

'LEPROMINIUM'— A NEW NOSODE*

(Preparations: Leprominium-H. &
Leprominium)-A)

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Introduction

Leprosy is considered to be a disfiguring, crippling and a dreaded disease prevalent in the tropical countries. The word leprosy has come from the Biblical synonym lepra. In Chinese it is called Mafung, in French La Lepre, in German Der Aussatz, in Norwegian Spedalskhed, in Russian Prokaze, in Japanese Rai, in Arabic Judham. In India it is called Kushtha or Kusht, which is derived from the Sanskrit word "Kushnati" meaning eating away. The treatment of leprosy sufferers throughout the history is one of the darker examples of man's inhumanity to man.

In the present days, this disease is found in the entire continent of Africa, northern part of Australia, many countries of Asia including China, Burma, India, Pakistan, Cambodia, Vietnam etc., South America and some islands like Hawaii, Indonesia, Papua, Solomon Islands etc. Although the European community had forgotten about this disease, at the beginning of 13th century there were 19,000 houses of leprosy patients in Europe. In Christian Europe, some eminent personalities of Medieval Europe who suffered from leprosy were Constantinus Maximus. (a Roman emperor), King Baldouin IV of Jerusalem, Robert the Bence of Scotland, Philip V of France and Henry IV of England. From 13th to 17th Century onwards it went on the decline in Europe because of improvement in living conditions. It spread to America in the 16th century through the immigrants of Europe. There are 4000 cases in U.S.A. From 1949-1979, 2053 new cases were reported from the States (including Hawaii and Puerto Rico). At present the total no. of leprosy patients in the world is 11.5 million according to WHO study group (1985).

Shushrat Samhita 600 B.C. contains a fairly good account of leprosy. It is interesting to know that until the advent of sulfones, in 1941, hydnocarpus oil was

the mainstay in the treatment of leprosy, which was recommended by Shushruta in 600 B.C. in Ayurveda. It was not until the discovery of the caustive organism Mycobacterium leprae by Gerhard Armauer Hansen in 1873 that the views about contagiousness became clearer. At one time it was thought to be hereditary. It is interesting to know that although it is not hereditary, the susceptibility of the offspring of leprosy-patients to this particular disease always remains high. Incidence of conjugal leprosy is surprisingly low (2-3%).

It resembles many diseases, but the disease produces directly or indirectly a state of depression which is quite unique. Many nosodes like Tuberculinum, Pyrogenium, Psorinum, Medorrhinum, Syphilinum have been introduced to homoeopathic materia medica. The multifaceted affections of this disease and the prevalence to many conditions as described, inspired the author in studying and introducing LEPROMINIUM— a new nosode.

Method

Symptomatology of many nosodes have been mainly worked out clinically on the reactions of the patients. Clinical evidence shows that these nosodes, when prescribed on these indications are quite useful.

Signs and symptoms were collected from about 100 patients, suffering from various types of leprosy. Signs and symptoms observed in 25 or more patients are mentioned in block letters. Signs and symptoms observed in 15 or more patients are underlined. Signs and symptoms observed in 5 or more patients are only reported. Symptoms produced by Dapsone, Rifampicin etc. were carefully eliminated by studying the toxic effects of these drugs from books of pharmacopeia and from papers of eminent Leprologists who presented papers in International Congress on leprosy. While compiling the drug picture of Leprominium. 6 fresh cases were taken who had not received Dapsone or

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other medicines against leprosy. Preparations were made in two ways viz. 1) From a leprosy nodule from the ear of a patient where microscopically lepra bacilli were demonstrated—Leprominium-H 2) Lepromin which is used for finding out the reactivity of the patient and which is prepared from the lepra bacilli cultured on the foot web of Armadillo—Leprominium-A. The preparations were made upto 30x and 30c according to homoeopathic pharmacopeia. Leprosy IM was obtained from Ms. Nelson Homoeopathic Pharmacy, London. (Source of this preparation was inquired of but no answer was received). These preparations were tried in patients (non-leprosy patients) with similar symptomatology. The symptoms which disappeared have been marked with two sidelines.

Signs and symptoms reported by some reliable sources like physicians working in leprosy hospitals for many years, authors like Dharmendra and others have also been incorporated.

Patients who had some pathology e.g. Psoriasis, joint pain etc. were prescribed this remedy. Cases with only mental symptoms were not prescribed this medicine as in a short time one may get a false impression of the patient getting better. The medicine was prescribed as one dose prescription followed by placebo. For the above reason only it was not possible to carry out double-blind trial. Some symptoms like religious, desire for white clothes or aversion to black clothes may take time to disappear, but when these symptoms were found useful in selecting the medicine and when it relieved the patient in general, the symptoms have been sidelined.

