

*A Home Guide  
to Treatment*

**INDIGESTION**

*by*

*DR. P. H. SHARP*

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# INDIGESTION

By

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## PREFACE

POETS may sing of the heart, and Pascal may be correct in stating that "If the nose of Cleopatra had been shorter, the whole face of the earth would have been changed"; nevertheless, broadly speaking, history has been written by Stomachs. Stomachs of kings, stomachs of dictators, and the mass stomach of the ubiquitous man-in-the-street have all affected our destiny time and again. Consequently it is fitting that we should pause and consider our own stomach for a while, if by doing so we may add to our own well-being and that of those around us. Readers with good stomachs may wonder what all this is about, and they are recommended to put the book down in the hope that they will never need it; but for those readers whose stomachs obtrude on their consciousness this book is written in the hope

that it will enable them to put their house in order and enjoy in moderation the good things of life unfettered by pain and apprehension.

Indigestion (or Dyspepsia, to give it its Greek name) gives a sombre tinge to the whole picture of life, and it is surely worth while taking a little trouble, if by doing so we may restore the picture.

What then is the man with the stomach to do? Endure, palliate, or take his stomach for a tour of the doctors—doctors, mark you, with stomachs of their own? Or will he attempt to understand his own stomach and study its individual problems and needs? That, at least, is rational, for though Indigestion is common, its manifestations are highly individual and each case should be considered as an individual problem.

Homœopathy, treating as it does the total symptom-picture of the individual rather than the group, would seem to offer the most logical line of approach to the treatment



of Indigestion and the maintenance of a good stomach, and it is hoped that the sufferer by studying the pictures outlined in this book will be able to find the remedy which suits his case exactly.

Should his interest in homœopathy be stimulated by the results obtained to the point of wanting to know more of this science, it is recommended that he obtain and read *The Homœopathic Vade Mecum of Modern Medicine and Surgery*, by Dr. E. H. Ruddock ; *The Prescriber*, by Dr. J. H. Clarke ; and *A Manual of Homœo-Therapeutics*, by Drs. Neatby and Stonham. Following these books, further reading will be suggested by experience.

Two hints may be added, finally, regarding the remedies and their uses :

- (1) The remedy should be taken until the patient is assured that improvement has definitely begun ; the remedy should then be discontinued until symptoms re-appear.

(2) Remedies should always be obtained from a purely homœopathic chemist who understands their properties, potencies and preparation exactly.

Grateful acknowledgments are due to Messrs. Bayer Products Ltd. for the figures given in the table of food values in Chapter II.



## DIGESTION

WHEN we send a watch to be repaired, we reasonably assume that the person to whom we entrust it knows the function of a watch and how it carries out that function. Similarly, if we are to understand and treat the complaints which come under the heading of Indigestion, we must begin by obtaining a clear picture of the purposes and processes of digestion. To the man with the healthy stomach, not much given to introspection—and people with healthy stomachs are rarely introspective—the whole affair is fairly simple; at certain times of the day he experiences a not unpleasant sensation known as “appetite” which tells him that it is time to refresh the body; further gustatory sensations aided by experience tell him what sort of food and drink he would enjoy, and having obtained and consumed these he passes on his way rejoicing,

without giving further thought to the matter until these sensations recur. It is neither necessary nor perhaps desirable that this fortunate individual should know more, but quite a lot of things are happening of which he is unaware, since the more efficiently the human organism functions, the less one is aware of its functioning.

Digestion, in brief, is the hand-  
maiden of metabolism and metabolism consists of the building up of the body, its repair, and the removal of its waste products.

The healthy body is a machine in constant need of running repairs, cells are wearing out and being replaced all the time without interference with the smooth working of the machine. The materials for this repair must be "according to specification", and the function of the digestive system is to take in the raw material and, having "processed" it, pass it on to the parts of the body in the desired form.

The raw materials which the body

requires are proteins, fats, carbohydrates, certain mineral salts and water. In addition, certain vitamins or accessory food factors are necessary for proper growth and proper utilization of the food.

These vitamins are present in varying amounts in most food substances and if the diet is good and balanced they are better obtained in this way than from the chemists' shop.

The water and salts pass through the system unchanged by digestion and such as the body needs are absorbed into the system unaltered.

Proteins, fats and carbohydrates all need considerable modification, however, before they can be used for their special purposes and the digestive process which begins in the mouth finishes in the small intestine after which the waste is passed on to the large intestine where the water is extracted from it before it is voided. It has been said that digestion begins directly the food enters the mouth, but it would be truer to say that

it begins before then, since there is a psychological element in good digestion. We have all heard of the sight or thought of a good meal "making one's mouth water", and, gluttonous though it may sound, it is only right that this should be so since this watering of the mouth is the secretion of saliva which is the first of the digestive juices to come into play and its secretion starts the working of the digestive cycle. To walk into the dining-room reading a book and to continue reading during the ingestion of a meal is an insult to the digestive system for which nature duly exacts the cost; it behoves us, then, to become "meal-minded" some minutes before commencing a meal, and to remain so during the meal.

The physical and chemical processes of digestion start in the mouth where the food is masticated and mixed with saliva, the first of the juices acting on the food. The saliva contains an enzyme or ferment called ptyalin which is concerned with

the pre-digestion of the starchy elements of the food, and it continues to act after the food has passed into the stomach.

When the food arrives in the stomach it is acted on by the hydrochloric acid which is normally present in a strength of 0.4 per cent., and by an enzyme called pepsin. The hydrochloric acid continues the conversion of the starchy foods, commenced by the ptyalin of the saliva, into absorbable sugar and swells up the proteins into a jelly-like mass which is acted on by the pepsin which will only act in an acid medium.

There is also an anti-anæmic "Intrinsic Factor" in the gastric juice which reacts with certain food constituents to form a substance essential to the production of red blood corpuscles.

When digestion in the stomach is complete the altered mass is passed on to the duodenum and small intestines where it is acted on by the pancreatic juice, the bile and the succus entericus.

The pancreatic juice contains three principal ferments: *trypsin*, which continues the digestion of the proteins, turning them into amino-acids; *lipase*, by which the neutral fats are converted into "fatty acids"; and *amylase* which continues the sugar-conversion of the starches. The bile aids in the absorption of the hydrolyzed fats which is only possible in the presence of bile salts and an enzyme found in the succus entericus called phosphatase. Other enzymes found in the succus entericus are lipase, protease, nuclease, enterokinase and erepsin, which complete the conversion of the foodstuffs into substances which can be absorbed and used by the body.

All the digestible carbohydrates are reduced to monosaccharides and through the blood vessels of the intestinal villi pass into the portal blood stream, and the proteins having been converted to amino-acids similarly pass into the portal blood.

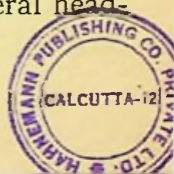
The fats, however, having been converted into fatty acids are



absorbed by the lacteals—special lymph-vessels of the small intestine by which they are conveyed in the form of a milky fluid called “ chyle ” into the thoracic duct which finally empties this fluid into the blood-stream at the junction of the left subclavian and left internal jugular veins.

The many processes of which the foregoing is only a very brief summary, are highly complex and interconnected, and anything which may go wrong with one of these processes reacts detrimentally on most or all of the others; but, on the other hand some of the functions are duplicated, and, provided that the flaw is not too great, the digestive system restores the balance without its possessor being aware that anything untoward has happened.

When, however, the fault becomes so great that a sudden or a continued strain is imposed on the system as a whole, symptoms are evoked which are grouped under the general heading of “ Indigestion ”.



## FOODSTUFFS

WE have considered briefly in the previous chapter the mechanism which the body has set up to deal with the food we ingest, and it follows logically that we must next consider the material we give this mechanism to work on, for here our responsibility begins. An enormous amount of research work has been done during the last fifty years on foodstuffs, and we have a much clearer picture to-day of what our bodies need and to what extent the various foodstuffs supply our needs than we had half a century ago, and this knowledge is particularly useful when we come to consider diets, using the word diet in its narrower sense as meaning what to eat when something has gone wrong with the digestive system. As regards normal digestion, however, the position has not materially altered, and we are merely learning in our minds what

our stomachs knew already ; all those things which have been found by research to be necessary for our physical well-being are present in a normal well-balanced diet, and so long as we do not stray too far from simplicity, nature will correct the few mistakes we make.

A too careful adherence to a dietetic scheme may lead to valetudinarianism, and a valetudinarian from choice soon becomes a valetudinarian from necessity. It should be sufficient for our purpose in this chapter, in which we are regarding food from the view-point of normal digestion to consider the normal needs of the body and how to supply them. To maintain us in health our food must satisfy five cardinal requirements :

- (1) It must be well cooked and palatable. If the appetite is not stimulated, the food will be imperfectly digested.
- (2) It must have a calorie value sufficient to meet our requirements. An average man needs

3,400 calories ; more is necessary for one performing hard physical labour.

- (3) It must contain protein, fats and carbohydrates. There should be at least 4 ozs. of fats and 4 ozs. of protein in the daily diet, and, of the protein, half the amount should be animal protein.
- (4) It should contain green vegetables, eggs, and milk to supply the necessary vitamins.
- (5) It should contain the necessary salts, particularly sodium, potassium, calcium and iron chlorides and phosphates.

These five points are the bed-rock of good nutrition and good digestion, and so long as we follow the rules and live simply there will be no need to draw up a balance sheet of food values—Nature will do that for us.

Roughly speaking the balance of protein, fats and carbohydrates is in the ratio of 1 : 1 : 2, but within certain limits they are isodynamically interchangeable, that is to say they can be made to yield the same

amount of energy for a unit of weight, so that some deviation from the above ratio will not necessarily have serious consequences. Milk, which is said to be the perfect food-stuff contains protein<sup>a</sup>fats and carbohydrates in the ratio of 1 : 1 : 1.5, but it must be remembered that it is primarily intended for the growing body. The mineral salts we obtain for the most part from vegetables and the necessary vitamins are contained in varying amounts in practically all we eat.

The cult of the vitamin is very much to the fore nowadays, and while a great deal of useful work is being done on the identification and purposes of the various vitamins, a good deal of unmitigated nonsense is also being talked about them. Vitamins, as has already been indicated, are best taken in the raw and not in the form of tablets or pills. If the five cardinal points given above are adhered to, and a little fresh fruit (apples in particular) is added to the diet we may

be assured of an adequate supply of all the necessary vitamins for ordinary purposes.

We have dealt so far with the substances contained in our foodstuffs : proteins, fats, carbo-hydrates, vitamins and salts, and it may be as well to consider briefly the foodstuffs themselves, having regard to their proportional contents of protein, fats and carbo-hydrates, and to their calorie value. This may best be expressed in the form of a table (see p. 13) and a few examples from each of the classes of foodstuffs: meats, cereals, vegetables, fruits, should enable us to see how our meals can be made to supply our needs in the right proportion.

