

The Bicentenary Celebrations were opened in London on May 5th by an Oration given by Dr. Frank Bodman at the Royal Society of Medicine entitled :—

HAHNEMANN AND HIS PATIENTS

DR. BODMAN

MR. PRESIDENT, MY LORDS, LADIES AND GENTLEMEN,

This important occasion requires an orator to do it justice, but I am no Mark Anthony. A plain blunt man in my case is no disguise.

What I am hoping to do in the next half-hour is to take you back with me through two centuries, so that together we can appreciate what manner of man this Doctor Hahnemann was. But to do this we have to discard a good deal of apparatus, a good deal of knowledge, and a good many theories.

First we must step down from our motor cars; we must turn out our black bags and remove the blood pressure apparatus, the antibiotics, the sulpha drugs, the clinical thermometer, even the stethoscope.

Going back only a century will take us no further than Florence Nightingale and the beginning of the professionally trained nurse. If we go back further we must forget all bacteriology, anæsthetics, radiology, a good deal of our pathology, the germ theories of Pasteur, the cellular pathology of Virchow. It doesn't seem to leave us much.

Two hundred years ago confronted with a patient, our first objective was not to transfuse him, but to bleed him—even laymen carried lancets for this purpose. Louis Phillipe, the French King, always carried a spring lancet with him and used it on his staff if they had a violent attack. Indeed it was considered criminal negligence not to bleed a patient. Goethe, when over 80, after a serious hæmorrhage, was treated with a prolonged venesection. We should have been taught that most diseases were due to an excess of blood or plethora, or else to disease substances circulating in the blood. These acridities had to be cleaned out by venesections, cuppings,

giving emetics and purgative medicines, by making the patient sweat and salivate profusely.

A robust constitution was necessary to survive an illness and its treatment two centuries ago.

Samuel Hahnemann came from a family of artists, painters on porcelain, at the famous Meissen factory set up near Dresden by the Elector of Saxony, Augustus the Strong. He was a fanatical collector of Chinese porcelain, and once exchanged a regiment of dragoons for a set of forty-eight vases.

In the end, when the Treasury of Saxony was running dry, Augustus employed a young refugee alchemist to make gold. When the young alchemist failed, he was set the task of making porcelain, and in this he was eventually successful and the factory at Meissen was established and artists were invited to work in the factory. Among these was the father of Dr. Hahnemann.

The Seven Years War began a year after Samuel was born, and Frederick of Prussia occupied Dresden that autumn, and looted the factory thoroughly; in addition many of the artists were forcibly transferred to Berlin where the Prussian king was setting up his own rival factory. It was not until Samuel was eight years old that the Prussians relaxed their grip on the Meissen factory, and in the next few years there were many changes of management. The factory artists were sent on a tour of European factories to search for inspiration and a French artist was introduced to meet the competition from Sevres.

In those first eight years Samuel probably experienced poverty and hunger. We know that his father was unable to afford school fees. It is clear that these experiences left an indelible impression on him, as in later years, when advising his pupils about fees he reminded them that they had to look after themselves and their families. He recommended cash fees and no credit, and stated that as a result, at 75 he was in a position to leave sufficient to his eight heirs, certainly an economic status far better than his father's—who sent him off to the University with £3, the last money he received

from his hands. Not that Hahnemann thought any the worse of his father—indeed he referred to him as the best of fathers. He wrote of his father that “he had found for himself the soundest conceptions of that which is good and can be called worthy of man”. The elder Hahnemann appears to have educated his children and brought them up on the principles of Rousseau. Dr. Hahnemann himself translated into German a French Government publication on education based on Rousseau’s principles—and the translation begins with the motto from Rousseau’s *Emile*: “The earliest education is the most important—the education of man begins at his birth.” One father boasted he was bringing up his own son in accordance with Rousseau’s precepts. Rousseau coolly replied that he truly pitied the boy. Perhaps his insight was right—for the way of the school boy whose parents are pioneers in revolutionary educational methods is fraught with difficulties and perhaps Samuel Hahnemann had a precocious introduction to the stresses belonging to a minority group.

However, when Samuel was 15, his father made his submissive and most obedient petition to His Serene Highness, Gracious Prince and Master, that his son should be admitted to the Prince’s school at Meissen. There he came under the influence of a remarkable tutor, Magister Müller, and in that school he remained, half pupil half usher until he was twenty. At the same school, some twenty years before, the philosopher Lessing had been a pupil. Lessing who “rejected the praise of such patriots as would make him forget that he was a world citizen”. Specializing in languages, the Prince’s School turned out cosmopolitans rather than fanatical patriots.