Observation

Symptomatology Collected From 100 Patients

People who come from villages and who work in fields, gardens, earth moving etc.—when they have to work with the soil were found *to be more affected*. (As patients admitted to this particular hospital were very poor this observation may have been made). In about 60% of the cases there is F/H of leprosy or H/O prolonged contact with leprosy patients. It is interesting to note that leprosy patients can suffer from tuberculosis, but tuberculosis seems to confer some sort of immunity against leprosy (Chaussinand). According to the miasmatic theory it should have all the three miasms viz. psora, syphilis, sycosis. Some may also say that it is tubercular miasm. But if this is so, then it is difficult to explain the observations made by Chaussinand. As it resembles many diseases, some of them being chronic and intractable and as this disease was widespread in many countries, lepra miasm may be considered as a separate miasm. It

affects the R.F. system so we find that there is
 || *tendency to easy suppuration*, megaloblastic and haemolytic *anaemia* and it is also seen in the form of
 || *tendency to catching cold*. It produces growth as well as destructive changes, and in destructive changes it resembles syphilis. It is as painless as syphilis. Surprisingly in 90% of the patients there was no H/O exposure or sexually transmitted disease. Minimum incubation period observed is as short as 3 months and maximum is 40 years so no possible causative factor was found.

The disease develops slowly so this nosode—should be useful in conditions which come up gradually and give rise to irreversible pathological changes.

Mind

|| RELIGIOUS MELANCHOLY. ATTRIBUTES THE DIS-EASE TO FATE. It can make an individual MILD or irritable.
 || LOATHING LIFE YET WOULD NOT LIKE TO COMMIT SUICIDE.

|| *Hopeful of recovery* FEELS NO ONE SHOULD SUFFER FROM SUCH A DISEASE.

|| Is *sympathetic* and *desires sympathy* yet in the initial stage secludes himself for he does not want others to know about his disease. Likes company.

|| *Meticulous*. Fearless. Weeping, WOULD NOT LIKE TO BFG. Would prefer to die than beg. Brooding. FEELS REJECTED AND DEJECTED. Feels others are selfish and therefore turns to God.

|| DESIRE TO PUT ON WHITE COLOURED CLOTHES.

|| *Aversion to black coloured clothes*.

Head

Vertigo with nausea < Opening eyes, < Sun. Weak feeling and blackout. *Premature greying of hair*. Alopecia. Hemicrania.

Eyes

PHOTOPHOBIA lachrymation bland or acrid < light, SUN. Redness of eyes without pain. Itching and agglutination of eyes. Sensation of lachrymation. Xerophthalmia.

|| *Iritis, iridocyclitis. Corneal opacity. Cataract formation—left to right. Cannot close the eyes completely*. Sleeps with eyes half open. Eyelashes drop off. Baggy swelling under the eyes. Ectropion Lagophthalmos. Interstitial Keratitis. Herpes simplex of the cornea. Trachoma
 || Squint.

Blindness. Glaucoma. Staphyloma. Scleritis. Conjunctivitis. Eversion of upper lid.

Ears

Chronic otorrhoea. *Thickening* and nodulation of ear. Rat-bitten appearance of the ear. Nodules on ear.

Nose

DEPRESSED NOSE. WAXY NOSE. FLATTENED TIP OF THE NOSE. Epistaxis < cold-wetting of head, washing face, sneezing, change of weather. Clinkers and scabs from nose. Atrophic rhinitis. *Sense of smell affected*. Offensive scabs from nose but patient cannot smell.

||Obstruction of nose. Atrophy of anterior and inferior turbinate. Perforation of septum. Collapse of the nose.

Face

WAXY OR OILY LOOK. OUTER ONE THIRD OF EYEBROWS LOST. *Eyelashes* lost, moustache hair lost in the middle. Alopecia areata. LIONINE FACE. Angioneurotic oedema, Anaesthetic patches on the face. Deformed and ugly face. Nodules on face. Thickened skin of the face with permanent transverse and vertical wrinkling. *Premature old look*. Nodulation and ulceration of nose and lips. Facial paralysis. Ape-like face. Infranuclear type of facial palsy. Trigeminal neuralgia. Numbness and cobweb sensation. Anaesthesia of the face.

