

## NOTES ON APPENDIX CASES WITHOUT OPERATION

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A writer to the *Medical Annual* a few years ago said that the rage for operation on cases of appendicitis was dying out and there was a reaction from the view that removal of the appendix was required in a vast number of abdominal cases.

It is to be hoped that this opinion has been increasingly held by the medical profession during the years that have passed since the above statement was made. For there can be little doubt that though some cases of this kind required surgical aid, an immense number were operated upon when, though the operation was stated to be successful, yet the patient has died. Many indeed, who might even have survived the disease, have succumbed to the shock and aftereffects of the operation.

We can each of us speak of what is our own individual experience, and this has been mine. During a practice of forty-seven years, during which time I had the usual run of all the variety of cases which falls to the lot of the average medical practitioner, I have lost but two cases of abdominal disease—one from what was called typhlitis forty years ago—and no case of mine has ever been operated on for removal of the appendix.

*Case No. 1.* Years ago there came to me a Captain R., aged about forty, an active, cheerful man, retired from military service. For several years he had had recurrent attacks of appendicular pain, with threatenings of inflammation. He was about in a cold east wind one day in April, and in the evening took a dose of Hunyadi Janos water. That night acute pain came on. After a diarrhoea stool, the pain was so severe, he almost fainted, with cold sweat and sharp collapse, almost losing consciousness. I saw him about 10 p.m. and found the pain somewhat less, but the patient was shaking and chilly, with a pulse of fifty seven per minute. Hot fomentations were applied to the abdomen and Belladonna 1x and Mercurius cor. 3x prescribed alternately every half hour. The next morning I found him better. He was kept in bed on a milk diet, tincture of Camphor to be given in water in small doses, if the pain seemed inclined to return. There was some sensation of a lump in the right side, with throbbing. Belladonna and Merc. cor. were continued every hour, alternately, and then every two hours. All the symptoms went away, and at the end of a week from the beginning of the attack he was able to return to business. I had him under observation for eighteen months after this, and he had no recurrence of his trouble. Several years afterwards he wrote me from South Africa, where he was settled, and told me he had been all right ever since. It is noticeable in Captain R.'s case, that though previously liable to recurrent appendix attacks, all seemed to

clear up after the treatment of this one. Any after threatenings he may have had were, I believe, equally met by these same remedies, which he took away with him.

*Case No. 2.* Mr. J., aged thirty-five, schoolmaster, seen March 5th, 1918. His attack was ushered in two days before with severe abdominal pain, tenderness in the right lower abdomen, and loose actions of the bowels. The pain decreased, after hot fomentations were applied, but on getting up and going out, he felt so ill, he had to return home at once and go to bed. He was easier when resting. I ordered Bryonia 3x and Belladonna 3x alternately every two hours, and to keep entirely in bed. 6th, he had had a good night, temperature normal, pulse fifty-six, still tender on deep pressure over appendix. He had had such attacks before. To keep in bed on a light diet and repeat medicines. 7th, complained of right leg feeling stiff. Abdomen tender over a smaller area. Bryonia 1x and Hepar sulphur 3x, alternately every two hours. 9th, tenderness almost gone, feeling much better. Keep bed, repeat medicines. 11th, no tenderness now on, pressure, to be felt. Allowed to sit up; much flatulency in the bowels. *Lycopodium* 5x, two grains three times a day. 13th, going about again, flatulence less; able next day to return to school. Four years later I was sent for to see him again, March 10th, 1922. Symptoms came on after a long walk; acute pain in the abdomen, tender in the right lower quadrant; diarrhoea and bilious vomiting; no fever, always has a slow pulse. A dose of two or three grains of Mercurius dulcis 2x was placed on the tongue, and Bryonia 1x to be frequently given, and a hot abdominal compress ordered. 11th, only once complained of pain, and been slightly sick. "Feels done." Repeat medicine. 12th, better; tongue cleaner. Kept bed. Merc. sol. 5x, Bryonia 3x alternately, every two hours. 14th, great distension of bowels, which are torpid. Ordered to be out of bed and move about a little. Nux 1x every two hours. 16th, bowels have been moved. Been up and felt better. Distension and pain felt at times. *Lycopodium* 6x and *Colocynthis* 6x, two grains alternately every two hours. 19th, visited. Been out several days and feels himself. I have met him occasionally during the last three years, and have heard of no further attack.