It will be noted from the table that we get the high calorie values from the meats, fats, cereals and dried fruits, while the vegetables and fresh fruits which provide our mineral salts and vitamins have a much lower calorie value. In these foodstuffs there is also a high proportion of water, but in addition to

Foodstuff.	Grams per oz. of foodstuff.			Calories per oz.
	Protein.	Fats.	Carbo- hydrates.	
Beef .. ..	6.3	8.0	0.3	101
Mutton ..	7.0	6.4	0.3	90
Bacon .. ..	4.0	18.5	—	181
White Bread	2.6	0.3	15.0	76
Brown Bread	2.5	0.5	14.0	75
Milk .. ..	1.0	1.0	1.5	20
Cream .. ..	1.0	20.0	1.0	190
Butter .. ..	0.3	24.0	—	220
Hard Cheese..	8.0	10.0	1.0	134
Granulated Sugar .. ..	—	—	29.0	116
Barley .. ..	3.0	0.6	20.7	102
Beans .. ..	7.0	0.7	16.0	97
Cornflour ..	1.8	1.2	20.0	104
Oatmeal .. ..	4.5	2.0	20.0	116
Rice .. ..	2.3	0.1	21.0	102
Wheat Flour	4.0	1.0	20.0	105
Cabbage .. ..	0.4	0.1	1.3	9
Cauliflower ..	0.5	0.2	1.4	9
Beetroot .. ..	0.4	—	3.0	14
Carrot .. ..	0.3	—	3.0	13
Potato .. ..	0.6	—	5.0	24
Apples .. ..	0.1	0.2	4.0	18
Bananas .. ..	0.4	0.2	6.0	29
Dates (dried)	0.6	0.8	22.3	101
Oranges .. ..	0.2	—	3.0	15
Plums .. ..	0.3	0.1	6.0	25
Raisins .. ..	0.8	0.9	22.0	100

this the body will need at least an added pint of water a day, and in everyday life we supply this need almost without thinking; it is only when campaigning that one

consciously realizes the need of water and misses it acutely if the supply is insufficient. In this and the preceding chapter we have considered very briefly the bare outlines of digestion and the foodstuffs, and it will next be our task to consider how we may apply these facts with a modicum of pleasure and without ensuing ill consequences.

## DO'S AND DON'TS OF EATING AND DRINKING

ON no other question is it possible to obtain so many conflicting statements as on that of eating and drinking. Whether the earnest enquirer seeks his knowledge from books or from the doctors the result is the same; what one praises the other damns, and vice versa, with the result that the unfortunate layman is apt to follow first one fad and then another in the hope of finding somewhere a dietary which will meet his needs. If we realize



that books are written, not by disembodied spirits, but by human beings with stomachs of their own, the task of sorting out the grain from the chaff becomes much easier. The pleasure of saying "don't" is one of the commonest failings of humanity, and doctors are by no means immune from it, and it follows that if a patient were able to appreciate the state of his doctor's mind (and stomach) at the time of receiving dietary advice, he would be the better able to evaluate that advice.

At the risk of introducing a personal note into this book, it should be stated that the author is the possessor of an averagely normal digestive system which exacts the normal penalty for indiscretions; it will still be necessary for the reader to scrutinize the do's and don'ts carefully, but he is hereby given some sort of standard by which to assess them. Let us then enunciate the simple rules which will enable us to maintain a normal digestive

system at its optimum pitch ; they are few and commonsense, and so long as we keep within their broad confines, nature can be relied upon to correct most of our mistakes. The first rule to be observed on approaching a meal is to be in a fit state, bodily and mentally, to deal with it. We should begin to think of, and be interested in a meal a few minutes before sitting down to it, and that interest should be maintained during the meal. Conversation should be non-contentious and should not absorb too much of our interest, and, of course, we should not read during meals, even if the meal be taken in solitude.

From the physical point of view we should not approach a meal in a state of bodily exhaustion, and, if unavoidably, we do approach it while physically tired, the meal taken should be correspondingly light. Adequate time should be devoted to the meal, and all food should be properly masticated before being swallowed, and it is preferable

to imbibe fluids before or after, rather than during a meal.

Heavy physical work immediately after a meal is even, more injurious than before a meal, since the stomach is making the greatest demands on the body and any great physical demands elsewhere must be, to a certain extent, at the expense of the stomach.

We should eat at regular intervals, and neither too much nor too often. Three meals a day, morning, noon and evening, are the ideal, taken at approximately the same time each day, and "elevenses", snacks and the like are better omitted as they interfere with the digestion of the previous meal or with the necessary post-digestive rest period. Social custom has imposed on many of us the event known as afternoon tea, and if this must be included in our scheme of things it would be advisable to stress the social rather than the refreshment aspect of it.

Many people, especially in recent years, have adopted with benefit the

introduction into the week of a *jour maigre*, not exactly a fast day, but rather a day on which they keep their food down to a bare minimum ; if this plan is adopted, the day chosen should preferably be one on which less physical work is to be done.

Food, whether solid or liquid, should not be persistently taken too hot or too cold ; it is natural to want a very hot drink when we are very cold, and to want a cold drink or an ice when we are overheated, but the constant practice of taking things very hot or very cold will impair in time even the best of digestions.

There is one last point to be considered on the positive side of digestion, and that is elimination. We cannot expect to go on putting food into our body and enjoying and digesting it if we are not getting rid of our waste products at a correspondingly adequate rate. It should be our aim to secure at least two adequate movements of the bowels each day, morning and night. Sir Arbuthnot Lane said that three

should be the minimum, stressing that the retention of poisons in the system was a predisposing cause of cancer; the choice lies with the reader, but two motions a day is generally regarded as adequate.

We now come to the "don'ts" of eating and drinking, and at once find ourselves on a veritable battleground. "Moderation in all things" is an excellent motto adopted by rationalists and reformers alike, but the latter tend to leave it completely behind when they come to the question of prohibitions. Let us then examine these "don'ts" and endeavour to soften their asperities a little, while retaining any useful principles which they may embody. At the top of the list comes Alcohol, or the "Demon Rum" as the missionaries used to call it in spite of the fact that Trade Gin was the usual poison purveyed to the unsuspecting native. "Alcohol is death," cries the reformer, "Alcohol is a food," retorts the indulger. The moderate man says that he likes

an occasional drink and finds that it does him no harm ; he may be deceived in the latter claim, but his point of view is entitled to some consideration.

Taken slowly and in moderation, alcohol is mostly oxidized by the body and excreted as carbon dioxide and water, and to that extent only it is a food, although not a very good food. About 2 per cent. of it, however, is excreted unaltered by the lungs and kidneys, and this percentage is increased if the intake and rate of consumption is increased, and to that extent at least it is injurious. Moreover, if taken in the form of spirits without considerable dilution it tends to injure the secretory lining of the stomach. These are the bald physiological facts to which may be added the psychological observation that there are individuals who should never be trusted with alcohol, just as there are others who appear to come to no particular harm from it. From the digestive point of view it is obvious

that too much alcohol taken too strong and at the wrong times is likely to be a hindrance rather than an aid to digestion, whilst as an appetizer it should be approached with considerable caution : the substitution of the modern cocktail for the simpler French aperitif being a move in the wrong direction. While wine with a meal may with some justification be regarded as an adjuvant, it should be stressed that its aid to digestion is almost entirely psychological, and we are driven to the conclusion that alcohol in one form or another may add to the pleasures of the table, but that it is neither necessary nor directly helpful to the digestion, and may in many cases be the cause of indigestion.

Next on the list of taboos come tea and coffee. The somewhat extreme statement is often made that tea is as great a cause of indigestion as alcohol, and it may be well to consider this statement with care. Taken in excess, both tea and alcohol adversely affect the

digestion through the nervous system, but the tendency and inducements to the excessive consumption of alcohol are much greater than those leading to excessive tea drinking, and there is a greater tendency towards making the drink too strong in the case of alcohol than in the case of tea. The exhilarating effects of tea and coffee are due to their containing the drug caffeine, which is regarded by some as the only true psychical stimulant, but it is a stimulant which does not call for the proverbial "hair of the dog", when the effects have passed off. The chief victims of tea dyspepsia are those people who keep the pot on the hob and are always ready for a cup; to them, tea is more of a decoction than an infusion, and they consume with their caffeine an undue amount of tannin which has an astringent effect on the mucous membrane of the stomach. On the whole, however, very many people derive a great deal of pleasure without ill-effects from their consumption of tea or coffee,



and we must conclude that the principal danger lies in taking the beverage too strong and too often. Cases there are, undoubtedly, of people who cannot take tea or coffee without being made sleepless or nervy or dyspeptic, but such people are surely well aware of the fact, and should scarcely need a doctor to tell them to leave it alone. Admittedly there is such a thing as the "tea habit", but it is not nearly so difficult to break as the alcohol habit, nor are the deprivation symptoms so severe.

A point may be mentioned here in regard to the drinking of tea, particularly strong tea, with meals; if taken with a meat meal it is apt to render the meat less readily susceptible to the action of the digestive juices, and some surgeons think that an attack of appendicitis may be caused in this way.

Next let us consider tobacco, which has nearly as many opponents as the "Demon Rum". One of the arguments raised against it is that our

first attempt to smoke is attended, in most cases, by dyspepsia and sickness ; but so also, in many cases, are our early attempts at breast feeding, and in neither case is the statement an argument at all. Excessive smoking, particularly of strong tobacco and at the wrong times certainly impairs appetite, and, if persisted in, will cause dyspepsia, on the other hand many people find that a smoke after a meal aids digestion, possibly on account of the leisurely conditions in which it is undertaken. It may be noted that many tea-dyspeptics and tobacco-dyspeptics are fundamentally nervous dyspeptics who add to their dyspepsia by excessive smoking and the drinking of strong tea, and journalists provide a fair proportion of this type. In the pleasures of their robust attacks on the consumption of alcohol, tea and tobacco, the zealots tend to overlook, somewhat, one cause of indigestion in this country, namely, the excessive consumption of vinegar. A witty

Frenchman once described England as a country with two hundred religions, but only one sauce; provided that the religions and the sauce were pure there would be no particular harm done, but unfortunately there is a tendency for us to lace our meals too liberally with sauces and relishes from the bottle, most of which contain a fair amount of vinegar. Now, nature provides us with the necessary amount of free hydrochloric acid in the gastric juice to assist digestion and the continual adding of an excessive amount of another acid in our diet is not going to help matters in the long run.

Looking at our list of "don'ts" from the viewpoint of the normal eupeptic who wishes to maintain and enjoy good digestion it may be said that the principal dangers of alcohol, tea and tobacco, and even vinegar, lie in over-indulgence, but there are also certain articles of diet which, in any quantity, disagree with certain individuals who are said to be "allergic" to them, and

moreover, the use of aluminium cooking utensils seem to produce quite severe symptoms in some people whilst apparently producing none in others. It is possible that the warnings in this chapter have been somewhat understressed, but the careful reader should be as capable of appreciating a warning in small type as one in capitals. If, then, to the five cardinal rules mentioned in the chapter on food-stuffs, we add the following :

- (a) Co-ordinate exercise and diet ;
- (b) Co-ordinate appetite and diet ;
- (c) Appoint and keep regular meal times ;
- (d) Avoid over-indulgence ;
- (e) Avoid unsuitable articles of diet ;

we should be able, given normal digestion to start with, to maintain good digestion with reasonable enjoyment and without too many irksome restraints.

## INDIGESTION

It should be clear from the preceding chapter that it is possible to start with a good normal digestion, and, by persistently working in the wrong direction, as by over-indulgences or by eating the wrong food or by eating the right food in excess, to ruin, or at least impair, that digestion ; and when we come to discuss treatment such cases will be taken into account. Plainly, they should be the easier to deal with in that they started with a normal system, and also in that it is easily possible to carry out the first principle of all medical treatment, namely, removing the cause of the trouble.

There are, however, digestions which go wrong without being abused and such cases are more numerous and generally more difficult to deal with than the above.

When we consider the many intricate processes which go to the

completion of the function of digestion, it is plain that any flaw in any one of these interlinked processes must react adversely on the whole mechanism, and, if serious enough, must bring the matter to our consciousness; in fact the wonder is that so much is remedied silently by nature without our being aware of it or suffering symptoms.

From the intake of the food in the mouth to its elimination by the bowels, a variety of things may go wrong. Dealing briefly with these two extremes first, it is clear that if the food is not properly masticated in the mouth owing to decayed teeth or other causes the food will arrive in the stomach in a state of relative unpreparedness for the action of the gastric juice, whereas, if elimination is tardy or otherwise faulty the stimulus for further ingestion of food is impaired.

