

DR. PATERSON'S EXPOSITION OF HAHNEMANN'S DOCTRINE OF PSORA

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Dr. Paterson mentions the English translation of Hahnemann's "The Chronic Diseases—their Nature and Homœopathic treatment" by Chas. J. Hempel published in New York, 1845 as the only English translation available. But we possess a copy of English translation of the same book by Prof. L. H. Tafel (translated from the second enlarged German edition of 1835) with annotations by R. Hughes and edited by P. Dudley and published by Bœrick and Tafel in 1896. Accounting for the necessity of publishing a second translation of this Hahnemann's master-piece Prof. Tafel, the translator, writes in his preface: "The translation here submitted to the public is the second translation of this work into English, it having before this been rendered by Dr. Charles J. Hempel and published by W. Radde in the years 1845-6. When it was proposed to reprint this translation there was a strong protest made against the old version on the ground of its *being to some degree inexact* etc. These complaints have been proved well founded etc. . . . There is no question but that Hempel is right in what he says of the involved phraseology and the lengthy periods of Hahnemann; still we did not think it best to follow his mode of rendering, which according to his preface consists in 'mastering the sense of a period, and then embodying it in a free manner in the foreign tongue'. We have preferred to follow in this respect the examples set by Dr. Dudgeon in his admirable translation of the *Materia Medica Pura* (London, 1880); he has faithfully rendered not only the ideas but also the expressions of Hahnemann. It is only by thus closely following the author and indeed in their own setting and thus in their native vigour in the author's original style. We have accordingly preserved the long periods of Hahnemann and

his own precise, if sometimes redundant, phraseology; though, of course, it was necessary to invert the periods and to arrange the phrases into English order."

In Editor's preface Pemberton Dudley, while mentioning the peculiarities of Hahnemann's style of writing draws the attention of the readers to 'his (Hahnemann's) introduction of qualifying words and phrases in certain peculiar and unusual connections, likely to escape the notice of the casual or careless reader, but evidently intended by the author to be taken at their full significance and importance and to constitute an essential element of the discussion. It may be said, in passing, that the failure to note this last-mentioned characteristic of Hahnemann's method has occasioned much misunderstanding of his doctrines."

So my interpretation of Hahnemann's ideas depends upon the English translation by L. Tafel and I shall be quoting his text as the basis of my comments.

At the onset I must say that I do not agree with Dr. Paterson's ideas regarding the connotation and denotation of the term 'Miasm' in the sense supposed to be adopted by Hahnemann according to him (Dr. Paterson).

According to Dr. Paterson "Miasm can be defined as a form of 'Deranged Dynamis'—the vital force working under adverse circumstances, and failing to maintain normal function and thus producing the symptom-complex we call disease."

Now if miasm implies merely deranged vital force there seems to be no justification for Hahnemann classifying chronic diseases into those of miasmatic and non-miasmatic origin (vide sec. 77 and 204, Organon, sixth edition.) ; and writing in sec. 11 (Organon, 6th edition) the following :—

"When a person falls ill, it is only this spiritual, self-acting (automatic) vital force, everywhere present in his organism, that is primarily deranged by the dynamic influence upon it of a morbid agent inimical to life ; etc.,

etc." It implies that diseases whether acute or chronic—cannot occur without derangement of vital force.

Dr. Paterson, I am constrained to remark, has not gone deeply into the history of evolution of Hahnemannian conception of 'Miasm.'