Germany at the end of the eighteenth century was in the grip of a harsh inescapable feudalism. Cut off from colonial trade, held down by foreign armies of occupation, who were far gone in the evil habits of pillage and peculation, drained of men and bled white for money, it was only from the tiny courts and sheltered backwaters, that the writers wrote for each other or sought the patronage of a prince. And this was true even for such intellectual giants as Goethe or Schiller,

Germany was almost an entirely agricultural country without flourishing industries or an independent prosperous merchant or manufacturing class. There were the old-established handicrafts, the weavers of Silesia, the cutlers of Solingen, the clock and toy makers of the Black Forest, but no middle class as we understand it today.

Hahnemann's father, by breaking away from the traditional Lutheranism, freed his son from rigorous orthodoxy, pedantic pedagogy, and disciplinarian control. All the hopes and expectations which the Lutheran churches had disappointed, were turned to the idea of world civilization, and the religious instincts to science, and literature and art. For the young German intellectual the constraints of feudalism were an incitement to withdraw into himself—to find compensation in professional activity in science and in culture. Dr. Hahnemann himself gives us no clue to the motives behind his choice of medicine as a profession. All we know is that on leaving school at the age of 20, his farewell dissertation was on the wonderful construction of the human hand.

We know he had a heroic conception of the physician and the nurse, "two people chosen by God, thrown into the battle at its hardest like forlorn sentries close to the attacking enemy with no relief. They strive to attain a citizen's crown amidst fatally poisonous atmospheres and overcome by auguishing cries and dying moans".

This does not resemble the classical picture of the Garden of Aesculapius—cool, calm and leisurely—but rather forecasts Luke's picture of the bearded doctor in the country cottage.

But if this was Hahnemann's conception of a doctor's life before he began his studies—he must have had a rather different initiation when he began his life-work at Leipsig University. He had been given free passes to the lectures on medicine by a Dresden doctor, but the university professors had neither clinic or hospital at their disposal. Their lectures dealt with theories and systems of medicine, but there was no opportunity for practical experience.

He moved on to Vienna, where he worked in a hospital under Dr. Quarin, physician in ordinary to the Empress Maria

Theresa, where he had opportunities not only in hospital practice but in a fashionable private practice. Quarin recommended him as a family physician to the newly appointed Governor of Transylvania, and during the time of this Hungarian appointment, he saw many cases of malaria.

He wrote his M.D. thesis on cramp, which was accepted at the University of Erlangen, when he was 24. The next five years were spent in a restless search for an appointment that would support him and his family and at the same time afford him sufficient leisure to acquire further knowledge.

But he was dissatisfied with the results of the practice of medicine as taught. At 29 he published a little work *Directions for the complete cure of old wounds and indolent ulcers*—note the complete. He writes: "the majority of physicians refuse to treat this condition and leave it to the barber surgeon—to shepherds and to hangmen—surely more from ignorance than disgust," but he adds, "he who has had as many opportunities as I to make observations . . . who is induced by his desire for the welfare of his fellow beings to think and act for himself, he, who like myself feels hatred for . . . any kind of recognition or great name, and who eagerly endeavours to act and think independently . . . will see excellent results which is the greatest reward an honest physician can expect—

Here is the freethinker coming to the fore. He goes on to write—almost all our knowledge of the healing properties of "natural as well as artificial products is derived from the crude applications of the ordinary man. The importance of the so-called household remedies draws (the physician) more and more to simple nature." Is this not an echo of Rousseau? But further disillusionment was in store. In 1792 the Emperor Leopold II of Austria died suddenly. This monarch had raised high hopes of preventing a threatened war and his death was a tragedy. Dr. Hahnemann was convinced from the medical bulletins that the specialists had killed him by four venesections in 24 hours and did not hesitate to communicate his opinions to the press.

Were the obstacles to the attainment of simplicity and certainty in practical medicine insurmountable? "After the discovery of the weakness and misconceptions of my teachers and books, I sank into a state of morbid indignation . . . I was about to believe that the whole science was of no avail and incapable of improvement. Attending to patients in the way our books suggest, it was to me a piaculum that I should be continually groping in the dark.

"My sense of duty would not easily allow me to treat the unknown state of my suffering brethren with these unknown medicines. The thought of becoming in this way a murderer . . . was most terrible to me, so terrible and disturbing that I wholly gave up my practice in the first years of my married life. I scarcely treated anybody for fear of injuring him.

"But then children were born to me, several children, and after a time serious illnesses occurred which in tormenting and endangering my children made it even more painful . . . that I could not with any sense of assurance procure help for them. I gave myself up to my own individual cogitations and determined to fix no goal for my considerations until I should have arrived at a decisive conclusion."

Perhaps your comment is—the young doctor was in the throes of a depressive attack—but wait a moment, listen to the most famous psychiatrist: "I have even given up my lectures this year in order not to talk about things I do not yet understand." "I have become a therapist against my will."