If we now consider the intermediate and vastly more important organs the stomach and small intestine, we realize that any flaw in

their position, their lining or musculature, their secretions, their nerves or their blood-supply may very gravely impair the efficient carrying out of their functions. It may be well to consider these organs under the one word "stomach" since this word is nowadays used in place of the older and more comprehensive word "belly", and when we speak of a pain in the stomach, we are not locating the pain with minute particularity, and further if the stomach proper is carrying out its functions in a satisfactory manner, the intestines are the less apt to cause trouble. We may, for the sake of compactness, consider the ills of the stomach under three main headings: Mechanical, Secretory and Nervous, since we are at the moment considering causes rather than symptoms, although it will be evident when we come to consider actual cases of indigestion that many of them may come under more than one of these headings.

(I) *From Mechanical Causes.* The rhythm of the digestion may be

retarded and upset by a mechanical obstruction such as a sharp angle being formed by the position of the gut, or by the stomach assuming a hanging position like the letter "J", or the muscular wall may be weak and fail to contract adequately, and the food will be delayed in the stomach long after it should have been digested and passed on. The anæmic patient in particular is liable to have this flabby stomach with its consequent Atonic Dyspepsia. As a rule there is not a great deal of pain, but there is very little appetite and practically no thirst. Such pain as is experienced is due, as a rule, to flatulence.

(2) *From Secretory Causes.* The principal secretory defects are a deficiency of pepsin, an excess of hydrochloric acid or a deficiency of hydrochloric acid. The first two of these are often loosely grouped under the term "Acid Dyspepsia" on account of the symptoms evoked, namely, acid eructations and gastric discomfort leading to burning pains



an hour or two after food. Deficiency of hydrochloric acid is usually a sequel of Atonic Dyspepsia and strays into Category 1. Further, an alteration of bile secretion will lead to faulty digestion of the fats with its attendant symptoms of biliousness.

(3) *From Nervous Causes.* In a sense this category at least in part, may be held to embrace the two preceding categories since the nervous system regulates the secretion of digestive juices and also the muscular movements of the stomach, and in this sense Atonic Dyspepsia and Acid Dyspepsia might be regarded as varieties of Nervous Dyspepsia ; but here we are considering those cases in which, owing to a neurotic or hysterical condition the process of digestion is not carried out with that smooth unawareness which is the characteristic of normal digestion. The stomach performs its functions and there is no gross defect, but the performance seems exaggerated, and is accompanied by pain and flatulence and occasional vomiting. A fourth

category is sometimes made of gastric ills arising from constitutional causes, but, insofar as we are considering causation, such may be regarded as producing their effects through the nervous system, although they must be taken into account when we come to the question of treatment.

Even in the above broad classification of the ills of the stomach from the point of view of causation, it will be seen how difficult it is to assign a case to a particular category, and there are corresponding difficulties in all the other systems of classification, which is not remarkable when we consider how intricate and interacting are the many processes involved in digestion. A rigid classification generally leads to rigidity of treatment and that is probably why so many uncured dyspeptics wend their weary way toiling, sorrowing but certainly not rejoicing. In this and the preceding chapters we have considered very briefly the mechanism and functions of digestion, the material it works upon and the

channels through which troubles may arise. In discussing the treatment of these ills, it will be convenient for our purposes to group them under certain headings for convenience, but these groupings must not be regarded as water-tight compartments; indeed the joy and hope of the homœopathic approach to the treatment of indigestion is that we can get right away from categories and classifications, which are of use to us only in understanding the framework of the problem with which we are dealing, and choose our remedy according to the individual make-up and individual symptoms of the patient with whom we are dealing.

## DIETS

WHETHER we are dealing with a digestive system which has been abused, or with a weak stomach or a nervous stomach or a stomach suffering from secretory abnormalities, it

is too much to expect of any system of medical treatment that it will produce its best effect, while the patient continues to eat and drink those things which contribute to the trouble. It will be no confession of failure, then, if we insist that the patient adopts some form of diet which will give his digestive system less and easier work to do while we endeavour with the appropriately chosen remedy to get the system working smoothly and at its optimum; and then later, if we have kept our promise, the patient may be able so to calculate his dietary indiscretions as to be able to indulge them with the minimum of discomfort, having, we hope, learned some cautions and do's and don'ts during his cure.

It should be obvious that the optimum performance of one man's digestive system is not necessarily as good as that of another, but so long as it is his optimum he will be relatively free of symptoms of indigestion.

The rules of diet consist as one might suppose of a great many don'ts and relatively few do's, and the variation in the food ingested is more a variation of form than of kind, since like anyone else our dyspeptic still needs his fats, carbohydrates, proteins, mineral salts and vitamins.

As we have already stated in Chapter II, the balance of proteins, fats and carbohydrates is in the ratio of 1 : 1 : 2, but as within limits they are isodynamically interchangeable, it will not matter greatly if we upset this balance a little in our endeavours to give the stomach an easier job of work. What is much more important is the form in which we present these things to the stomach, and that, as will be seen later, is the function of the several excellent invalid foods which are marketed to-day.

But let us first consider our list of don'ts, particularly as they apply to the intake of fats, proteins and carbohydrates by those patients who

are not reduced to the strictest of invalid diets.

<sup>c</sup> **FATS.** The first rule for many dyspeptics, particularly those with a gouty tendency is to keep away from the frying pan, and in many cases, so long as they interpret this instruction in its broadest sense and avoid rich and greasy dishes little more is necessary to improve their condition. The easy digestion of animal fats is a gift which not every stomach possesses ; moreover, it is a gift which may even be temporarily lost, as witness the number of people who, holidaying in Ireland after the war, have found themselves unable to digest the increased fat in their diet.

As one gets older and the stomach gets more enfeebled, this inability to tolerate much fat increases. In this connection it is interesting to note that "Côtelettes Maintenon" (mutton chops stripped of their fat) were originally prepared by Mme de Maintenon for Louis XIV when, in his old age, he was unable to digest fat.

**PROTEINS.** The dyspeptic should tend to adjust his balance of animal and vegetable proteins in favour of the latter. Young French beans and peas provide a high proportion of protein and are easily digested by most people. Of the meats, lamb and mutton are easier to digest than beef, and the fat may be more easily stripped from them. In the case of beef there is more fat in the interstices of the meat. Some confusion is sometimes caused by saying that white meats are more easily digested than red meats; while this is true of fowl it is certainly not true as regards pork. Meats are most easily digested when stewed, and this also applies to the other ingredients of the stew; the fat should be skimmed from the stew before serving. Plain roast meats are preferable to more elaborately prepared dishes from the digestive point of view.

**CARBOHYDRATES.** Most of our carbohydrate intake is derived from bread and potatoes and it may be said at once that potatoes are not

easily digested by the dyspeptic, and that bread is not nearly so digestible as is commonly thought. Bread is better tolerated by the weak stomach in the form of dry toast, and, if this is not tolerated, plain biscuits made of flour and water may be substituted. The mineral salts and vitamins necessary are found in all diets, invalid or otherwise, and need no alteration to render them readily acceptable to the system.

So much then, regarding the limitations and modifications necessary to render the ordinary articles of diet more easily acceptable to the weak stomach, to which may be added a few broad generalities which may assist in recovery :

(1) The dyspeptic should take his meals at regular intervals and they should be sufficient without being excessive. Should he find the necessary quantity of food too much for a meal, he should take small feeds at shorter intervals while maintaining the regularity of the feeds.

(2) He should avoid food which



is bulky or may become bulky after ingestion, or which forms gas ; bread is an example of the first two, and cabbage of all three.

(3) Tea, if taken, should be very weak, and coffee should be avoided.

(4) Milk should have the cream removed before being taken. Many dyspeptics derived benefit from taking sour milk or yoghurt, particularly those with a tendency to rheumatism. The presence in these of the lactic acid bacillus and the bacillus Bulgaricus are of advantage in keeping down the growth of other and more harmful bacteria. Others who do not take sour milk take tablets containing a Tyndalized preparation of these bacteria—of these preparations "Lactéol" is probably the best known.

(5) Highly spiced foods and strong condiments should be avoided.

It may be necessary in severe cases, however, to take the patient off all solid food for a time and put him on a fluid diet which gives him his bodily requirements in something

approximating to the correct ratio. Milk is the food which maintains this ratio most closely, and it also contains the necessary mineral salts and vitamins, but the carbohydrate content is not sufficiently high for the adult and it is usual to give the patient one of several excellent prepared invalid foods which are on the market, and make it up with hot milk. As examples we may mention Neave's Food, Mellin's Food and Allenbury's Diet; there are several other excellent invalid foods, and individual patients may find one more suited to their needs than another. In all these foods, by one means or another, the starch granules are to a great extent broken down and presented as soluble dextrins and the stomach's task is thus made easier.

Later, when the patient is improving he may take his animal protein in the form of beef tea which if possible, should be home-prepared, or in the form of eggs if he can tolerate them.

At this stage we may begin to consider dealing with any contributory constitutional causes of the dyspepsia, such as gout or rheumatism. Some patients derive benefit from one or other of the many spa waters which vary quite widely in their constitution, but on the whole homœopathic treatment may be relied upon to deal with these complaints without much assistance.

Having then prepared the way for our treatment by making the work performed by the stomach easier, we must now consider the means by which we may enable the patient to resume a more normal, but not indiscreet diet free from the fear that his pains will return as soon as he does so.

It may be as well, however, before discussing our homœopathic approach to the pains and problems of the individual patient, to outline briefly what the other school of medicine has to offer to the dyspeptic. In the case of indigestion due to overloading the stomach, or to the

ingestion of unsuitable foods, the general treatment consists of unloading the system by means of emetics or purgatives or both and then giving the stomach a rest before normal diet is resumed. While it is obviously commonsense to rid the system of the cause of the trouble, a good deal of pain and discomfort is endured in the process which might be avoided by homœopathic treatment.

In the case of the weak or atonic stomach the procedure is to put the patient on a more or less strict diet of the kind briefly outlined in this chapter and cautiously try to improve the system with tonics. This is generally an almost endless form of treatment, and, moreover, it is extremely difficult to find a tonic which will strengthen the system and at the same time prove acceptable to the enfeebled stomach.

As regards the disordered stomach, that is the stomach whose secretions have gone wrong, the treatment consists of giving pepsin in cases

where this is not secreted in sufficient quantities ; giving small doses of dilute hydrochloric acid where the stomach's output of acid is too small ; or giving alkalis in cases where the stomach secretes too much acid.

There are objections to all three of these methods of treatment ; the administration of pepsin hardly encourages the stomach to increase its output, and the same applies to the administration of dilute acid, while the taking of alkalis to neutralize the excessive stomach acid provokes the stomach into providing yet more acid, the effect of which is readily noticeable when the alkalis are discontinued. None the less, this last form of treatment is the one most commonly adopted, since excess of acid is the most common of the secretory disorders of the stomach, and the daily consumption of ant-acid tablets must run into many millions ; as a palliative most of them are excellent, but for the treatment of a condition of any duration we must look farther afield.

Lastly, the general treatment of cases of nervous dyspepsia may be summed up in the phrase "Treat the cause." This is an excellent precept with which no fault can be found; the difficulty generally lies in first finding the cause and then treating it satisfactorily. Meanwhile, sedatives, mainly bromides, are administered.

While it is admitted that the right to criticize any form of treatment depends on the ability to produce better results, it should be clear that the individual homœopathic approach to the patient's own peculiar chain of symptoms cuts away many of the difficulties inherent in the treatment of so complex a mechanism as the digestive system.

