true of medicine as practiced by the dominant school; only partially true of Homœopathy. Although the allopath has at his command a prodigious array of well-established facts concerning disease and the action of drugs, he has no definite rule or guide for their use in the treatment of disease. Consequently he is obliged to resort to the haphazard method of trial and error (mostly error!) and treat the disease instead of the patient who has the disease. His results are apparent cures which for the most part are palliations and suppressions with many side-effects and sequelae.

The homœopath, on the other hand, has an unflinching guide in the law of similia which, with its corollaries, principles and rules of application, constitutes a science that conforms in every detail with the classical definition: "science is knowledge reduced to law and embodied in system. . . . In its development, it is a collection of observed facts." (Standard Dictionary). Moreover, it makes use of the laws of biology, electronics, chemistry and nature's own methods of repair and restoration of order in the human economy. It therefore cures quickly, completely and without complications or after-effects.

This law is God-given, unerring, immutable; only the physician, being human, is liable to err; for, though his success depends for the most part upon his knowledge, experience and powers of observation, in many cases he will fail unless he possesses at least a modicum of that elusive something which is the mark of a true artist.

We cannot all expect to be Raphaels, Titians, Rodins or Beethovens; "the true artist is born, not made." Yet

any man (or woman) of average intelligence, good judgment, imagination and ingenuity can become a good prescriber by hard work, mental concentration and the firm endeavor to cultivate what he may have of artistic ability. This is the ideal and every student of Homœopathy should strive with all his energy to attain it.

It is well known that there are, in general, two ways of practicing Homœopathy. The first is one in which the prescriber bases his selection of the remedy on key-notes and the pathology of the disease, using mother tinctures and low potencies, singly or in alternation; repeating the dose with little regard for the finer reactions of the patient; changing the remedy with every little variation in the symptoms, or discarding it in favor of some form of old school medication when the patient fails to improve. He may supplement his poor prescribing with all sorts of side-helps. He often claims that subjective symptoms are unreliable because they do not represent the pathology which is the "real disease."

The other method follows strictly the teachings of the *Organon*. Here the physician, while recognizing the practical value of diagnosis, pathology and adjuvant measures that are in accord with the spirit of the *Organon*, bases his prescription almost exclusively on the strange, rare and unusual subjective and objective symptoms, since they represent the individual. He uses high or low attenuations, according to the nature of the case and the character of the remedy. In other words, he recognizes that the Law of Similars demands strict individualization, as to the symptoms of the patient, the pathogenesis of the remedy and the potency in which it is to be administered. To him every least change in symptoms has its special meaning and he acts in accordance with it.

The first way is the easy way, for it requires little knowledge of the *materia medica* and the rules for prescribing. But, although it yields far better results than the biotics and palliative drugs of the dominant school, espe-

cially in acute diseases, it fails in a large majority of chronic ailments, and is totally lacking in the fine distinctions and subtle niceties which make symptomatic prescribing a fine art.

And why does it fail?

There are a number of reasons. In the first place, the remedy prescribed on a few symptoms, on the diagnosis or the so-called seat of the disease, seldom fits the whole case. Consequently, those who practice according to this method ignore the well-established fact that the human organism is a closely knit unit, a fact so evident that it is accepted even by many noted physicians and specialists of the old school, who hold that disease is nothing more than the dynamic reaction of the vital energy of the entire body to a morbid agent. This view is concurred in by Solis-Choen,¹ Sir James MacKenzie,² E. Assman,³ and others, but especially by Alexis Carrel⁴ and F. M. Pottenger.⁵ The latter says:

"The chief fact that has been impressed upon me by this study is the unity of the human body, and the manner in which activity in one organ or system is correlated through nerves and chemical substances with effects in other organs or systems. It shows the futility of attempting to divide the study and practice of medicine into specialties of this or that organ, or this and that system; for diseases do not limit themselves in that way. If there is any illness in the body anywhere, the whole individual is sick, the only difference is in degree".

Carrel says:

"Disease is not entity . . . It expresses the adaptation of the organism to a pathogenetic agent. . . . Disease is a personal event. It consists of the individual himself. There are as many different diseases as patients. . . . The physician's role is to discover the characteristics of the sick man's individuality."

Thus, by implication or direct statement, these eminent physicians confirm Hahnemann's teachings of a century and a half ago that disease is, primarily, a derangement of the

vital force which motivates the entire organism. . . It follows, therefore, that, to be effective, treatment must be directed to the patient himself and not to a "single organ or system," and that all the symptoms, subjective or objective—that is the totality of the symptoms—represent the "disease in its entire extent," and provide the indications for the remedy that will cure it (*Organon*, par. 6 *et seq.*)

The second cause for failure by the advocates of the first method is their lamentable ignorance concerning the rules for the evaluation of symptoms, the repetition of the dose and the interpretation of the patient's reactions after the remedy has begun to act. Indeed, it is amazing how little the average homœopath of today knows about these essential details of homœopathic technique; and yet, any physician of average intelligence can learn them by rote in a few hours, if he sets his mind to it. Hahnemann says in paragraph 2 of the *Organon*: "The highest ideal of cure is the rapid, gentle and permanent . . . removal and annihilation of the disease in its entire extent . . . on *easily comprehensible principles.*" (Italics mine). This is what Homœopathy does if practiced according to these rules and principles. It is the only science that can cure acute sicknesses rapidly, gently and permanently, and remove and annihilate inherited chronic affections in their entire extent. But, if wrongly interpreted and applied, it cannot express itself in art.

