

# TEXT-BOOK OF HOMOEOPATHIC THEORY AND PRACTICE OF MEDICINE\* 4

(A Critical Review)

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I would first quote hereinbelow extracts from the book (Section I 'Infectious Diseases: Tetanus' pages 111 to 117) and then discuss them (The paragraph numbers are mine for convenience of discussion)

1. Pathology: Most authorities agree with Brown-Sequard that there is an ascending neuritis from the wound as a starting point. It is best to take advantage of this fact and inject the antitoxin above the wound and near the nerve.

2. Symptoms: Another case I had was a teamster, aged 42. His hand was caught by the chain of the tailboard, causing a marked abrasion of the skin and breaking one of the bones. Eight days after, . . . the muscles of his face and neck were also stiff and he was sore all over, . . . The muscles of the right side of the trunk contracted at intervals and drew the body to one side, . . . every noise or jar or touch aggravated the drawing of the muscles of the trunk and tightened the muscles of the head. Cold water and air also aggravated. So pronounced were the modalities that I gave him Nux vom. and sent him home to bed. The next day. . . the stiffness greatly increased with little or no change in the convulsions. He had been unable to masticate . . . He wanted to know if the medicine was a cathartic as he had four stools since he was at the office, beginning after midnight. The stools were watery, yellow . . . The intervals between the spasms were shorter and he was more restless. He was put upon Rhus tox. 3rd, five drops every two hours and . . . next day showed no change. The third day the stiffness was much less and the spasms a little less severe. The Rhus was continued and he was fed per rectum. The patient gradually improved.

3. Prognosis: This is unfavourable. . .

4. Homoeopathic remedies have not proven as effective in this disease as in pneumonia or flu.

5. It is true that the symptoms of Nux are most severe and dangerous symptoms of tetanus which fact may account for the failure of Nux.

6. Rhus tox. is the remedy which has been most useful in my hands. I presume it is a mere coincidence but it has saved the life of two patients for me. The case cited above is a good illustration of the symptoms, the

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\* Royal, George: *Text-book of Homoeopathic Theory and Practice of Medicine*, (New Delhi; B. Jain Publishers), pp. 689.

stiffness, the restlessness and the yellow stools being the three leading symptoms.

7. *Hypericum* has the reputation of having prevented the development of the disease when given at the very beginning.

8. Auxiliary Treatment: Use some antiseptic dressing. Keep patient in a darkened room. . . Nourish per rectum. Use some anodyne for the pain.

I shall now examine the above by a comparative study with J. T. Kent's writings on '*Hypericum*' in his *Lectures on Homoeopathic Materia Medica* which was published nineteen years prior to Royal's *Text-Book*.

'*Hypericum* has the reputation of having prevented the development of the disease' (para 7) is incorrect since it is *Ledum* that is preventive, and *Hypericum* is curative. Kent defines when *Hypericum* is to be given and also makes a clear distinction between *Ledum* and *Hypericum* as he says ". . . *Ledum* comes in very often as a preventive medicine. It is preventive medicine when an accident happens to the end of the fingers. . . If a horse picks up a nail, pull it out and give him a dose of *Ledum*; there will never be trouble, he will not have lock-jaw. These punctured wounds . . . are made safe by *Ledum*, i.e. *Ledum* prevents the shooting pains that naturally come and the nerves will never be involved. We will have no trouble if we can give it at once . . . if it shoots from the wound up the nerve of the arm it is more like *Hypericum*." To be clearer, Kent continues:

" . . . when these pains come on *Hypericum* will stop them, and from this stage to advanced states of tetanus with opisthotonos and lock-jaw *Hypericum* is the remedy. It is full of just such symptoms as are found in tetanus and such symptoms as lead to tetanus and it is full of all the manifestations of an ascending neuritis."

'It is best to take advantage of the fact that there is an ascending neuritis from the wound as a starting point' (para 1) and instead of 'injecting the antitoxin' it is better 'to administer a dose of *Hypericum*.'

George Royal says the prognosis is unfavourable (para 3). A doubt arises whether Royal is a homoeopath or an advocate of allopathy when the following lines of Kent are read in connection with para 3:

"Every practitioner knows that lock-jaw may develop after an injury to sentient nerves. *The old school doctor is frightened by these shooting pains* (italics mine) up the arms after an injury. The allopathic physician looks upon that as a serious matter for he sees lock-jaw or tetanus ahead. . ."

Para 6 will give a wrong impression in the minds of the newcomers or student of Homoeopathy regarding the efficacy of homoeopathic remedies. Are pneumonia and flu the only diseases in which George got a 'mere coincidence' of his prescription? He has arrived at the conclusion that 'Homoeopathic remedies have not proven as effective in this disease' because he has simply tried one medicine after the other as the following will show.