## THE ABUSED STOMACH

It is proposed in these next four chapters to deal with the treatment of dyspepsia under four separate headings, namely: *The Abused Stomach*, that is the good stomach

which has been overloaded, or loaded with the wrong kind of food ; *the Weak Stomach*, that is the anæmic stomach of poor musculature, whose response to food is faulty ; *the Disordered Stomach*, that is the stomach whose secretions have gone wrong ; and lastly, *the Nervous Stomach*, under which heading, will be included those cases in which nervous symptoms precede, predominate or accompany the other symptoms of dyspepsia. Those cases in which constitutional diseases such as gout or rheumatism affect the stomach through the nervous system are mentioned under the appropriate remedies. It will be evident at once that this division of the subject is an artificial one, since it is possible to abuse a weak stomach as well as a good one, and the secretions may be upset in a weak stomach or in a nervous stomach. It is, however, as convenient a classification as any and will enable the patient, who of all people will be under no illusions as to which category his stomach

comes into, to choose his remedy the more exactly. As the division of the subject into compartments is arbitrary, and the boundaries of these compartments are ill-defined, so it will be found that some of the remedies stray from one compartment to another and the sufferer who finds his remedy under one heading should read it up under any other heading under which it may be placed and finally look it up in the *Materia Medica* at the end of the book so as to obtain an overall picture of the scope of the remedy. In this chapter on *The Abused Stomach* we are dealing with the smallest of these, four divisions and also the most clearly defined, since everyone knows when he has eaten too much or too unwisely. Some of the remedies mentioned will be discussed in subsequent chapters and some repetition of symptoms is unavoidable, but it is proposed to stress here those symptoms pointing to a sudden and violent upset of the digestive system.



The remedies to be discussed are *Nux vomica*, *Arsenicum*, *Pulsatilla*, *Kali bichromicum*, *Antimonium crudum*, *Antimonium tartaricum*, *Mercurius*, and *Phosphorus*.

A rough differentiation between these remedies is apparent at the start in that the cause of the gastric upset tends roughly to indicate the appropriate remedy. In the case of *Nux vomica*, cheese or eggs may be the cause; in the case of *Pulsatilla*, fat is to blame; while *Arsenicum* is the remedy par excellence for ptomaine poisoning and gastric upsets caused by eating unripe fruits and vegetables. *Phosphorus* suits those cases where cured fish such as kippers and smoked salmon are the cause of the disturbance and *Antimonium crudum* suits plain cases of over-eating.

To turn to the liquid side of the picture, *Mercurius* suits the over-indulger in spirits; *Kali bichromicum* suits the heavy beer drinker; while *Antimonium tartaricum* suits the tremulous drunkard who takes

everything which comes his way and vomits his excess.

° Now let us consider these remedies individually and try to form a picture of the type of case each will fit.

*Nux vomica.* Strictly this remedy should come under all four headings since it affects both the muscular tone and the secretions of the stomach, and it must not be overlooked by the patient with the weak or the disordered stomach in his search for a remedy. It is dealt with under the present heading and in the chapter on the "Nervous Stomach" as it fits so well the picture of the highly-strung brain-worker who is overdoing things both as regards his work and the pleasures of the table. Food and drink taste normal to this patient; the pains and disturbances come on about half an hour after meals. Nausea, retching and sometimes slight sour vomiting are present; leaving a sour bitter or metallic taste. There is waterbrash, and all the symptoms

are worse in the morning and after dinner.

There is an aversion to food, and eggs, cheese and bulky foods disagree. There is a lot of flatulent colic high up in the abdomen, and griping constipation.

Dose: One pill of 6c strength every hour until improved.

*Arsenicum.* This is particularly suitable for acute inflammation, irritative dyspepsias, and is the most clearly indicated remedy for ptomaine poisoning. A very prominent feature calling for this remedy is violent *burning pain relieved by heat.*

There is great anxiety restlessness and prostration, and the patient is constantly wanting small sips of cold water which disagree with him.

There is violent colic which comes on in spasms and causes the patient to writhe with pain, and the stomach is sensitive to the slightest touch. Black stools and the vomiting of dark blood are sometimes a feature. This remedy is suitable for the

knife-like colic which follows the eating of unripe fruit.

• Dose : One pill of ʳ6c strength every half hour until improved.

*Pulsatilla*. Here the pain is less, but the feeling of sickness is greater, especially after food. There is an aversion to fats, and fats and rich food disagree, and sometimes there is a craving for lemon drinks, but on the whole the patient is not thirsty. A striking feature is the foul, putrid taste in the mouth. There is flatulent colic of the rumbling type, and a feeling as though the food had lodged high up under the ribs.

There is a feeling of fullness and weight in the stomach one or two hours after food, which is relieved for a short time by eating. As in the case of *Arsenicum*, cold drinks disagree.

The tongue is white and furred, and there is heartburn and water-brash and eructations tasting of what has been previously eaten.

Dose : One pill of 6c strength half an hour before meals.

*Kali bichromicum.* Suits the dyspepsia of the rather blotchy, big-bellied beer-drinker of whom it is said that you can hear him splash as he walks: He eats a meal with more or less zest and very shortly afterwards he is aware of it as a heavy pressing load in the stomach which does not seem as though it will ever move; digestion seems to have stopped. Some relief is obtained by copious belching. He has nausea, giddiness and a feeling of heat over the body and vomits sour undigested food or a glairy fluid. His preference is for bitter beer and lager beer tends to disagree with him.

Dose: One pill of 6c strength, half an hour before meals.

*Antimonium crudum.* Suits the patient who has been overloading his stomach for some time and has finally gone too far. He now loathes food or regards it with apprehension. He likes pickles and acid things which disagree with him and set up vomiting. He has a thick white coating on his tongue and his

vitality is lowered. He has a facile sentimentality which suggests that his liver is affected.

Dose: One pill of 6c strength, half an hour before meals.

*Antimonium tartaricum.* While it is not necessary to be an enthusiastic drunkard to derive benefit from this remedy there are distinct points which convey the picture of the man who drinks whatever is set before him until he vomits, after which he goes back and has a "settler". There is queasiness of the stomach after meals, which are not much desired. There is trembling of the hands, nausea, headache, night vomiting and morning retching, and violent hiccoughing.

The region of the liver is sensitive to touch and there is a beating, throbbing sensation in the pit of the stomach, and occasional pains and cramps in the stomach. There is restlessness and anxiety and a taste of rotten eggs in the mouth.

Dose: One pill of 6c strength every three hours.

*Mercurius.* Although, strictly speaking, this is an appropriate remedy for the weak stomach, and will be dealt with in the next chapter, it is dealt with here as being suitable for the dyspepsia of the patient who is in process of ruining a good digestion by drinking spirits. There is nausea, vertigo and a feeling of heat and headache. There is often a sickly, sweetish taste at the back of the mouth. The stomach feels full and seems to hang heavy even after light, easily digested food.

Both stomach and liver regions are sensitive to the touch and the tongue is moist, yellow and furred, and there is a tendency to colic from cold.

Dose: One pill of 6c strength every three hours.

*Phosphorus.* This is also a remedy of the weak stomach, but is introduced here because it is often appropriate to those sudden gastric upsets which sometimes arise from the consumption of cured fish such as herrings, bloaters and smoked salmon, particularly when these

upsets are accompanied by painless diarrhoea. Sometimes the patient vomits almost as soon as the food reaches the stomach. There is a craving for cold food and drink which are tolerated until they get warm, when they are vomited. The pain in the stomach is of a burning gnawing type, but is not relieved by heat, and there is often a gone feeling in the stomach which spreads to the intestines. The vomiting is apt to be easy and without nausea.

Dose: One pill of 12c strength every three hours.

## THE WEAK STOMACH

BEFORE discussing the weak stomach and the remedies appropriate to its treatment, it may be as well to re-emphasize our distinction between this type of stomach and the disordered stomach which is the subject of the next chapter. The distinction is, to a certain extent artificial, and is employed mainly to enable the



patient more easily to commence the search for the appropriate remedy for his condition.

It will be remembered that under the heading of the disordered stomach it is proposed to deal with those cases in which the secretions of the stomach are at fault in one way or another, and it will be at once apparent that the secretions can hardly be expected to be normal in the weak stomach. When, however, we come to deal with the disordered stomach we shall be discussing those forms of dyspepsia in which the faulty secretions are the principal, rather than the secondary causes of the trouble. In the case of the weak stomach with which we are now dealing it is possible to conjure up a fairly clear picture of the general type of patient who comes under this heading. In the extreme case we see a thin, poorly nourished anæmic-looking person whose stomach is the cause of all his troubles, the centre of his universe and almost the sole topic of his conversation.

The musculature of his stomach is poor and lacks tone, and the stomach tends to hang in the form of a letter "J" and retain its contents too long, the secretory output is apt to be below par and the general picture is of an organ which is being given a task beyond its strength to perform. While it is possible for such a stomach to secrete excess of acid, it is more probable that the symptoms of acidity in the weak stomach are due in the main to the retention of the stomach contents beyond the normal time. This, then, is the picture of the chronic dyspeptic with the weak stomach who not only buys the chemist's wares, but who practically dines at the chemist's as well, and is relatively satisfied if he can keep his body going on his uninteresting diets without suffering excruciating pains into the bargain. The general lines of treatment: diets, palliatives and tonics, make things a little easier for him, but rarely seem to effect a cure, and if homœopathy can offer him only a little

more he will be disproportionately grateful. Fortunately, it can generally offer him a lot more and even bring him to the stage, where he can with due caution eat normal things without undue apprehension. Palliatives for pain and discomfort such a patient must have, but the homœopathic palliative is also the homœopathic cure and the two functions are being carried on side by side, and if the patient will choose his remedy carefully and with due regard to those individual symptoms and differences which distinguish his case from the common type, he will reap a rich reward.

The remedies to be discussed here are: *Alumina*, *Bryonia*, *Ipecacuanha*, *Carbo vegetabilis*, *Sepia*, *Phosphorus*, *Sulphur*, *Colchicum*, *China*, *Abies nigra*, *Thuja*, *Platinum*, *Mercurius* and *Hydrastis*.

*Alumina*. The characteristics indicating the use of this remedy are nausea with chilliness and faintness, heartburn, some bitter eructations, especially after eating potatoes, and

mucous vomiting. The symptoms are worse in the evenings and better after breakfast.

The abdomen feels as though it is hanging heavily during walking. There is a feeling of constriction in the stomach which extends up to the throat. The pains in the stomach radiate to the chest. The patient likes fruit and green vegetables and dislikes meat. Condiments tend to make the patient cough. The mouth feels sore, and small ulcers occur. Such patients should take particular care to avoid the use of aluminium cooking utensils.

Dose: One pill of 30c strength daily.

*Bryonia.* Here there is pressure of food after eating, and the food lies like a stone in the pit of the stomach. There is headache and thirst for long drinks of water at intervals. The pain in the stomach travels through to the back or under one or other shoulder-blade, and is worse for motion and better for quiet and lying down.

Vomiting, which tends to occur immediately after eating, is of solids rather than of liquids and is bitter.

There is pain over the liver which gets worse on deep inspiration, and soreness in the pit of the stomach on coughing.

There is constipation with light-coloured stools and the tongue is white and furred. All the pains in this type are worse from movement, and many of the patients are rheumatic.

Dose: One pill of 12c strength half an hour before meals.

*Ipecacuanha.* Two of the most pronounced features here are a profound nausea and a copious flow of saliva. There is vomiting of bile and mucus, but apart from this, the nausea is profound and constant, and is the feature most noticed by the patient.

Distress and a sick feeling in the pit of the stomach are more often experienced than pain, although there are attacks of clutching pain which tend to come on at the same

time each day. Cold drinks and fats disagree with this patient. Between bouts of pain and sickness the stomach feels relaxed and seems to hang down.

Dose : One pill of 6c strength half an hour before meals.