Lastly, the routinist uses only small doses of the crude drug and potencies below the 30th, for, as one of them expressed it, "I cannot see how any medicine can cure when it is diluted to such a degree that there is no drug substance left in it." It must be conceded that a medicine will act curatively in any potency in a great many cases, both acute and chronic, provided it is the *similimum* and is not repeated too often or for too long a time. If this were not so, the innumerable cures by low potencies, recorded in our literature, would be fictitious and many of our best provings figments of the imagination. But the experience of

our best prescribers has proven beyond the peradventure of a doubt that few chronic cases of long standing can be completely cured without the eventual use of the very high potencies; and no physician who knows anything about the recent discoveries in the fields of nuclear physics, the activity of the molecule, vibratory rays and the power of infinitesimals in general, should doubt that the high potencies have great dynamic power.

Having set the goal for which every conscientious doctor should strive, the question may be asked, "What are the requirements for attaining it?" They may be gleaned from Hahnemann's works and the rich literature of our School:

1. Set aside all prejudices and preconceived notions. This is especially difficult for the druggist and the recent convert from the old school, especially if he has studied the earlier writings of the German homœopaths.

2. Bear in mind that *similia similibus curentur* demands strict individualization. This will assist very materially in the study of the materia medica and the evaluation of symptoms.

3. Acquire a good working knowledge of the materia medica. It is amazing how little some homœopathist know of the pathogeneses of the drugs they must prescribe. He who has only a smattering of the indications for their use will never be anything more than a routinist and keynote prescriber, never an artist.

4. Learn well the rules and "easily comprehended principles" formulated by Hahnemann over a period of 25 years and enlarged upon and confirmed by hundreds of his loyal disciples.

5. Never forget that disease is primarily a derangement of the vital force or "spirit-like dynamis" and therefore is not confined to "a single organ or system" and do not "treat the disease, but the patient who has the disease."

6. Learn to distinguish a medicinal (homœopathic) aggravation from a natural exacerbation of the disease; to

interpret the significance of the appearance of new symptoms; the return of old symptoms; the order of the appearance or disappearance of symptoms; the movement of symptoms from within outwards, from without inwards, etc., etc. In other words, learn to read the *language of symptoms*.

7. Learn the very important difference between cure and recovery, between palliation, suppression and genuine curative remedial action.

8. Bear in mind that it is not the primary action of the medicine that cures, but the secondary effect which is the reaction of the organism initiated by it; the action of the drug is towards disease (identical with that of the infection of the cause of the disease), that of the patient towards health is in the direction of health, and, as such, must not be interrupted.

9. Therefore, learn to wait. This is the hardest thing for the prescriber to do; yet, as Lippe has pointed out, more mistakes have been made, more cures interrupted, by hasty action than by too long waiting.

10. Lastly, use all potencies, from the lowest to the highest, according to the nature of the case and the remedy selected; for there is a homœopathicity of the potency as well as for the disease.

The following experience was reserved for the closing of the discussion, but no time for discussion was allowed by the Chairman. It is, therefore, inserted here:

One evening at sunset I stood on the shore of beautiful Lake Louise in the Canadian Rockies. Tall, rugged peaks rose six thousand feet or more towards the sky. The rays of the setting sun shot over the beetling crags above, tinging the placid surface of the water a faint, rosy hue. A short distance to the right stood the great chateau. In front of it, a man in white overalls was busily engaged in coating a fire-alarm box with brilliant vermilion paint; he was making a good job of it. To my left, nearer the shore of the lake, sat an old German artist, giving the final touches to a most exquisite painting of the scene before him. I

moved forward and stood watching how deftly he handled his little brush. The grays and browns of the cliffs, the varied shades of green of the trees and bushes that covered them here and there, the lengthening shadows and dark vistas, contrasted beautifully with the silvery lake below; but above all, the artist had captured that delicate, pleasing effect which is the dream of every landscape painter: "atmosphere." To my exclamation, "Ausgezeichnet!" he raised his smiling face and replied, "Dankeschön!" and resumed his retouching.

On the way back to the hotel I said to myself: "There was a perfect illustration of the difference between the art of prescribing according to the precepts of the *Organon*, and that of the average homœopath."

—*The Layman Speaks, July 1956.*

COMPLAINTS OF PREGNANCY

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Perpetuation of the human race is only through pregnancy. From the beginning there has been distress, discomfort and pain, and the annoying symptoms of the child-bearing woman.

The story of Creation in Biblical history tells us that childbirth shall be associated with pain and so down through the years, depending on the resistance, physique, anatomical formation and anatomical adjustments of the mother and her foetus, the mother has given birth to her children through discomfort and misery.

The normally robust, well developed mother during the age when she has pliable muscles with an adjustable pelvis, rarely has a great deal of difficulty, providing the foetus is normal in size and holds a normal position. But a pregnant woman must always be closely observed and checked symptomatically and physically for any deviation