In these two cases there was no febrile movement, but we know that such is often absent. The variations of the thermometer and the pulse being largely dependent upon temperamental tendencies. The last case, Mr. J., was a highly nervous man, who knew too much, and had his mind working on appendicitis, which much intensified his illness, and made cure and treatment more difficult.

*Case No. 3.* A case in which the previous removal of the appendix gave no relief to severe attacks of pain in the abdomen, occurred in a delicate little girl of six. Probably there may have been tubercular mischief. Before she came under my care, the appendix had been removed and an abscess was said to have been found. The pain when I saw her was acute, and in the region of the umbilicus, and seemed relieved by gentle pressure. She

had vomited once or twice. September 24th, 1917, first seen; the child had been ill all day. Colocynth 5x and Nux vomica 3x, one grain alternately every hour. Hot fomentations to abdomen. 25th, much better. Vomited some bile yesterday; much less pain. Repeat medicines alternately every two hours. 27th, is easier, but no action of the bowels. Repeat the medicines. Ordered to be given to-night two grains of Mercurius dulcis 2x. This shortly acted upon the bowels. 30th, by now the tongue is clean; child is about and feels well. The recurrent attacks of pain seem not to have had the Appendix for their origin. At any rate its removal did not prevent their recurrence. Possibly the "parietocolic membranes" as described recently by Mr. Granville Hay, may have been the fons et origo of this child's suffering. Of course, if there had been formerly pus in the abdomen, operative steps for the evacuation of this might have been necessary, though I hold, that in the absence of constitutional symptoms, carefully adapted homoeopathic treatment would probably have helped absorption, and cured the child without the risk involved in opening the abdomen.

*Case No. 4.* The last case to which I shall refer here, is that of a young lady aged twenty-one, which occurred for treatment twenty-nine years ago. March 18th, 1896. She had strained herself six months before, lifting a heavy basket. Inflammation came on, with sickness and great abdominal pain, and some coincident cystitis. Partially she got better, but a few days later, after a long walk, she had a relapse. On examination I found dullness in the abdomen and fullness, especially in the right flank, where she was also tender on pressure; no temperature or fever. The symptoms suggested some plastic effusion in the abdomen. I ordered rest in bed, the application of hot bran poultices, and gave Belladonna 2x and Mercurius cor. 3x, two grains alternately every two hours. There had been no catamenia since the original attack. She had always been considered rather specially strong and able. 20th, I found a clear tympanitic space between the lower edge of the liver and upper edge of the dull area, which area extended through the right iliac and lumbar regions over to the left side, across, at a level, just above umbilicus. It extended to a point two or three inches to the left of this and quite down to the bladder region. She reported herself as feeling better, less pain, but still tender on pressure; temperature once only had reached 100. Repeat medicines and mild turpentine stupes. 23rd, outline of the dull area had now shrunk to the right side of the umbilicus; parts all feel softer, and not tender to moderate pressure. Allowed to sit up a little. 24th, she went home into Cornwall, and three weeks later I heard from her that she was keeping much better. It is not quite clear what was the origin of the effusion in Miss C.'s case.

Fortunately, for homoeopathic treatment to be successful, the choice of remedies need not depend upon an exact pathological diagnosis (which may easily be wrong when it is made). The symptoms, at any rate, were there to go upon, and—she got better.

The chief remedies in appendicitis, which I have found useful are: Belladonna, Bryonia, Mercurius cor., Lycopodium, Colocynth.

Belladonna in the early stage, where there is heat, abdominal distension and tenderness and pain.

Bryonia where there is tenderness, and pain felt most on moving; necessity to lie still—in rheumatic subjects and where a chill or exposure to damp has been the exciting cause.

Mercurius cor. where local symptoms are acute, conjoined with enteritic or diarrhetic conditions, and sometimes with bladder irritation.

Lycopodium in a more chronic type of case, where there is much distension of abdomen, and where the bowels are torpid or absolutely constipated.

Colocynth specially indicated by a high degree of pain, which may be cutting, twisting or cramping. There is also distension of the abdomen and soft stools. Pressure on the abdomen may give some relief to the pain, which occurs in paroxysms.

Dioscorea is also to be thought of, where the pain is acute.

Nux and Arsenicum must also be kept in mind, especially where there is much nausea or vomiting.

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#### KALI BROMATUM

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weeping, low-spirited and childish, profound indifference, almost disgust for life.

Brain feels too tight; with a feeling of anaesthesia of brain.

Cholera infantum. Brain irritated, face flushed, pupils dilated, eyes sunken, rolls head, wakes shrieking, extremities cold.

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