*Carbo vegetabilis.* This is another remedy which suits the rheumatic and gouty dyspeptic. The most noticeable feature is the great distension of the abdomen with gas which is chiefly in the stomach and is always being belched up, relief being afforded by the rancid belchings. There is heartburn and water-brash, as in so many other cases, but the symptoms are worse from lying down. The patient tends to be chilly, sluggish and puffy, and wants to throw all the windows open ; it seems he cannot get enough air.

He likes coffee and acid and sweet things, and he dislikes fats and milk.

Dose : One pill of 30c strength half an hour before meals.

*Sepia.* Here again nausea is a prominent feature but it is not

of the profound all-pervading kind so noticeable in *Ipecacuanha*. Morning nausea, and morning vomiting are common, and the nausea is often relieved by eating. Again there is a faint empty feeling of goneness in the pit of the stomach which is also present in cases suited by *Anacardium*, *Natrum carbonicum*, *Phosphorus* and *Sulphur*; but, in these cases the symptom is relieved by eating, whereas in the case of *Sepia* it is not.

The patient often looks yellow round the mouth and there is often a very characteristic yellow saddle patch across the nose. The patient is very sensitive to smells, likes vinegar and often complains of the taste of food. *Sepia* is one of the great remedies in cases of nervous dyspepsia, particularly in women, and will be dealt with again in the appropriate chapter.

Dose : One pill of 6c strength half an hour before meals.

*Phosphorus*. This is a useful remedy for the vomiting which occurs

practically as soon as the food reaches the stomach. *Bryonia* has this feature too, and in both cases there is a white-coated tongue, and the pains in the stomach travel to the back between the shoulder-blades. In the case of *Phosphorus*, however, the tongue has prominent papillae, and the stomach pains are of a burning kind. The pains are not relieved by heat as would be the case with *Arsenicum*.

Cold food and drinks give temporary relief, but tend to be vomited when they become warm. Profuse painless diarrhoea is a noticeable feature.

Dose: One pill of 12c strength half an hour before meals.

*Sulphur*. Two noticeable features here are a feeling of satiety after a small meal, and a craving for food in the mid-morning. Generally the patient tends to drink much and eat little. He craves sweets which make him sick and cause heartburn.

The tongue tends to be white with a red tip and borders. Again there



is the feeling of goneness in the stomach, relieved by food, and this in the case of *Sulphur*, is most noticeable in the mid-morning. All the symptoms are worse from heat. Hot flushes, cold feet, early morning diarrhoea and the habit of taking short naps are confirmatory symptoms for *Sulphur*.

Dose : One pill of 30c strength each morning.

*Colchicum*. Here again there is nausea and vomiting of bile and mucus, but a striking feature is that even the thought or mention of food will start the patient vomiting. The vomiting is not easy : first there is retching then painful vomiting of food, and, lastly, of bile. The patient is better lying down.

There is considerable colic and the stomach feels cold inside. The tongue is often bright red and feels stiff. The patient is very thirsty, but has an aversion to food. This remedy often suits gouty dyspeptics.

Dose : One pill of 6c strength half an hour before meals.

*China*. This is one of the remedies which suit the dyspepsia of tea drinking and chronic alcoholism. It also suits those cases in which there is great loss of vitality following wasting diseases and loss of tissue fluid.

There is great flatulent distension only relieved for a short time by belching, which is not rancid or burning as in the case of *Carbo vegetabilis*. The food seems to lie a long time in the stomach and is often then vomited undigested. The stools tend to be yellow and watery, and there is often painless diarrhoea of undigested food. The stomach is exceedingly sensitive to the lightest touch, but firm pressure often relieves pain. A very striking feature in the case of *China* is the periodicity of the symptoms which tend to be worse every other day.

Dose : One pill of 6c strength half an hour before meals.

*Abies nigra*. This is one of the minor remedies which sometimes succeeds where the more clearly proved remedies fail to give relief.

The principal features are loss of appetite in the morning and a craving for food at noon and night, and the sensation as of an undigested hard-boiled egg in the pit of the stomach. There is also the feeling of food lodged behind the sternum which is a feature of *Pulsatilla* and a lesser feature of *China*, but here the lodgment seems lower down. The patient is low-spirited and his pain comes on immediately after eating. This should be regarded as a remedy of second choice.

Dose : One pill of 6c strength half an hour before meals.

*Thuja*. Here is another remedy for the dyspepsia of tea drinking, particularly in those patients who suffered ill-effects from vaccination. The patient has alternate cravings for food and lack of appetite. The tongue is swollen and apt to be bitten and aphthous ulcers occur in the mouth. Cold food is preferred and there is thirst, particularly at night. The principal indications are ill-effects of vaccination and ill-effects

of tea-drinking which sometimes causes toothache. Otherwise there is little to suggest *Thuja*, as a primary remedy.

Dose : One pill of 6c strength half an hour before meals.

*Platinum.* This is another secondary remedy only to be thought of occasionally. We have the picture a thin acidulated type of person with a very good opinion of himself or herself, and a correspondingly poor opinion of other people. Probably the most curious feature here is that when the mental symptoms improve the physical symptoms get worse and vice versa. This remedy might as easily have been dealt with under the heading of nervous dyspepsia, but is dealt with here on the strength of its physical characteristics. There is a feeling of constriction both in the throat and in the stomach and the external muscles in these regions seem to go into spasm. There is a burning pain in the stomach and colic pains seem to radiate from the umbilicus. The patient is not very

thirsty, but has often a ravenous appetite and is a hasty eater. The definitive symptoms are the attitude of mental superiority and the alternation of mental and physical symptoms.

Dose: One pill of 30c strength daily.

*Mercurius.* Here the picture is of weak digestion with continuous and ravenous hunger. There is a feeling of deathly faintness at the pit of the stomach. In spite of the hunger the patient does not relish his food. As a rule we have the picture of a bad mouth with loose, decayed teeth, and a flabby tongue which takes the imprint of the teeth, and a foul breath. The taste of food is lacking and there is often a sweetish metallic taste in the mouth. The throat is sore and dry. The patient has an aversion to meat and a liking for sweets and alcoholic drinks which disagree with him. Nausea, vertigo, heat and headache are features, and the vomit is bitter. The stomach feels heavy even after easily digested

food. This remedy suits the chronic alcoholic dyspeptic.

Dose : One pill of 6c strength half an hour before meals.

*Hydrastis*. The symptoms calling for this remedy are quite well marked and are mainly of the low type. There is lassitude, depression and a constant feeling of being out of sorts. There is frequently jaundice pointing to liver involvement and occasional gallstone colic and cutting pains in the stomach. More usually there is catarrh of the stomach and sour eructations and a dull aching and uneasiness rather than clearly defined pain. The appetite is poor and acidity follows the ingestion of bulky food. There is much constipation and hæmorrhoids are frequently present. This is a leading remedy for hæmorrhoids.

Dose : One pill of 6c strength half an hour before meals.

## THE DISORDERED STOMACH

It is proposed in this chapter to deal with those cases in which the symptoms arise from a disarrangement of the gastric secretions such as deficient secretion of pepsin, deficient secretion of acid and excessive secretion of acid, and again we are aware at once of an overlapping with the other chapters since the cases of deficient secretion might be classified under the heading of the "Weak Stomach" while many of the cases of hyperacidity might equally well come under the heading of the "Nervous Stomach". The patient is once again advised to search for his remedy under all headings which appear to pertain to his case and to check up finally by reference to the *Materia Medica* at the end of the book.

In the case of deficiency of secretion of acid and pepsin, the tendency is towards oppression and discomfort

fairly soon after food, constipation, sour belching and vomiting of undigested food ; while the cutting pains characteristic of pepsin deficiency are easily distinguished from the pains of hyperacidity. Much imagination has been exercised in the description of these pains, but the simple term "acid pains" conveys the picture adequately, at least to those who have ever endured such pains. Hyperacidity is the most common secretory derangement of the stomach and the majority of the remedies discussed in this chapter will be appropriate to this condition, but since the choice of a remedy is determined by the individual variations of the clinical picture, the patient need not be concerned to classify his ailment too rigidly under one heading or another.

In this chapter, as one might suppose, are included remedies appropriate to gastric and duodenal ulceration set up by hyperacidity, and it may not be out of place here to suggest that the patient who is not



making adequate progress with the remedy of his selection should consult a homœopathic physician.

The remedies to be discussed in this chapter are : *Calcarea*, *Natrum carbonicum*, *Robinia*, *Sulphuric acid*, *Kali carbonicum*, *Graphites*, *Argentum nitricum*, *Baptisia*, *Iodum*, *Ornithogalum*, *Chelidonium*, and *Antimonium crudum*. Of these *Antimonium crudum* has been dealt with in the chapter on "The Abused Stomach", but will be dealt with here in as much as it applies to cases of disordered secretion.

*Calcarea*. This is one of the remedies for acid dyspepsia in which everything which is eaten seems to turn to acid. There is considerable heartburn which seems to extend well up into the throat. There is heat and flushing after meals, with a pressing pain and tenderness in the pit of the stomach which is worse from motion and better when the patient lies quietly on his back. The tongue is white and there is sometimes a burning pain or soreness

at the tip of the tongue which is worse from hot food or drink. The patient likes eggs and sweet or salt things and does not like meat. There is apprehensiveness rather than loss of appetite and when the meal is faced it is eaten with moderate relish. This apprehensiveness is a common feature of many cases of acid dyspepsia, and arises from a fear of the subsequent pain ; in this respect it differs from the case of the chronic ulcer tending to become malignant in which the desire for food is absent. *Calcarea* suits the fat, fair, flabby, " glandy " type of patient.

Dose : One pill of 12c strength half an hour before meals.

*Natrum carbonicum*. This suits the dyspeptic who is always nibbling between meals and who sometimes wakes early in the morning from hunger and goes in search of food. The pain in the stomach is of a gnawing pressive type, and is relieved by eating. There is a continuous feeling of nausea and squeamishness

and some bitter bilious vomiting at irregular times. The abdomen tends to be swollen, and hard and there are colicky pains arising from incarcerated wind. There is the feeling of goneness in the stomach, relieved by food, which may come on in the forenoon or afternoon. This patient has an aversion to milk, which if taken tends to cause diarrhœa. If the other indications correspond, this remedy suits the patient who has taken much carbonate of soda for acidity with diminishing benefit.

Dose : One pill of 6c strength half an hour before meals.

*Robinia.* This is a minor, but often a great remedy in those cases in which the heartburn and the acidity are practically the only noticeable features. The acidity tends to be worse at night.

Dose : One pill of 6c strength half an hour before meals, or when the symptoms are troublesome.

*Sulphuric acid.* This suits the type of dyspepsia in which the stomach feels cold and relaxed. There is pain

in the hypochondrium, made worse by coughing. Coughing also tends to cause belching. There is chronic heartburn, and the belchings are sour and bitter. The vomiting is sour and consists first of fluid and then of food.

Pain comes on soon after food and extends to the back and hips. In spite of copious saliva the mouth feels dry. There is considerable debility and loss of appetite. The patient has a desire for fresh fruit and for brandy, which disagrees. This is a good remedy for the vomiting of drunkards.

Dose : One pill of 6c strength half an hour before meals.

*Kali carbonicum.* This suits the anæmic easily tired, dyspeptic with chronic backache, and the patient whose digestive system has been impaired by a long illness with loss of body fluids, and who feels empty and weak before meals and sleepy while eating. There is much flatulence and putrid belching which often relieves the pains in the back.

The stomach pains are burning and extend to the throat, and the abdomen is swollen and colicky pains dart all over it. Thirst is noticeable. The tongue may be white and swollen, and small vesicles may appear on it. There is difficulty in swallowing food which seems to stick half way and is sometimes returned.

Dose : One pill of 6c strength half an hour before meals.