The comparative study of the first four successive editions of Organon (1810—1819—1824—1829) especially the sections 39—61 shows us that Hahnemann was all the time struggling hard to reduce to order the vast chaotic mass of facts concerning diseases. He weighed every sort of classification of diseases in the balance and found each of them wanting. His realistic mind was always for concrete individual cases and abhorred abstractions which the nosological studies of diseases afforded in his time. He came to the conclusion: "Nature has no nomenclature or classification of diseases. She produces single diseases etc." (Vide Sec. 46 of the 1st edition of Organon and retained right up to the 3rd edition of Organon.) But about some diseases he was not so sure as they were so fixed in their character and course. They might have been caused by a peculiar contagion (a peculiar miasm of tolerably fixed character) e.g. Plague, Small-pox etc.: so that to each of them can be given a peculiar name. Though we find Hahnemann constantly busy in developing the knowledge of drugs and perfecting the art of therapeutics, there was no time when his mind was not occupied with the knowledge of diseases and how to improve it. That is why the main changes in the successive editions of Organon deal with changes of conceptions about the vital force and about the causative factors of diseases. In the first three editions of Organon we come across the term "miasm" but it was used in the then accepted sense and its precise connotation and denotation had not yet been fixed by Hahnemann. During Hahnemann's time all the morbid agents were designated by a general term "miasm or miasma"—which literally meant "any noxious emanation or effluvia or a

polluting factor." There was no fixed connotation or denotation attached to the term "miasm."

Hahnemann was the first to perceive and teach the *parasitical* nature of contagious diseases e.g. Small-pox, Chicken-pox, Measles, Scarlet fever, etc.—i.e., most of the acute diseases of epidemic and sporadic character depended upon a "*contagium vivum*." Though he made it explicit in his article on Cholera in 1831 ("An Appeal to the thinking philanthropists respecting the mode of propagation of the Asiatic Cholera, Coethen, October 24th, 1831) he must have arrived at it before 1827 when he expressed his views on Chronic Diseases to his two disciples before publishing his book on 'Chronic Diseases' in 1828. If we read between the lines of 'Chronic Diseases' it is evident even to a casual reader how he based his arguments on the notion of acute miasms which he had arrived at previously. He arrived at the final conclusion about the nature of miasmatic conception through these steps of thinking: First he came to a definite idea about the *biological agents* being causally related to acute diseases; secondly, he was able to show the analogy between the mode of onset and development of acute as well as of chronic diseases; and thirdly, he established the contagious nature of Chronic Diseases during one phase of their development in the human organism. The possibility of transmission of those disease factors through successive generations was established through Hahnemann's marvellous collections of facts from the earliest possible recorded history. So from all these observations he could assert the causative factors of chronic diseases as being of miasmatic nature with the same conception of miasm which he attached in relation to acute diseases. That is why after much deliberations and prolonged observations Hahnemann added the following line in section 72 of Organon, 5th. edition: *They (i.e. chronic diseases) are caused by dynamic infection with a chronic miasm.*

During Hahnemann's time chemical, physical and psychological factors were already known to be causally related

to various disease conditions; and it was Hahnemann who was the first to point out that biological agents (in the form of invisible, minute living beings, animalcules etc.) also played causative roles in the production of diseases, whether acute or chronic. Thus Hahnemann writes in his book on Chronic Diseases: They (chronic diseases) must therefore all have for their origin and foundation constant chronic miasms whereby their *parasitical existence* in the human organism is enabled to *continually rise and grow*. So it is clear that the term 'miasm' can never be equated with the disease condition produced by it—whatever might be the denotation of 'miasm.' Hahnemann has always described Psora, Syphilis and Sycosis as the three different types (and not degrees as written by Dr. Paterson) of fundamental derangements of the vital force produced by their respective miasmatic factors.

Nosologic classification of diseases is possible only when disease conditions appear to be predominantly associated with particular tissues, organs or parts of the living body. Hahnemann observed that prior to such disease-localisations there was a phase in each individual case of all chronic diseases where deviations from the healthy state of the organism could be detected through altered sensations and functions, which, though refer to the individual as a whole, could not always be strictly localised for the purpose of labelling him with a name. But some name must needs be given to these primary generalised symptom-syndromes for ready comprehension and easy communication of ideas about them to others. Failure to obtain the totality of the symptoms in cases of chronic diseases was due to overlooking these early symptom-complexes. So these fundamental symptom-syndromes were given by Hahnemann the denotations of Psora, Syphilis and Sycosis. This is the long and short of Hahnemann's discovery of the nature of chronic diseases. The conception of 'miasm' relates to the efficient causative factors regarding these

original derangements of the vital force leading to primary deviations from the state of health of the individual.

