

## OBJECTIVE METHODS OF REMEDY SELECTION

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For many years attempts have been made to develop an objective instrument that would assist in the often quite difficult problem of determining the indicated remedy.

These attempts are based on the general fact that all things vibrate, and therefore radiate. The radiation may be of corpuscular or wave nature, which can be detected by the proper instruments.

Such radiations are also characteristic of all living matter, a fact Gurwitsch proved first with the detection of mitogenetic rays. Radiations are also characteristic of secretions of an organism, and of all organic and inorganic material.

For medical purposes, and particularly for the purpose of the homœopathic physician, the establishment of a relationship between the radiations and specific frequencies coming from the human body or its parts, such as blood or saliva, in their still fresh state, and the frequencies emanating from a drug was a matter of special interest.

The pioneering work in this broad field was done on the homœopathic side in the first place by Dr. Boyd of Glasgow and Dr. Guy Beckley Stearns in New York.

Boyd's Emanometer was the first instrument through which it was possible to demonstrate conclusively the existence of body and drug frequencies, and the first through which a relationship between both for the purpose of remedy selection could be demonstrated.

Although the exact nature of these frequencies could not be determined, the fact as such, and the possibility of its use for remedy selection, was recognized by an orthodox medical investigating committee headed by Lord Horder. Dr. Boyd arranged a number of blind tests for the committee using the Emanometer. The statistical evaluation of these blind tests, performed repeatedly under supervision of the investigating committee, gave a ratio which

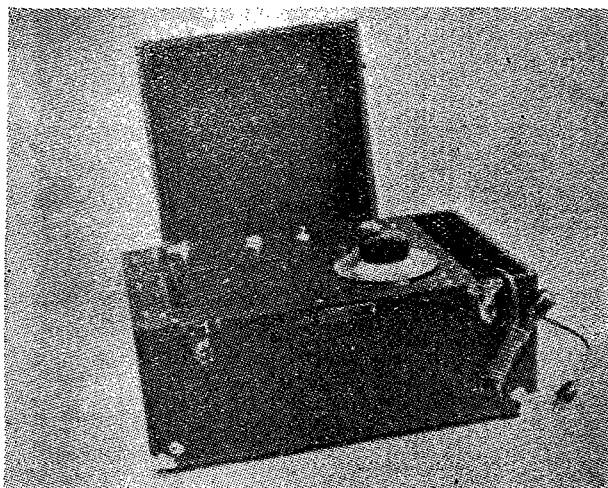
definitely and conclusively established the reality of the phenomenon.

However, the determination of the relationship between the energies of a blood sample on a blotter and a potentized drug through the Emanometer needs a subject besides the operator. This makes the procedure complicated, also more costly.

In order to make the procedure more practical for everyday office work, an instrument was required which would need only the operator. There are several instruments of this type in use.

We had the particular good fortune to obtain the assistance of some research engineers of the Bell Telephone Laboratories who, in their spare time, helped develop an instrument based on a circuit originally used by Dr. Morgan of Iowa.

This instrument is basically an untuned oscillator and an amplifier, which can be tuned by means of a variable condenser. To facilitate accurate readings, a vernier dial is provided, so that each division on the large scale can be read in tenths of a division.



*Instrument for the objective determination of the similitum.*

Two receptacles, which are a part of the electrical circuit are provided on the panel. One receptacle is for the blotter with

the specimen (fresh blood, or saliva taken at least one hour after the last meal or cigarette). The other cup or receptacle is for the bottle containing the remedy (glass has never been found to be a barrier for these frequencies).

The panel also contains a "scanning" plate that is capacitively connected to the circuit.

With the specimen in one cup and a remedy in the other, the "scanning" plate is lightly rubbed with the fingertips of one hand, while turning the variable condenser with the other. It has been found that as the condenser knob is slowly turned, a stickiness will be felt by the moving fingers on the scanner plate. This stickiness is sometimes strong enough to prevent the fingers from moving over the highly polished surface. The similar remedy will always cause the stickiness to occur nearest to the zero reading of the tuning condenser. Sometimes 2 or 3 remedies may have been considered as the simile. When these remedies are tested in the instrument, the proper one can be selected by means of the vernier scale, as the one that gives the lowest reading.

An analogy can be made between this method of selection and a radio or television in the respect that the specimen has its own frequency or frequencies. (A radio broadcasting station). The remedy (the oscillator in the radio or television receiver), if exactly of the same frequency as the specimen, will produce a "beat" frequency, known as the heterodyne, or intermediate frequency used in modern superheterodyne receivers. As mentioned above, the exact nature of these frequencies is not known, but they act in principle in the same manner as radio frequencies.

The instrument is mounted in a carrying case so that it can also be used at the bedside.

We now want to report the personal attitude and procedure with which we approached this method of remedy selection a number of years ago, and our results.

Our fundamental attitude in the beginning was one of great doubt, if not to say entirely negative. First, we considered, and still consider, the knowledge of the materia medica in conjunction with repertorial analysis the basis of all prescribing, and would not support a trend towards complete mechanization of remedy selection. However, there is no doubt that the determination of

the simile is at times difficult, and any aid in this respect would be welcome.

Before starting the test, the doctor has to make a study of the case to select likely remedies for the test, the number of which might range from a few to a dozen or more. This requires knowledge of the cause and of the materia medica. The test itself can then be made by any office help after some training.

We again wish to stress that we started working with the instrument with a highly critical attitude towards this type of procedure, but felt under obligation to make a careful investigation in spite of being rather prejudiced against the method. It required always some time in developing the proper sensitivity for working with the instrument, which may vary from operator to operator. However, after gradually acquiring the skill of using the instrument, by practicing (if possible) on each case—things began to happen.

In case after case the instrument showed its great value in determining the indicated remedy.

In the beginning, I tested the instrument itself in the following way. If there was a case in which, for instance, *Bryonia* was without the slightest doubt the indicated remedy, I put *Bryonia* with a number of remedies and compared them all against the specimen. I never looked at the remedy labels until the test was finished. In this case *Bryonia* was the drug producing by far the strongest reaction with the instrument.

Such experiments I made repeatedly with similar results. In general, when I was pretty sure about a remedy as the simile in the case, this remedy came mostly also in the test with highest rating.

Such critical checks and the accumulating evidence of countless tests proved the validity of the phenomenon, and turned me from a skeptic to one who became thoroughly convinced.

I used the instrument constantly, when in doubt, or if the patient can only communicate by mail, having him send the case history and findings, together with a specimen on a blotter.

Also from the purely practical and psychological point of view the instrument has its advantages. The patient sees "a

(Continued on Page 369)

dizziness and ear buzzing improve through cold drafts and cold water. Also itching and burning of the feet improve after uncovering them. Otherwise, other complaints improve with heat.

*Modalities*—All symptoms and nervous complaints are worse from 3 A.M. on, at noon, night and by cold. They improve from heat (except head congestion, skin itching, and the venous blockage of the legs). They improve after pressure and worsen from heat, humid weather and the sun. Complaints are left-sided.

—*The Jounl. of Am. Inst. of Homœopathy, July-Oct., '59*

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(Continued from Page 354)

machine at work," whereas our whole work is otherwise "invisible," being of mental nature, and therefore not always impressive to the average patient. Usually patients were quite fascinated by the instrument, particularly when its nature and purpose was explained.

We feel now, after several years of using this instrument in a spirit of critical inquiry, and after having made innumerable tests with it, that its general use as an aid in selecting the simile will be of greatest value to the profession.

—*Jounl. of the Am. Inst. of Homœopathy, July-Aug., '59*

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