*Graphites.* This is a remedy well suited to the chilly, bloated type of patient with chlorotic anæmia, and a bad skin subject to eruptions of acne. There is tympanites and distension of the abdomen to such an extent that the patient has to loosen his clothes. The stomach pain is of a burning colicky type and is temporarily relieved by eating. There is a bad-egg taste in the mouth on waking, and the tongue may be brown or whitish in the centre, with red edges, and is tremulous. Appetite is lacking and there is aversion to meat and to sweets, but food is

readily taken. There is often headache, giddiness and a rush of blood to the head after eating. The fiery acne of the frog-blossom type often conveys a misleading impression that the patient is a heavy drinker, whereas his symptoms are aggravated by wine.

Dose: One pill of 12c strength half an hour before meals.

*Argentum nitricum.* This is one of the great remedies in the case of acid dyspepsia and gastric ulcer. The pain in the stomach is gnawing and intense and is located at a small spot from which it radiates out in all directions. The least quantity of food makes the pain worse. The region of the liver is very sensitive to pressure, and at intervals the diaphragm goes into spasm. The patient has an intense desire for sugar and sweets which generally set up diarrhœa.

There is an inky or metallic taste in the mouth, and the tip of the tongue is often very red and painful. Warm fluids tend to relieve, while

cold fluids aggravate the stomach pains and fluids seem to pass right through the patient. The belching is very characteristic, it is very difficult to start, but once started the wind comes up with explosive force and in great quantities, affording considerable relief.

The patient is of the nervous, fearful, apprehensive type.

Dose: One pill of 12c strength half an hour before meals.

*Baptisia.* This is particularly useful in those cases of acute disorder of the stomach accompanied by a rise of temperature. It is also one of the great remedies in cases of gastric influenza, and suits elderly people especially well. The symptoms are well marked and characteristic; there is a feeling of dullness, heaviness and confusion; the face is sallow or dusky with a flush over the malar bones and the bridge of the nose; the tongue is yellow with a brown coating down the centre, and is very dry. The breath is fœtid and there may be ulcers on the

mucous membrane of the mouth. There is nausea, thirst and lack of appetite. The stomach pains are constant, burning and colicky. The abdomen is distended and there is flatulent rumbling. There are cutting pains in the intestines and diarrhoea of a type resembling dysentery.

Dose: One pill of 3c strength every two hours.

*Iodum.* This, again, is a remedy which might equally well have been dealt with under the heading of the "Nervous Stomach", and must not be forgotten when considering nervous dyspepsia. The patient is of the thin nervous active type who gets anxious if he does not eat, but who tends to get thinner instead of fatter. The hiccoughing, sore eructations, heartburn and violent vomiting of bile, however, all point to a disturbance of the gastric secretions.

The ravenous appetite tends to alternate with periods of complete lack of appetite, although fasting causes pain in the chest. Food, however, causes spasmodic pain and



pulsation in the pit of the stomach. The abdomen tends to be swollen with incarcerated flatus and there is often a violent throbbing of the abdominal aorta. Copious sweetish saliva occasionally floods the mouth. Constipation tends to alternate with diarrhoea.

Dose : One pill of 6c strength half an hour before meals.

*Ornithogalum.* This remedy is particularly indicated in cases of gastric or duodenal ulcer, especially old indurated gastric ulcers. The gastric pain in these cases is acute and anginal and seems to spread to the heart and shoulders causing the patient to writhe in agony. The abdomen is tender and distended with gas which is belched painfully and which is foul smelling. The breath is very offensive and the patient looks wasted and anxious and lacks or fears appetite.

Dose : One pill of 3c strength half an hour before meals.

*Chelidonium.* The principal characteristics here are the gnawing,

grinding pain in the stomach which is relieved by eating, and the pain in the region of the liver which shoots towards the back. *Anacardium* has this symptom of great relief after eating, but the symptoms of liver involvement are absent. *Chelidonium* is also one of the great remedies in cases of gallstones. There is a desire for acid things such as vinegar and pickles. There is nausea and heartburn, heat in the stomach and flushes of bodily heat, and also shortness of breath which is relieved by belching.

Dose : One pill of 6c strength half an hour before meals.

*Antimonium crudum*. Apart from being a remedy in cases of gross over feeding this is also a remedy for cases of atonic gastric catarrh in which the mucous membrane of the stomach is poor and the secretions are diminished. There is a distaste for food unless it is acid or sharply seasoned and most food disagrees. The patient wakes up cold with a feeling of emptiness and hunger, but without appetite, and food affords

no relief. There is a feeling of lassitude and a desire to lie down after meals. There is vomiting of slimy mucus and bile, but little or no vomiting of solids.

Dose : One pill of 6c strength half an hour before meals.

## THE NERVOUS STOMACH

It may be claimed with some justice that most of the cases discussed in the last two chapters might in many respects be regarded as cases of nervous dyspepsia, and, if we stretch a point, there is a nervous element in most cases of the abuse of the good stomach.

Let us admit for the last time that all classifications of dyspepsia are faulty and that the present one is mainly adopted as a convenience to enable us to consider similar groups of symptoms under one heading and pick out those individual differences which will enable us to choose the appropriate remedy.

In this chapter we will consider those cases in which the nervous condition contributes largely to the dyspepsia and in which the nervous symptoms constitute a large part of the overall picture.

In discussing the remedies for the nervous stomach stress will be laid on the nervous and even on the mental symptoms and less emphasis will be given to such symptoms as heartburn, waterbrash and flatulence, except in such cases as present a prominent and characteristic variation of such common symptoms. Four of the remedies, *Nux vomica*, *Pulsatilla*, *Arsenicum* and *Sepia*, we have met before, and this is not surprising as they are often regarded by homœopathic physicians as the four great remedies for dyspepsia. To the patient, however, there is only one great remedy, and that is the one which most accurately fits his symptom picture and which will accordingly give him the greatest measure of relief and cure, and once again the reader is urged to give

proper consideration to every feature of a case before selecting the remedy ; the results will be proportionate to the care taken.

The remedies to be discussed are :  
*Nux vomica*, *Pulsatilla*, *Arsenicum*,  
*Sepia*, *Lycopodium*, *Petroleum*, *Magnesia phosphorica*, *Colocynth*, *Plumbum*, *Asafetida*, *Ignatia*, *Cimicifuga*,  
*Anacardium*, and *Carbolic acid*.

*Nux vomica*. We have the picture here of the nervous, snappy, highly-strung brain worker who drives himself and others hard. He is excitable and easily roused to anger, and is very sensitive to noise and to noisy interruptions when he is working. He tends to be chilly and his symptoms are worse from cold and from an east wind. His stomach pains are of the contractive type and the muscles of his stomach and of his abdominal wall tense. He has nausea, particularly in the morning, with empty retching and occasional bilious vomiting. The gastric pains tend to come on about half an hour after meals accompanied by a dull

frontal head-ache which is a constant feature in these cases. Prior to the gastric derangement these patients have generally been working hard and playing hard, and treating themselves well at table, but without paying much regard to what they have been eating and drinking.

They have flatulent colic pressing up under the ribs, especially when lying down.

Dose : One pill of 6c strength half an hour before meals.

*Pulsatilla*. This remedy is generally thought of for women, but is equally efficacious for men where the picture fits. The patient is of the mild, lachrymose type ; suffering in silence, very conscientious and steady, and not inclined to bustle. Although a silent sufferer, this patient likes sympathy and is better in the open air and worse for warmth, although the pains are often accompanied by a feeling of chilliness. In personality this patient is the exact opposite of the *Nux vomica* patient. The stomach pains are of the aching,

drawing type, especially in the morning, and the abdominal pains are suggestive of diarrhoea, but a normal motion ensues. Two prominent features are dryness and a putrid taste in the mouth on waking, and a feeling as though food had lodged under the sternum. The patient craves lemonade and abhors fats, which aggravate the symptoms. There is violent palpitation after meals and much wind which seems to move about.

Dose : One pill of 6c strength half an hour before meals.

*Arsenicum.* Anxiety, Prostration and Restlessness are the keynotes to the personality here and are worse at night. The anxiety amounts to anguish and despair and coupled with the restlessness, impels the patient to get out of bed and walk about the house at night. All the patient's senses are abnormally acute, and he is very sensitive to smell, touch and surroundings.

The gastritis is very acute with painful vomiting, sometimes of blood,

A prominent feature is the burning pain in the stomach and intestines which is relieved by heat. There is intense desire for small sips of cold water which disagree. The patient is generally worse for cold things, cold drinks, cold applications and cold air, and is better for warmth. *Arsenicum* is the remedy of choice for ptomaine poisoning.

Dose : One pill of 6c strength half an hour before meals, or for ptomaine poisoning every half hour until relief begins.

*Sepia*. Here again we have a remedy which suits far more women than men, although if the symptom picture is appropriate, the individual male patient will derive just as much benefit from it. The general picture of the patient may be summed up in the slang phrase "all hot and bothered". Hot, sweaty flushes occur, and the patient hates sympathy and wants to be left alone. Indifference to others, even to kith and kin is a notable characteristic of this remedy. There is nausea at the



smell of food and a characteristic feeling of goneness in the pit of the stomach which in this case is *not* relieved by eating. Appetite is lacking and there is aversion to food, particularly meat, coupled with a desire for vinegar. The stomach pains are cramp-like and all the pains seem to bear down. There is frequently early morning vomiting of bile and food.

Dose : One pill of 6c strength half an hour before meals.

*Lycopodium.* Here we have the intellectual scholar type, a thinker rather than a doer who suffers agonies of apprehension if he has to make a public appearance or speech, but who gets through all right when the time comes. He asks to be left alone, but wishes to know that people are within call. He likes sweets and hot drinks and is worse for cold food or bulky food. His symptoms tend to be better in the morning and worse towards the afternoon, and improve again as the evening wears on; in other words he

is worse while he has the day's work to perform.

He gets a headache from hunger, generally over the temples, but as soon as he starts to eat he feels full and satiated. His saliva tends to dry on his palate and lips and become ropy. His stomach pains are of the gnawing type and are worse when he is sitting bent over a book and are better when walking about, or when warm in bed. The liver region is sore and sensitive to touch, and there may be gallstone colic. With the stomach pain there is a characteristic feeling of fullness.

Dose : One pill of 6c strength half an hour before meals.

*Petroleum.* The characteristic nervous symptoms here are loss of orientation and deep despondency, and tearfulness. All the symptoms are worse and sometimes start from vexation or fright. The tongue is white with brown streaks at the edges. There is ravenous hunger and violent pain in the stomach,

accompanied by breathlessness, nausea and sweating; the pain is relieved by eating. In spite of the hunger the patient lacks appetite and has an aversion to fats and hot cooked food. There is violent thirst, particularly for beer, which the patient is always endeavouring to quench. The patient is often awakened by colic which is better from bending double.

Dose : One pill of 12c strength half an hour before meals.

*Magnesia phosphorica.* Here we have the patient who with some justice complains of "Nerves". Neuralgias, cramps and colics are this patient's lot and the pains are of the lacerating tortured nerve type. Chorea in childhood often precedes this condition. The tongue is clean and there are no great abnormalities of appetite, save only that hot drinks tend to relieve the pain. The colic is of the cramping type which bends the patient double, and is relieved by heat and pressure. There is often painful diarrhoea, and this is one of

the remedies for the cramps of dysentery and cholera.

. Dose: One pill of 12c strength every two hours.

*Colocynth.* This is another remedy for colic which is better from heat and pressure. The pain is agonizing and is only ameliorated by bending double and by pressure on the abdomen. The pain often sets up vomiting. The patient is depressed, irritable and joyless and easily provoked. Anger starts up the pain and can cause vomiting and diarrhoea. Potatoes cause pain, but coffee often relieves the colic.

Dose: One pill of 6c strength every two hours.