Freud describes himself as isolated, stagnant, resigned. Every now and then he wrote "ideas whirl through my head, which promise to explain everything and to connect the normal and the pathological, and then they disappear again—and then one strenuous night last week, the barriers suddenly lifted, the veils dropped and it was possible to see all the way. Everything fell into place—the cogs meshed—the thing really seemed to be a machine which in a moment would run itself."

A similar process took place in Hahnemann's mind a century before.

In 1790, translating Cullen's *Materia Medica*, he criticized the famous Scotch physician's opinion on the mode of action of Peruvian bark—the source of quinine.

You will remember that Hahnemann had already been interested in malarial infections when he was practising in Hungary. He was familiar with Sydenham's researches with the Peruvian bark brought back to Europe by the Jesuit fathers; and how Sydenham had differentiated the malarial from the non-malarial fevers by their response to treatment with quinine. He had already observed that substances which produced some kind of fever (such as very strong coffee, pepper, arnica, ignatia bean, arsenic) had some effect on these malarial infections: as an experiment he took a large dose of Peruvian bark twice daily, and in brief, all the symptoms usually associated with malaria, yet without the actual rigor, appeared in succession; Hahnemann's interpretation was that the Peruvian bark, used as a remedy for malaria, acts because it can produce symptoms similar to malaria in healthy people.

In the next year, translating another *materia medica*, he makes the generalization that all substances stimulating a counter irritation and artificial fever, if administered shortly before the attack are deterrent to intermittent fever.

But it was another five years before he published his essay on a *New Principle for Ascertaining the Curative Powers of Drugs*. In this paper he pleads for the investigation of the effects of remedies by experiments on the healthy human body. "Every effective remedy incites in the human body a kind of illness peculiar to itself one should apply in the disease to be healed . . . that remedy which is able to stimulate another artificially produced disease as similar as possible—*similia similibus curentur*. He had extended his generalization from fevers, and specifically states that this principle is applicable particularly in chronic diseases.

As proof of these assertions Dr. Hahnemann quoted a number of medicines tested.

It was this experimental approach that marked the great advance in practical medicine which we owe to Hahnemann—others from Hippocrates down to Paracelsus had formulated

the law of *similia similibus*—but Paracelsus lacked the sure foundation of experiment on the healthy and trusted almost entirely to a laborious and empirical testing of medicines on the sick.

Do you remember your Robinson Crusoe?—how after nine months on the island he contracted malaria and felt that he would die. And how being without medicines, in his extremity of despair, he opened a chest and found some green tobacco. "What use to make of the tobacco I knew not, as to my distemper or whether it was good for it or not—but I tried several experiments with it." Crusoe chewed a raw leaf, made a mother tincture of the tobacco in rum and drank that, and inhaled the smoke from burning leaves, and in three days was cured.

Did Dr. Hahnemann in his despair remember Robinson Crusoe? It is more than likely that it was one of the first stories he had read. For Rousseau had recommended *Robinson Crusoe* as the first book he would give "Emile"—and we know that Samuel Hahnemann had been brought up according to Rousseau. Defoe, the journalist, was writing at the heyday of the Royal Society, a group of persons who met weekly for the performance and discussion of experiments.

Defoe's study of an isolated individual perhaps may have provided another line of thought.

The idea of the wholeness of man seems to have been lost by the medical classifiers and inventors of systems. Their classifications while all embracing and all inclusive covered everything about the illness they were describing but the patient himself. As an individual he was lost in the accumulation of detail. "Man as an individual was being left to the philanthropist—the public minded citizen."

Fortunately Dr. Hahnemann was not only a doctor but a philanthropist.

Two years after his experiments with cinchona bark, he had undertaken the care of a mental patient of considerable fame.

Once again he approached the problem *de novo*, and departed from the treatment customary at that time. Indeed

he appears to have anticipated the famous Pinel who on his appointment to the Bicetre Hospital in Paris in September, 1793, decided at once to remove to chains and fetters from the mental patients there. It is interesting to note in passing that Pinel, too, was violently opposed to blood letting and to the indiscriminate use of drugs.

But in June, 1792, the author, Klockenburg, was brought to Hahnemann, who spent the first few weeks in observation only, without giving any medical treatment. In reporting this case subsequently Hahnemann wrote that he never allowed any insane person to be punished by blows or other painful bodily chastisement. "The physician in charge of such unhappy people must have at his command and attitude which inspires respect but also creates confidence. He will never feel insulted by them. Their outbreaks of unreasonable anger only arouse his sympathy for their pitiful state and call forth his charity to relieve their sad condition."

The patient made a complete recovery and resumed his official position.

This whole time study of an individual patient over several months, free from the preconceptions and prejudices of current teaching is an illuminating example of Hahnemann's attitude to his patients. Again and again Dr. Hahnemann laid stress on the importance of careful observation. The natural history of disease and its cure was his subject. Unlike the law, he took care of the minutest details: *de minimis curet medicus*, and he had a genius for selecting the significant detail.