Hahnemann's discovery in the field of medicine consisted in (1) the discovery of miasm (i.e., living beings) as the efficient cause of some of the acute diseases and of all the chronic diseases (excepting those due to drugs, trauma or various other unhygienic and occupational factors.); and (2) in the determination of successive stages in the evolution of diseases both acute and chronic—and especially the primary stage wherein each type of chronic disease remains unlocalised and thus incapable of being nosologically labelled, though distinctive symptom-syndromes indicate definite a type of deviation from the state of health of the individual and which must not be left out of account in considering the totality of symptoms in the sick individual for the selection of a Homœopathic similimum remedy. Hahnemann seems to have held the opinion that once the disease condition is brought about by some exogenous or endogenous factors acting as efficient causes, actual treatment of the case needs tackling of the material cause (i.e., the altered vital force), though the knowledge of the obstacles to recovery in each case and of how to remove them is also essential and indispensable for a true physician who "understands how to treat judiciously and rationally, and who aspires to be a true practitioner of the healing art." True to his dictum, after discovering the nature of *efficient causes* of chronic diseases he left them there and delved into the subject of material cause of chronic disorders i.e., the altered force of the Life-principle in all its complexity and totality. The description of the efficient causes i.e., miasms, which he gave, certainly anticipates modern bacteriological conceptions. Hahnemann's description of them as 'animalcules' might not be quite correct in the light of modern knowledge which reveals the source of all bacteria, viruses etc. to be the vegetable kingdom; but it is clear what he meant i. e., living beings. Beyond hinting about

the "contagium vivum" he could not proceed further as the time was not ripe for further investigations and researches along that line. If we say, Psora, Syphilis and Sycosis are chronic miasmatic disease conditions—everything becomes clear. But if we think Psora etc., are chronic miasms—confusion starts, material cause is made synonymous with efficient cause and everything gets jumbled up and great injustice is done to the phenomenal genius and high-grade intuition of our Master Hahnemann.

We find that Hahnemann took up the term 'Miasm' current in his time but invested it with a particular connotation but left its denotation obscure and uncertain for obvious reasons. It is this uncertainty of the denotation of 'Psoric miasms,' especially, that is at 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.

Dr. Paterson quotes Sec. 80 of Organon (6th. Edition) to assert that Hahnemann identified Psora with the chronic miasm. This section is typical of Hahnemannian style as the whole section is one single sentence with involved phraseologies and all the other characteristics as mentioned by P. Dudley in his editor's preface to the English translation of 'Chronic Disease' (as referred to above). If we analyse the sentence we find....*the chronic miasm of psora, which*.... announce by a peculiar cutaneous eruption,*the monstrous internal chronic miasm—the psora,* the only real fundamental cause and producer of all the other numerous, I may say innumerable, forms of disease, etc. etc." It is evident that 'the chronic miasm of psora' is qualified by the phrase 'the monstrous internal chronic miasm; and psora, as the real fundamental cause etc....' is separated from the previous clause by a 'dash' and hence the term 'Chronic miasm' can not be taken as a qualifying adjective of 'psora'. So, in our considered opinion, Dr. Paterson is not justified to write "the miasm which Hahnemann called Psora".

Dr. Paterson, very rightly draws the attention of the readers to the phrase "dynamic infection" as written by Hahnemann. We quite agree with him that Hahnemann did not restrict the term 'infection' to microbic invasion of the living body. But we would have been happier if Dr. Paterson elucidated the full significance of 'infection' as implied by Hahnemann. So far we have understood Hahnemann, infection, according to him, is a biological process whereby a quality of any morbid agent (whether living or non-living, inorganic or organic) is instilled into a living organism by influence or communication of some sort without interchange of material parts of the substances concerned, leading to altered qualitative state of health as manifested by altered sensations and functions. The process is essentially qualitative and not quantitative (mechanical or chemico-physical) and hence termed by Hahnemann as dynamic (vide foot-note 7 to section 11 of Organon, 6th edition). That is why Hahnemann talks of drug-miasm and drug-infection whereby he implies that similar to natural disease causes drugs by their inherent pharmacological qualities alter the qualitative state of the vital force in an individual by means of a process which cannot be described and explained by mechanical or chemico-physical concepts, and hence that kind of action was termed by him as dynamic action. So he writes in the foot-note (referred to above): "*For instance, the dynamic effect of the sick-making influences upon healthy man, as well as the dynamic energy of the medicines upon the principle of life in the restoration of health is nothing else than infection and so not in any way material, not in any way mechanical.*" In short by 'dynamic action', Hahnemann meant 'qualitative action'. How far the 'quality' of a substance is dependent on its materiality is a problem for metaphysics; and it has got to be taken into consideration to grasp the implications behind Hahnemann's theory of "dynamization of drugs". Similarly, body-life-mind relations cannot be explained by mechanico-chemico-physical