*Plumbum.* Here we have a depressed, melancholic, anxious, restless patient, much given to yawning. The striking nervous symptom here is the "globus hystericus", the feeling of a ball rising in the throat.

The tongue is dry and brown or yellow and feels heavy and paralysed. The mouth feels dry, but there is often an accumulation of froth or

sweetish saliva. There is violent thirst, but not much appetite; or occasionally great hunger. There are empty eructations and an occasional gulping up of sweetish fluid. Vomiting of food follows attacks of violent colic, and the vomit has a faecal odour. The stomach pains strike through to the back. The picture is typical of painters' colic.

Dose: One pill of 30c strength each day.

*Asafœtida.* Here again there is hysterical spasm of the œsophagus, but the characteristic feature is the vast quantity of wind, all of which is belched up and none of which passes down. The wind does not gush out, but is released in a series of explosive pops like a badly silenced motor-cycle. This wind has an offensive garlic-like smell, and all the patient's bodily excretions have an offensive smell.

The stomach pains are cutting or stitching and come on at irregular intervals. The stools are watery or slimy and offensive.

Dose : One pill of 6c strength half an hour before meals.

*Ignatia.* This is a remedy for the dyspepsia brought on or aggravated by worry. There is again a sensation of a lump in the throat which is worse when not swallowing and there is sometimes a stitching pain in the throat. This patient likes the idea of food, but at the table his appetite fails. He may have hunger and nausea at the same time. Symptoms are made worse by grief or jealousy.

There is a sinking sensation in the pit of the stomach and spasmodic gnawing pains occur in the stomach which are worse at night.

Dose : One pill of 6c strength half an hour before meals.

*Cimicifuga.* This is one of the remedies for the nervous dyspepsia of tea-drinkers. There is deep melancholy and depression of spirits, moody silence alternating with talkativeness, severe headache and aching eyes. There is an unpleasant coppery taste in the mouth, an offensive breath, and a sinking, faint

feeling in the pit of the stomach, with periodical colicky pains and soreness of the abdominal muscles.

Dose : One pill of 6c strength half an hour before meals.

*Anacardium.* Here again there is depression coupled with a feeling of impending disaster. The patient is irritable and contradictory and has an irresistible impulse to curse and swear. There is a sinking feeling and a dull pain in the stomach passing back to the spine which comes on about two hours after eating. There is great relief after eating, but the pains return and increase in intensity until the patient eats again. There is violent pain at night and a great urge to stool which passes off when the patient goes to stool. There is a curious sensation as if there were a plug in the rectum.

Dose : One pill of 6c strength half an hour before meals.

*Carbolic Acid.* This is a remedy for the muddled, confused, bewildered, depressed patient with intensely painful dyspepsia. The tongue is

dry and fissured, and has a sensation of pins and needles, and there are occasional ulcerated patches on the buccal mucous membrane. There is spasm of the œsophagus and difficulty in swallowing. There is pain, burning and heat in the stomach, chest and throat after all food, and the patient is very nervous and apprehensive about his condition.

Dose: One pill of 12c strength half an hour before meals.

Patients whose dyspepsia appears to be linked with rheumatism or gout should consider in particular the symptom pictures outlined in discussing *Bryonia*, *Sulphur*, *Colchicum*, *Kali bichromicum*, *Carbo vegetabilis*, and *Lycopodium*, whilst bearing in mind that it is the appositeness of the total picture which obtains the best results. Gouty patients with disordered skins, and dry itching scalps may find it desirable to take a preliminary course of *Psorinum*, one pill of 30c strength daily for a fortnight before starting on the selected remedy for their dyspepsia.



• MATERIA MEDICA •

*Abies nigra.* Loss of appetite in the morning ; craving for food noon and night. Feeling of food lodged behind sternum, and sensation of undigested hard-boiled egg in pit of stomach. Pain immediately after food. Patient low-spirited.

Dose : One pill of 6c strength half an hour before meals.

*Alumina.* Nausea, chilliness, faintness, heartburn, mucous vomiting. Bitter eructations after potatoes. Aversion to meat ; liking for fruit and green vegetables. Pains in stomach radiate to chest. Feeling of constriction in stomach extending to throat. Feeling of abdomen hanging heavily while walking. Mouth feels sore ; small ulcers in mouth. Condiments set up coughing. Symptoms better after breakfast and worse in the evening. These patients should not use aluminium cooking utensils.

Dose : One pill of 30c strength daily.

*Anacardium*. Depression ; sense of impending disaster. Impulse to curse and swear. Good impulses alternate with bad impulses. Sometimes hears two voices, one good, one bad. Patients irritable and contradictory. Sinking feeling ; dull pain in stomach passing back to spine, coming on two hours after food. Great relief of pain by eating, but pain returns, increasing in intensity until next meal. Violent pain at night. Plug sensation in rectum. Urge to stool which passes off on going to stool.

Dose : One pill of 6c strength half an hour before meals.

*Antimonium crudum*. For cases of gross over-eating and atonic gastric catarrh. Secretions diminished and stomach lining and muscles poor. Lowered vitality, lassitude and a desire to lie down after meals. Patient wakes up cold, empty and hungry, but food gives no relief. Thick white coating on tongue. Likes food to be sharply seasoned. Hunger without appetite. Vomiting of slimy

mucus and bile. Little or no vomiting of solids.

Dose : One pill of 6c strength, half an hour before meals.

*Antimonium tartaricum.* For dyspepsia of the tremulous drunkard. Takes everything in the drink line. Hands and tongue tremulous. Nausea, headache, hiccough, night vomiting and morning retching. Liver region tender to touch. Beating and throbbing in pit of stomach. Cramps and stabbing pains in stomach. Restlessness and anxiety. Rotten egg taste in mouth.

Dose : One pill of 6c strength every three hours.

*Argentum nitricum.* For acid dyspepsia and gastric ulcer. Intense gnawing pain radiating from small spot in stomach. Least food makes pain worse. Liver region sensitive to pressure, diaphragm goes into spasm. Patient likes sugar and sweets, which cause diarrhoea. Tip of tongue red, and painful. Inky metallic taste in mouth. Belching difficult to start, then comes up

explosively in large quantities and affords relief. Warm drinks relieve pain; cold drinks aggravate. Patient nervous, fearful, apprehensive.

Dose: One pill of  $\text{12c}$  strength half an hour before meals.

*Arsenicum.* For acute irritative dyspepsia, ptomaine poisoning and nervous dyspepsia. In irritative dyspepsia, follows the eating of unripe fruit; knife-like colic. Anxiety, prostration, restlessness. Patient walks about at night. Very sensitive to noise, smell, touch and surroundings; all senses acute. Worse for cold air, cold food and drink, and cold applications; better for warmth and warm drinks. Burning pain relieved by hot applications. Desire for small sips of cold water which disagree. Very painful gastritis with painful vomiting of dark blood. Black stools.

Dose: For acute irritative dyspepsia and ptomaine poisoning: one pill of  $6c$  strength every half hour until relief begins. For nervous dyspepsia: one pill of  $6c$  strength half an hour before meals.

*Asafœtida.* For nervous dyspepsia. Hysterical spasm of the œsophagus. Terrific quantities of wind all passed up; none passes down. Gushes of wind pop up explosively at very short intervals. All patient's exhalations and excretions have an offensive smell. Cutting, stitching stomach pains at irregular intervals. Stools offensive and watery or slimy.

Dose: One pill of 6c strength half an hour before meals.

*Baptisia.* For acute disorder of stomach with rise of temperature. Gastric influenza. Suits old people well. Dullness, heaviness and confusion. Face sallow or dusky with flush over cheek bones and bridge of nose. Tongue dry and yellow, with brown coating down centre. Fœtid breath and ulcers in mouth. Nausea, thirst, and lack of appetite. Stomach-pains constant, burning and colicky. Abdomen distended and rumbling. Colicky diarrhœa resembling dysentery.

Dose: One pill of 3c strength every two hours.

*Bryonia.* Chronic dyspepsia in rheumatic subjects. Pressure of food after eating. Food lies like a stone in the pit of the stomach. Pain in stomach travels to the back or under one or other shoulder-blade. Pain worse for motion, better quiet and lying down. Headache; thirst for long drinks of water at intervals. Vomiting of solids immediately after eating. Pain over liver, worse on deep inspiration. Coughing sets up soreness in pit of stomach. Tongue white and furred. Constipation and light-coloured stools. All pains worse from movement.

Dose: One pill of 12c strength half an hour before meals.

*Calcarea.* Acid dyspepsia. Everything eaten seems to turn to acid. Much heartburn extending up into throat. Heat and flushing after meals. Pressing pain and tenderness in pit of stomach, worse from motion and better when lying on back. White tongue with soreness or burning at tip which is worse from hot food and drink. Apprehensive

appetite, but meal eaten with moderate relish. Aversion to meat, but liking for eggs and sweet or salt things. Patient often of fair, fat, flabby type with enlarged glands.

Dose : One pill of  $\text{R}2\text{c}$  strength half an hour before meals.

*Carbo vegetabilis*. Suits the chronic dyspepsia of the gouty and rheumatic subject. Patient chilly, sluggish and puffy. Great air hunger. Heartburn, waterbrash. Great distension from gas which feels chilly on the stomach. Great belchings which bring relief and taste rancid. Patient dislikes fats and milk, and likes coffee, and acid and sweet things.

Dose : One pill of  $30\text{c}$  strength half an hour before meals.

*Carbolic acid*, Nervous dyspepsia. Great nervousness and apprehension about condition. Patient confused depressed and bewildered. Spasm of oesophagus and difficulty in swallowing. Pins and needles sensation in tongue. Tongue dry and fissured. Ulcerated patches on membrane of mouth. Pain, burning and

heat in stomach, chest and throat after all food. Intensely painful dyspepsia.

Dose : One pill of 12c strength half an hour before meals.

*China.* Suits the chronic dyspepsia of the tea drinker and alcoholic, and where there is loss of vitality following a debilitating illness. Flatulent distension and discomfort relieved for a short time only by belching. Stomach very sensitive to touch, but pain relieved by firm pressure. Food lies long in stomach, then vomited undigested. Painless diarrhoea of undigested food. Stools yellow and watery. Symptoms worse every other day.

Dose : One pill of 6c strength half an hour before meals.

*Chelidonium.* Disordered secretion of stomach, liver involvement and gallstones. Gnawing, grinding pain in stomach, relieved by eating. Nausea, heartburn, heat in the stomach and flushes of bodily heat. Breathlessness relieved by belching. Sharp pain in liver region which



shoots to the back. Desire for pickles and vinegar.

Dose : One pill of 6c strength half an hour before meals.

*Cimicifuga.* For nervous dyspepsia of tea drinkers. Deep melancholy and depression. Moody silence alternating with talkativeness. Severe headache and aching eyes. Offensive breath and coppery taste in mouth. Periodical colicky pains in stomach and soreness of abdominal muscles. Faint, sinking feeling in stomach.

Dose : One pill of 6c strength half an hour before meals.

*Colchicum.* Suits chronic dyspeptics with gouty tendency. Nausea, vomiting and colic. Thought or mention of food starts vomiting. Vomiting difficult ; first retching, then painful vomiting of food, then bile. Colic severe, stomach feels cold inside. Tongue bright red and feels stiff. Great thirst.

Dose : One pill of 6c strength half an hour before meals.

*Colocynth.* Nervous dyspepsia. Patient joyless, depressed and

irritable. Agonizing colic relieved by heat, pressure and bending double. Pain causes vomiting. Anger starts up pain, vomiting and diarrhœa. Potatoes cause pain, coffee often relieves colic.

Dose: One pill of 6c strength every two hours.