A case of teamster is cited (para 2). When 'his hand was caught by the chain of the tailboard, causing a marked abrasion of the skin and breaking

one of the bones' at this stage itself, instead of thinking Arnica, Ruta, Rhus tox. etc. for injuries to bones and muscles he tried Nux vom. 'because so pronounced were the modalities' which is wrong. The modalities are 'every noise or jar or touch aggravated the drawing of the muscles . . . and cold water and air also aggravated.' Now, does Royal want the readers to believe in his words, as Professor, that Nux vom. is the only medicine with these two modalities? With these two symptoms many medicines can be quoted. Instead of selecting the correct remedy he has tried Nux vom. of which symptoms he might have read in some books! Instead of accepting his failure he contends (para 5) 'the symptoms of Nux are the most severe and dangerous symptoms of tetanus which fact may account for the failure of Nux.' No, when Nux failed and later Rhus tox. cured at least at this stage he should have realised the wrong selection of Nux. It is not 'because the symptoms of Nux are the most severe and dangerous' but it should be said that 'Nux was not the indicated remedy for the case.' Again, if the symptoms of Nux are the most severe and dangerous, then how can Rhus tox. cure? Does this mean (i) that Rhus tox. only can cure 'most severe and dangerous symptoms' or (ii) when a dangerous symptom is in one medicine then that remedy cannot cure those symptoms? His ignorance is reflected when he 'presumes it (Rhus tox.) is a mere coincidence.' But it has saved the life of two patients for him. Does it again give the inference that patients with Rhus symptoms alone were saved by him leaving behind other tetanus patients to the undertaker because their symptoms were much more serious than Rhus tox?

He has administered Rhus tox. because of the symptoms 'the stiffness, the restlessness and the yellow stools' (of the case of teamster). But the yellow stools, I would say, is not a symptom of the disease but a proving of Nux vom. which was given in repeated doses as 'he (the teamster) wanted to know if the medicine was a cathartic' (para 2). Thus, it can easily be concluded that had he not got the symptom of yellow stool by repeated doses of Nux he could not have prescribed Rhus. Now, again, in saving the life of two patients (para 6) did he first give Nux. and then after producing artificially the symptoms of yellow stool, gave Rhus? As a Professor does Royal teach us that Homoeopathy is a matter of presumptions and mere coincidences by trial and error? He himself accepts that it is a mere coincidence.

We need not waste the time by 'using some antiseptic dressing, stimulating, using some anodyne for pain . . .' (para 8) but read the following words of Kent:

"A sensitive nervous woman steps on a tack during the day, and she feels all the day where the tack went in, lies down in bed and it aches so violently she cannot keep it still. Ledum will prevent any further trouble, but if that goes on until the morning the pains will be shooting up the leg, calling for Hypericum. I mentioned the use of Ledum when a horse picks up a nail. Now, if a nail goes through the thin part of the hoof and strikes the

coffin bone that horse is almost sure to die with tetanus; the veterinarians know nothing for it; *though they poultice it and put on liniments, etc.* (italics mine) that horse will die with tetanus; but if a dose of *Ledum* is given before the tetanus comes on it will save the animal from tetanus. After the jerking comes on *Ledum* will not do, but *Hypericum* must be given."

If we 'do stimulation, use anodyne' instead of curing the patient with a dose of *Hypericum* or the indicated remedy what is the difference between allopathy and the new school?

In section XII Miscellaneous Conditions under Acute Articular Rheumatism, (pages 651 to 656) George Royal writes:

Auxiliary Treatment: I have found that wrapping the part with flannels dipped in hot solution of equal parts of the tincture of *Colchicum* and hot water of benefit . . . Dickinson used a lotion composed of one part tincture of *Aconite*, three parts of *Chloroform*, and four parts of *Alcohol*.

Farrington warns that "if someone were to apply the tincture of *Aconite* to affected joint there would be danger of the inflammation travelling to some more vital part.\*

Is not this *auxiliary treatment* dangerous? Royal himself defines (in section II of the text-book under Diseases of Bones: *Arthritis Deformans*, page 168) 'Auxiliary Treatment' that "by which is meant such treatment as will assist or at least not interfere with the action of our homoeopathic remedies in checking the progress of the disease or curing the patients."

Of course, applying *Aconite* as recommended by Royal will not interfere with the action of homoeopathic remedies but a transference will take place. By applying *Aconite* the rheumatism will be suppressed and it will go to heart and the patient not cured. I presume that it is only due to that Royal has seen many heart troubles in his practice and that is why in the very beginning of the chapter he gives repeated warnings to watch the heart. Thanks to George Royal for this precaution!

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\* "Kalmia is especially useful when gout or rheumatism shifts from one joint to the heart, especially after external application to the joints. I refer here especially to the application to the joints of substances that are not homoeopathic to the case. If you were giving *Arnica* internally and applying it locally, and if it were the indicated remedy, there would be no danger of metastasis. But if someone were to apply the tincture of *Aconite* to the affected joint there would be danger of the inflammation travelling to some more vital part." Farrington, Harvey: *A Clinical Materia Medica* (Fifth ed.), First Indian edition, XXXVII *Schrophulariaceae digitalis purpurea* (Calcutta, C. Ringer & Co.), pp. 392.