Mouth

Flat topped nodules on lips. Swelling of lips. Gingivitis. Turgid and swollen gums, shiny and purplish in colour (Miranda and Miranda) Gums bleed easily-Decreased sensitivity to pain. *The upper central and lateral incisor teeth drop off*. Teeth become loose because of changes in the bones which secure the teeth. Pulpitis, Glossitis. Deeply fissured tongue. Nodules on tongue specially on the anterior part. Small ulcers. Oral mucosa becomes tinged with yellow-looks pale. Perforation of hard palate. Infiltration and nodules on uvula and soft palate. Uvula may be destroyed due to ulceration. Uvula may become adherent to the soft palate.

Throat

Constriction of pharynx. cicatrices, laryngeal constriction. *Hoarseness of voice*. Complete loss of voice. Difficulty in breathing (True vocal cords are not involved).

||Sensation of something stuck in the throat.

Stomach

Appetite normal. Thirst increased or normal but DESIRE FOR ICE COLD WATER. Desires SPICY, MEAT, FISH, *Green chillies*, sweets, *saur*. *Aversion sweets, milk. Sour aggravates*.

Abdomen

||Flatulence-lower part of abdomen passing flatus. (may be due to Rifampicin).

Rectum

Normal bowel habits. Sometimes constipation.

3-4 semisolid stools with mucus without pain in abdomen.

Urine

Painful urination after walking in the sun. Intermittent flow. In some patients frequency increased. In lepromatous cases after recurrent lepra reactions nephrotic syndrome with normal cholesterol level. Glomerulonephritis.

Respiratory

||*Tendency to catch cold*. Chronic cough in some smokers with emphysematous changes. Some patients had pulmonary tuberculosis.

Extremities

Peripheral neuritis. Ascending numbness with icy coldness of hands and feet. First *numbness and tingling started* in arms and legs together < noon > continued motion. In some it started on right side. Ascending coldness. Sensation of ice in extremities. < warm clothes. Pain in extremities > massaging. Pain in calf muscles < exertion. Oedema of feet < evening, walking, hanging the feet down. Anaesthesia of hands and feet.

||*Hypopigmented patches thickened well defined raised patches*. Loss of hair and sensation in hypopigmented patches. THICKENED ULNAR NERVES. Neurofibromatosis like nodules. SHORTENING AND DEFORMITIES of limbs. TOES AND FINGERS LOST. Non-healing ulcers. Maggots. Gangrene. Thickened popliteal nerves. Wrist drop and foot drop. One sided paralysis. Paraparesis or paraplegia. *Pain in joints specially knee joints and back*. Osteoarthritic changes.

||Pain in joints < first movement > subsequent movement.

||*Heat of palms and soles*.

Sleep

Normal sleep. Feels fresh when he wakes up. Eyes remain half open during sleep. Frightful dreams. Dreams of dead people, dead relatives, unremembered.

Female

Early menopause. No desire for sex.

Male

No desire for sex. In some desire increased and nocturnal emissions. In some patients with repeated lepra reaction increase in the size of testis. Bilateral involvement of the testis. Aspermatogenesis. Oligosper-

mia. Later impotency-50% of the cases with lepra reaction mainly between the age of 21 and 30. Gynaecomastia.

Fever

Remittent or intermittent fever with infections. Malaria giving rise to lepra reaction. Fever with rigors. Not much of perspiration.

Skin

Depending on the type of leprosy FLAT MACULES HYPOPIGMENTED OR ERYTHEMATOUS, VARYING IN SIZE NUMBER AND LOCATION. ANAESTHESIA OR HYPOAESTHESIA OR THICKENED ERYTHRODERMATIC ANAESTHETIC PATCHES. Scaling of skin resembling psoriasis.

|| Exfoliative dermatitis, pellagra, ichthyosis. Deep cracks in palms and soles. Skin sticking to the bones giving a shiny appearance like scleroderma. Pemphigoid eruptions. Disseminated small nodules, pedunculated nodules. *Ringworm like lesions.* Discharging sinuses. Bullous eruptions Erythema multiforme, ulcerative lesions. Alopecia areata. || Itching all over. Tendency to scabies.

|| *Dryness of whole body. In many patients scanty perspiration.* || *Lupus vulgaris.* || *Dark brown small scabs.* || *Urticaria.* || *Dark pigmentation. Neurofibromatosis.*

Cardio-Vascular System

Hypertension:

Modalities

< Radiating heat, Sun. > Rest.

Family History

Tuberculosis, LEPROSY or no H/O leprosy.