concepts and Hahnemann did not go beyond describing those relations as instances of dynamic nature; *e. g.*, life and mind act on the body dynamically as well as natural disease causes and drugs act on the organism in the same manner and leading to resulting phenomena as illustrations of synchronistic, causeless and 'a priori' arrangements.

Dr. Paterson has taken exception to the use of the term 'cause' by Dr. Margaret Tyler in the title of her paper "Hahnemann's conception of Chronic Disease as caused by Parasitic Micro-organism." He wants to substitute the phrase "related to" for "caused by." But we would not confuse mechanical cause with the creative or evolutionery cause, though the same term is used rather loosely in both the cases.

We agree with Dr. Tyler's and Dr. Stuart Close's interpretations of Hahnemann's miasmatic theory of chronic diseases rather than with what Dr. Paterson tries to establish. The root cause of difficulty of accepting Hahnemann's doctrine of Psora seems to us to lie in our failure as yet to ascertain and fix the denotation of the Psoric Miasm.

For further justification of the parasitic nature of miasm of diseases, I quote, below, a foot-note on p. 35 of Hahnemann's Chronic Diseases:—

"Or have these various, acute, *half-spiritual* miasm the peculiar characteristic that—after they have penetrated the vital force in the first moment of contagion (and each one in its own way has produced disease) like parasites, have quickly grown up within it and have usually developed themselves by their peculiar fever and after producing their fruit (the mature cutaneous eruption which is again capable of producing its miasm) they again die out and leave the living organism again free to recover?

On the other hand, are not the chronic miasmas *disease-parasites* which continue to live as long as the man seized by them is alive, and which have their fruit in the eruption originally produced by them (the itch-pustule, chancre and that fig-wart which, in turn, are capable of infecting others)

and which do not die off of themselves like the acute miasmas but can only be exterminated and annihilated by a counter-infection, by means of the potency of a medicinal disease quite similar to it and stronger than it, so that the patient is delivered from them and recovers his health?"

HOMŒOPATHY—A NATIONAL ASSET

A PHYSICIAN

At the British Homœopathic Congress held in Glasgow in 1933, Dr. Henderson Patrick delivered his Presidential Address with the above title. In the course of his paper he quite naturally quoted the remarkable figures of the successful homœopathic treatment of cholera in the last epidemic in London in 1854. The result at the London Homœopathic Hospital was 16.4 per cent of deaths, compared with 59.2 per cent in the allopathic hospitals. This result was so startling that at first the homœopathic figures were suppressed by the medical authorities and had to be specially called for in Parliament.

Again in an enteric epidemic in Melbourne in 1889, the figures for the homœopathic and allopathic hospitals were respectively 7.2 per cent and 16.7 per cent of deaths. Not only was there this remarkable difference in the mortality rates in favour of homœopathic treatment, but the time the patients had to stay in the homœopathic hospital was on the average less than one-third that of the sojourn in the allopathic hospitals.

It may be objected that these figures refer to rather ancient times and so should no longer be quoted, especially as the methods of orthodox or allopathic medicine have made such wonderful strides in the last ten to twenty years. There surely is no longer that great discrepancy between the results of the two schools of medicine in the treatment of acute illnesses—so would our opponents argue.