*Graphites.* Suits secretory deficiency of chilly anæmic patients with bad skins and acne. Tympanites and abdominal distension; patient has to loosen clothes. Burning, colicky pain, temporarily relieved by eating. Tongue tremulous, brown or white in centre with red edges. Bad egg taste in mouth on waking. Appetite poor, but food readily taken. Aversion to meat and sweets.

Headache, giddiness and a rush of blood to the head after eating.

Dose: One pill of 12c strength half an hour before meals.

*Hydrastis.* Chronic atonic dyspepsia. Lassitude, depression, and out-of-sorts feeling. Frequently jaundice, gallstone colic and cutting pains in the stomach. More often

gastric catarrh, with dull aching and uneasiness. Appetite poor; acidity follows intake of bulky food. Much constipation. Hæmorrhoids, for which this is a leading remedy.

Dose: One pill of 6c strength half an hour before meals.

*Ignatia.* For nervous dyspepsia brought on or aggravated by worry, grief or jealousy. Sensation of lump in throat, worse when not swallowing. Stitching pain in throat. Looks forward to food, but appetite fails at table. Hunger and nausea at the same time. Sinking feeling in pit of stomach. Spasmodic gnawing pains in stomach, worse at night.

Dose: One pill of 6c strength half an hour before meals.

*Iodum.* For disordered secretion and nervous dyspepsia. Thin, nervous, anxious, active patient who wants a meal every few hours and who seems to get thinner all the time. Occasional lack of appetite, but fasting causes pain in chest. Food causes pain and pulsation in pit of stomach. Hiccough, heartburn, sour

eructations and violent bilious vomiting. Copious floods of sweetish saliva. Palpable throbbing of abdominal aorta. Abdomen swollen with incarcerated flatus. Constipation alternating with diarrhoea.

Dose : One pill of 6c strength half an hour before meals.

*Ipecacuanha.* Chronic atonic dyspepsia. Constant profound nausea. Copious flow of saliva. Some vomiting of bile and mucus. Distress and sick feeling in pit of stomach. Sometimes clutching pain in stomach which comes on at the same time each day. Stomach seems to hang relaxed between bouts of pain and sickness. Cold drinks and fats disagree with this patient. Great nausea all the time is the key symptom.

Dose : One pill of 6c strength half an hour before meals.

*Kali bichromicum.* For the dyspepsia of beer drinkers. Patient pot-bellied, heavy and blotchy ; eats a good meal which seems to remain as a heavy load in stomach. Digestion seems to stop. Copious belching

brings relief. Nausea, giddiness and hot flushes. Vomiting of undigested food or glairy fluid. Lager beer disagrees ; preference for bitter beer.

Dose : One pill of 6c strength half an hour before meals.

*Kali carbonicum.* For dyspepsia of deficient secretions. Suits anæmic, easily-tired dyspeptics, and patients imperfectly recovering from a debilitating illness, with loss of vitality and body fluids. Chronic backache ; patient feels empty and weak before meals and sleepy while eating. Food seems to stick half way down. Much flatulence and copious putrid belching which relieves backache. Food may be brought up while eating. Burning pains in stomach extending to throat. Dartsing colicky pains in abdomen which is swollen. Great thirst. Tongue white and swollen with, occasionally, small vesicles on it.

Dose : One pill of 6c strength half an hour before meals.

*Lycopodium.* Nervous dyspepsia. Patient of the intellectual scholar

type. Nervous over public performances, but all right once started. Symptoms worse while day's tasks unperformed; better first thing in the morning and towards evening. Likes to be left alone, but likes to know that people are around. Gnawing stomach pains worse sitting bent over, better walking about. Feeling of fullness with stomach pains. Starts a meal well, but feels full almost immediately. Liver region sore, and tender to touch. Occasional gallstone colic.

Headache over temples from hunger. Saliva dries on palate and lips and becomes ropy. Cold food and bulky food disagree; patient likes sweets and hot drinks.

Dose: One pill of 6c strength half an hour before meals.

*Magnosia phosphorica.* Nervous dyspepsia. Patient may have had chorea as a child. Neuralgias, cramps and colics. All pains of tearing nerve type. Tongue clean; appetite fair. Cramping colic, bending the patient double, relieved by heat and

pressure. Hot drinks relieve pain. Painful diarrhœa. A great remedy for the cramps of dysentery, and cholera.

Dose: One pill of 12c strength every two hours.

*Mercurius*. For dyspepsia of spirit drinkers and chronic atonic dyspepsia. Nausea, vertigo, heat, and headache. Sickly sweet taste in mouth. Foul breath; loose decayed teeth. Moist, yellow, flabby furred tongue which takes imprint of teeth. Throat sore and dry; taste impaired. Appetite poor; aversion to meat; liking for sweets and spirits, which disagree. Full feeling in stomach, which seems to hang heavy after a light, easily-digested meal. Bitter vomit. Stomach and liver regions tender to touch. Tendency to colic from cold.

Dose: In acute upsets one pill of 6c strength every three hours. In chronic cases, one pill of 6c strength half an hour before meals.

*Natrum carbonicum*? For dyspepsia of disordered secretions. Patient

always nibbling between meals ; wakes early from hunger and goes in search of food. Gnawing, pressive pain in stomach relieved by food. Continuous squeamish nausea, not profound as in the case of *Ipecacuanha*. Bitter, bilious vomiting at irregular intervals. Feeling of gone-ness in stomach in forenoon or afternoon, relieved by food. Abdomen swollen and hard ; colicky pains from incarcerated wind. Aversion to milk which causes diarrhœa.

Dose : One pill of 6c strength half an hour before meals.

*Nux vomica*. For nervous dyspepsia and for acute attacks of dyspepsia following indulgence in unsuitable food, particularly eggs, cheese and bulky food. Also suits cases of disordered secretion where the other symptoms fit. Patient is of the type of the nervous, irritable brain-worker, very sensitive to noise and interruptions. Works hard and plays hard, and does himself well at table, 'but without much heed to his food. Chilly and worse from cold



and east wind. Stomach pains contractive and come on half an hour after meals, accompanied by headache. Stomach and abdominal muscles tense. Nausea, empty retching and occasional bilious vomiting, particularly in the morning. Flatulent colic pressing under ribs, especially when lying down.

Dose : In acute cases, one pill of 6c strength every hour until improved.

In other cases, one pill of 6c strength half an hour before meals.

*Ornithogalum.* Of use in cases of gastric and duodenal ulcer, particularly old indurated gastric ulcers. Acute anginal pain spreading from stomach to heart and shoulders causing patient to writhe in agony. Abdomen tender and distended. Painful belching of foul smelling gas. Patient lacks or fears appetite and looks wasted and anxious.

Dose : One pill of 3c strength half an hour before meals.

*Petroleum.* Nervous dyspepsia. Despondency, tearfulness, and loss of orientation. Symptoms worse,

and sometimes start from vexation or fright. Violent pain in stomach with nausea, sweating and breathlessness; pain better from eating. Patient awakened by colic which is better from bending double. Ravenous hunger; great thirst, particularly for beer. In spite of hunger, no appetite. Aversion to fats and hot food. Tongue white with brown streaks at edges.

Dose: One pill of 12c strength half an hour before meals.

*Phosphorus.* For acute gastric upsets following the eating of cured fish, particularly when accompanied by painless diarrhœa. Easy vomiting without nausea, occurs, often almost as soon as the food reaches the stomach. Craving for cold food and drink which is tolerated until it gets warm in the stomach, when it is vomited. Gnawing, burning pain in stomach, not relieved by heat. Gone feeling in stomach, which spreads to intestines.

Dose: One pill of 12c strength every three hours, in acute cases.

*Platinum.* For chronic dyspepsia, sometimes of nervous type. Patient feels superior to other people. Feels tall and sees other people small. When mental symptoms improve, physical symptoms get worse, and vice versa. Feeling of constriction in throat and stomach, the external muscles of which seem to go into spasm. Burning pain in stomach and colicky pains radiating from navel. Little thirst but ravenous appetite. The patient is a hasty eater.

Dose: One pill of 30c strength daily.

*Plumbum.* Nervous dyspepsia. Melancholic, restless, anxious, depressed type of patient. "Globus Hystericus", ball in the throat sensation, a prominent feature. Tongue dry, brown or yellow, feels heavy and paralysed. Froth or sweetish saliva in mouth, which nevertheless feels dry. Violent thirst but poor appetite; occasional great hunger. Empty eructations; occasional gulping up of sweetish fluid. Violent colic followed by vomiting of food with foecal odour. Stomach

pains strike through to back. Symptoms resemble painters' colic.

Dose: One pill of 30c strength daily.

*Psorinum.* For the occasional preliminary treatment of gouty dyspeptics with skin disorders and dry itching scalps.

Dose: One pill of 30c strength daily for a fortnight.

*Pulsatilla.* For nervous dyspepsia and acute disorders of the stomach caused by a fatty diet. Suits women particularly well. Patient mild, gentle, lachrymose; silent sufferer; conscientious and steady at work; not a hustler. Patient likes sympathy; better in the open air and worse for warmth, although feeling chilly during attacks of pain. Exact opposite of *Nux-vomica* patient. Aching, drawing pains in stomach, especially in the morning. Abdominal pains suggest diarrhoea, but motions normal. Putrid taste and dryness of mouth on waking, and feeling as though food had lodged under sternum, are striking and constant characteristics. Violent palpitation

after meals and much wind which seems to move about. Patient craves lemonade and abhors fat, which aggravates all symptoms.

Dose : One pill of 6c strength half an hour before meals.

*Robinia.* Minor remedy for acid dyspepsia, where acid and heart-burn are practically the only noticeable features. Acidity very great and worse at night.

Dose : One pill of 6c strength half an hour before meals, or when the symptoms are troublesome.

*Sepia.* For nervous dyspepsia and chronic atonic dyspepsia. Suits women particularly well. Patient hates sympathy and wants to be left alone. Indifference to kith and kin is a striking characteristic. Nausea, but not profound as in the case of *Ipecacuanha*. Very sensitive to smells. Nausea at smell of food. Gone feeling in pit of stomach *not* relieved by food. In the case of *Anaxardium*, *Natrum carbonicum*, *Sulphur* and *Phosphorus*, this gone feeling is relieved by food. Morning

nausea and vomiting. Nausea relieved by food. Patient sometimes has yellow patch round mouth and yellow saddle patch across bridge of nose. Food tastes nasty. Lack of appetite and aversion to food, particularly meat. Patient likes vinegar. Cramp-like pains in stomach. All pains seem bearing down.

Dose : One pill of 6c strength half an hour before meals.

*Sulphur.* For chronic dyspepsia. Well suited to rheumatic patients. Craving for food in the mid-morning and satiety after a small meal are noticeable features. Gone feeling in stomach particularly mid-morning, relieved by food. Hot flushes, cold feet, early morning diarrhoea. All symptoms worse from heat. Patient always taking short naps. Patient drinks much, but eats little ; craves sweets, which cause sickness and heartburn. Tongue white, with red tip and borders.

Dose : One pill of 30c strength each morning.

*Sulphuric acid.* For secretory disorders. Stomach feels cold and relaxed. Chronic heartburn and sour or bitter belchings. Cough which causes belching and pain in hypochondrium. Sour vomiting first of fluid then of food. Pain in stomach soon after food which spreads to back and hips. Great debility and loss of appetite. Copious saliva, but mouth feels dry. Patient craves fresh fruit and also brandy which disagrees. A good remedy for the vomiting of drunkards.

Dose : One pill of 6c strength half an hour before meals.

*Thuja.* For chronic dyspepsia of tea drinkers, particularly those who suffered ill-effects from vaccination. Alternate cravings for food and lack of appetite. Patient prefers cold food and is very thirsty at night. Tongue swollen and apt to be bitten. Aphthous ulcers in mouth. A secondary remedy.

Dose : One pill of 6c strength half an hour before meals.



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