Past History

Worms, REPEATED VACCINATION, *small pox, scabies, Bleeding tendency.* Tendency to catch cold. Tendency to suppuration. Pulmonary T.B.

Analysis of the cases where Leprominium was used

Preparation used:

1. Leprosy 1M (Obtained from M/s. Nelson Pharmacy) = L
2. Leprominium H - 30C = L - H
3. Leprominium A - 30X = L - A

An Interesting Case of Lupus Vulgaris Treated with Leprominium

A female child aged 6 years, came to the O.P.D. of Government Homoeopathic Hospital with a rough

Total No. of Patients	Those who recd. L = 10		Those who recd. L - A = 7		Those who recd. L - H = 9	
	O	CO	O	CO	O	CO
26	7	3	3	4	6	3
	R	NR	R	NR	R	NR
	7*	2¶	3	—	5	1**

* Includes 2 which are not relieved.

¶ Two patients were relieved initially but later the condition relapsed. One was a case of hypertension and the other was hyperacidity with psoriasis. The latter patient had taken very spicy food which may have aggravated her hyperacidity.

**A case of tubercular iritis in a child. The child says the vision is better, but the mother says she looks the same.

O = Observed
 CO = Could not be observed
 R = Relieved
 NR = Not relieved.

patch of skin just near the right cubital fossa for 2 years. Size roughly 2x4. Slight itching, thick scab formation with a raw surface underneath. She was given Mez. 30 I on the following indications: 1) Chilly, 2) Bad effects of vaccination, 3) Itching by touch. A small scab came off within a week but no further improvement. Waited for 2 months as Mez. being a deep acting remedy. I was wondering whether I should give her higher potency of Mez. when I noticed an anaesthetic patch on the back of the lady who always used to accompany her. She turned out to be the neighbour. The following symptoms could be gathered: 1) Religious, 2) Desire for white clothes, 3) Sympathetic and desiring sympathy for herself, 4) Tendency to catching cold, 5) Desires green chillies, 6) Obstinate skin condition.

She was given Lep-A 30 I. To the surprise of all scabs started coming off within a week. By the end of the month she was 80% better. It was noticed that immediately after the administration of the nosode she had semisolid stools with mucus and running of the nose for a week.

Conclusion

1. Leprominium should prove to be a useful nosode on the basis of symptoms similarity and also as an intercurrent remedy to clear the background.
2. Leprosy resembles many skin conditions like

leucoderma, nutritional discoloration of skin, lupus erythematosus, lupus vulgaris, neurofibromatosis, cutaneous sarcoidosis, leukaemia cutis, kaposi's sarcoma, subcutaneous phycomycosis, lymphoma, seborrhoeic dermatitis, erythema multiforme, alopecia areata, ringworm of the skin, psoriasis, lichen planus, pityriasis rosea, urticaria, scleroderma, lipoma, acne vulgaris, molluscum contagiosum etc. It should be useful in many of these conditions.

3. It can resemble progressive muscular atrophy, anhidrosis, gangrene, mangled toe, peripheral neuritis due to various causes, Bell's palsy, Dupuytren's contracture, nasal deformities, marfan's syndrome, carpal tunnel syndrome, tabes dorsalis, syringomyelia, spina bifida etc. Leprominum may be useful.

Leprosy also resembles syphilis to a great extent so this remedy should be useful in different stages of syphilis.

4. This disease traumatises the mind of the individual and gives rise to symptoms resembling anxiety neurosis, depression and melancholia, therefore this nosode should be useful in such conditions produced by other stimuli.
5. As it resembles many diseases, some of them being chronic and intractable and as this disease was widespread in many countries, "leprominum"

can be considered as a separate miasm.

6. It affects the R.E. system. As the immune system is affected this nosode may be useful in immune deficiency diseases like AIDS, leukaemia etc.
7. As Bacillinum and Tuberculinum bovinum have separate spheres of action Leprominum-H and Leprominum-A should have separate spheres of action. This can only be established by treating a number of patients.
8. In short the story of "Leprominum-patient" is like "Ugly Duckling". He/She may be ugly looking but he/she has a beautiful heart. He/She is honest, sympathetic, does not like to beg and is God fearing.
9. Most of the cases where Leprominum acted favourably; it was observed that they got loose stools with mucus after the administration of the nosode.
10. It should be useful for complaints that develop slowly but give rise to irreversible pathological changes.

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"Scientific and humanist approaches are not competitive but supportive, and both are ultimately necessary."

Robert C. Wood
