

With the amount of money now spent on medicine by the Government, at least ten times more people could be served profitably and quite a good number of villages reconstructed.

On behalf of the Poor suffering masses in the villages, I humbly appeal to the authorities concerned to kindly pay greater attention to them, by opening a few Homœopathic Institutions, Hospitals, as well as Colleges in the rural areas, because this can certainly be done at a comparatively lesser cost. I feel that they have a just claim for this.

Ladies and Gentlemen,

I have now finished. I do not want to encroach upon your valuable time. I thank one and all of you for giving me a patient hearing. I humbly request you to forgive me my short-comings.

Jai Hind

SOME OBSERVATIONS ON THE USE OF GELSEMIUM

BY HOMŒOPATH

On the authority of our Masters we are apt to associate such remedies as *Aconite*, *Baptisia*, *Belladonna*, *Camphor*, *Eupatorium perf.*, *Ferrum phos.*, *Ipecac.*, and *Phosphorus* with maladies and complaints which attack suddenly. Then there are remedies that correspond to slow, insidious attacks of disease that develop gradually but no less surely, and baffle the patient and the physician for a long time and leave the patient almost exhausted. These are : *Arnica*, *Bryonia*, *Capsicum*, *Gelsemium*, *Echinacea*, *Rhus tox.*, *Tartar emetic*. Lastly come deep-acting remedies that go down to the organic structures of the being. Such remedies are required when seemingly indicated remedies are unable to cope with the situation, and one has reason to believe that the apparent disturbance is but the outward manifestation of a deep-seated trouble. Such medicines are : the

carbons : *Carbo anim.*, *Carbo veg.*, *Carb. sulph.*, *Graphites*, *Petroleum* ; Salts of *Calcium* and *Potassium* ; *Ammonium carb.*, *Ammonium brom.* ; *Sulphur* and *Sulphur iod.* ; Nosodes like, *Pyrogen*, *Tuberculinum*, *Pneumococcin*, *Influenzin* ; Milks like *Lac caninum*.

Such divisions are built upon long experience of careful observers and great masters and pioneers, and they held the practitioner in quick prescribing, but the writer found one exception, during the summer epidemic of influenza that visited Delhi and Punjab during June and July (1957) respectively.

The first mild cases that came complaining of sore aching of the body, sudden weakness in the legs, brief spells of chilliness, etc., did not respond to *Eupatorium perf.*, or *Aconite*. One or two cases had pressure over the eyes with the symptoms given above, so that in spite of the suddenness of the attack, *Gelsemium* 30 in three two-hourly doses gave excellent results. The first surprise over, *Gelsemium* proved thoroughly reliable in most cases where no other remedy was definitely indicated. Cases with definite throat trouble responded more to *Natrum mur.* than to any other remedy.

Of the total number of cases treated in July 1957 (totalling 3,768), there were no deaths, no pneumonias in the case of adults, though some children developed lobar infection, but their number did not exceed eighty. Most of the cases required a few doses of *Antimonium tart.* 12, generally four hours apart (we discourage routine prescribing). Coughs that persisted after the attack required *Carbo veg.*, *Ammonium carb.*, or *Sticta pulmon.* Sometimes other drugs were required intercurrently or to complete the cure. Thus *Lachesis* was given in about 10 per cent cases, generally in a single dose or repeated on the third days ; *Rhus tox.* was required in 6 per cent cases ; *Pyrogen* (high fever with low pulse, sore bruised, tendency to sepsis, generally exhibited in the 200 potency) in 2 per cent cases ; *Psorinum* 200 was frequently used to overcome inordinate exhaustion after the attack, was given in over 10 per cent cases. *Sterculia* 30 was also used for the purpose, where no indications could be found for any other remedy. Average duration of illness : 6 days.

Six cases required *Eupatorium perf.*; three *Sulphur iod.*; and twenty-five *Bryonia*. Quite a number of cases affected alternate sides of the throat and fifty-two of them recouped under *Lac can.* 200, in single doses. In fact the first case that exercised our skill went from bad to worse until we recognized the new infection, and, guided by the uvula adhering to the left tonsil, the patient received *Lac can.* 200, the resulting recovery being rapid and uninterrupted.

But our most signal success was in prophylaxis. Soon after we had collected data to work with confidence, we used *Gelsemium* 30 and *Natrum mur.* 30, dissolved in half-ounce of boiled and cooled water, given in tea-spoonful doses, in alternation, with an interval of four days between the two, and repeated for six weeks.

Some societies and large employers distributed these powders for the protection of their employees and their families, with signal success. We sold these prophylactic powders at specially reduced rates for the benefit of large families and for those who had faith in Homœopathy. The protection proved effective in 90 per cent cases.

Arsenicum was never used by us, although given a wide publicity in the press and is said to have been extensively used in Delhi and other places, because of that recommendation in the papers. It did not correspond to the *Genus Epidemicus*, but was recommended (as I learnt later) because Dr. John Clarke in his *Prescriber* (p. 211) recommends *Ars.* 3, pil. iii. 8h. for Siberian Influenza. *Infl.* 30, 2—4h has also been used for the same purpose, with what success is not known to the writer.

The most important observation made by me and my colleagues was that GELSEMIUM, a tropical plant, indigenous to India is suited to diseases that attack suddenly and develop quickly, run high temperatures and cause extreme prostration. The symptoms were not covered by *Aconite*, there being no anxiety, anguish or fear of death; nor by *Baptisia*, sensorium being not befogged. Is GELSEMIUM like *Arsenic* and *Phosphorus* both quick paced as well as slow paced, according to the nature of the disease and of the constitution of the patient? Or is it that the sharp heat of the Punjab plains makes it

act like *Aconite* ? I ask the latter question because many times medicines proved in cold climes of Germany and America fail to develop symptoms to which people in hot climates can respond. Must such drugs be proved anew in India to bring out their hidden genius ?

Perhaps the experience of other people will throw the necessary light. Many drugs have double facets : the pains of *Zona* were once stopped in two seconds by a few pills of *Mezer. 200*, while the same medicine has been observed to take hold of a constitution for months together without a repetition. Is *Gelsemium* like that ? Comments are invited.

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