Three children in a large family had succumbed to a very bad attack of scarlet fever—"the eldest daughter who had up to that time been taking *Belladonna* internally for some other external disease of the finger joints was the only one who refused to sicken with the fever, to my surprise . . ." notes Hahnemann. "She was always the first to catch any other disease that happened to be prevalent." Hahnemann followed up this clue at once. He gave *Belladonna* in very small doses to the remaining children of this numerous family and they all remained well though it was not possible to isolate them from their infected brothers and sisters.

Because he was concerned with details that might prove significant, Dr. Hahnemann had a great distrust of the "lumpers". If he had been a botanist he would have been a "splitter". He wrote "the theory of simplification has been the pet hobby of systematizers"; naturally, therefore, he had no use for Dr. John Brown's theory that all patients could be classified into sthenics and asthenics, a theory that had a considerable vogue in Germany at the time.

Hahnemann had returned to Hippocratism—"the enlightened medical empiricism which demands that the physicians desist from speculations and limit himself to strict observations of the patient and follow each stage of the disease carefully until the very end . . . all signs of disease are important as well as their succession and the time of their appearance and disappearance. A good understanding of the course of the disease is sometimes more important than a knowledge of its cause. It certainly is most important when the cause is unknown." So writes a living medical historian.

It was exactly on these principles that he conducted his experiments—his provings—on the action of medicines on healthy human beings. The course of the artificial illness was studied in the minutest detail, and the artificial patients were questioned and cross-questioned until the doctor was satisfied about the genuine nature of the symptoms.

He wrote to his favourite pupil, Dr. Stapf: "Whenever my provers present me with such a list I go through the symptoms along with them, and question them right and left so as to complete from their recollection whatever requires to be more explicit, such as time, conditions under which the changes took place."

This demanded courage of a high order. For the sake of this research he risked his own health and the health of his children, for he carried out the experiments not only on his collaborators but on himself and his family. At that time nobody knew what effects the poisons and medicines might have.

Shortly after publication of his first researches a Royal physician remonstrated with him, saying he must be under-

mining his health, and recommended that such experiments should only be conducted on criminals.

The President of the Royal Society in his lectures on the Scientific Basis of Medicine says: "Clinical practice may satisfy our social instincts when we can cure the patient, but it cannot avoid bringing a sense of failure when we do not know what to do. All of us are driven by the nature of our calling to become investigators as well as practitioners." Certainly Dr. Hahnemann was the outstanding example of Lord Adrian's dictum.

What was so remarkable perhaps was that Dr. Hahnemann not only had the vision to realize the necessity for the proving of medicines, but he combined with this wide power of conceptual thinking, the genius to isolate the essence of the remedy from the hundreds of symptoms recorded by himself and his indeed new remedies are being tested on healthy human subjects according to Hahnemann's methods at the Royal London Homœopathic Hospital today.

But I doubt whether any physician has excelled Dr. Hahnemann in the clarity and penetration with which he isolated the distinctive features of the drug illness. His powers of insight into the variety of differences, contrasts, indeed the specific pattern of the symptoms produced have never been equalled. Moreover his experiences in this experimental pharmacology brought home to him, not only the differences in the properties of the remedies, but also the differences between healthy individuals. He soon realized that for some of the weaker medicines, the provers must be individuals that are healthy but of very irritable delicate constitutions. He found that some individuals are affected by a very small quantity and so it was wise to begin with the smallest dose. He learnt that all the symptoms a medicine can produce are not observable on one person—so it must be tested on many to ascertain its full range of action.

Among the modifications produced by the tested remedy Dr. Hahnemann attached great importance to alterations in the state of the disposition and the mind of the prover. He regarded these changes as of great significance and in applying

the results of his researches in the treatment of patients, he claimed that the state of the disposition of the patient often chiefly determines the selection of the homœopathic remedy.

For example, "*Aconite* will seldom or never effect either a rapid or permanent cure in a patient of quiet, calm, equable disposition and just as little will *Nux vomica* be serviceable where the disposition is mild and phlegmatic, *Pulsatilla* where it is gay, happy and obstinate, or *Ignatia* where it is imperturbable."

The great physicians of the past, our Sydenham, Boerhaave of Leyden, Van Swieten, Von Storck of Vienna, had all devoted themselves in the search for specific remedies for diseases. And long before their time Bacon in his *Advancement of Learning* tells the story of a famous Jewish physician who would say, "Your European physicians are indeed men of learning but they know nothing of particular cures for diseases. They are like bishops, they had the keys of binding and loosing but no more."

Hahnemann, though at first he was beguiled up the same side track, retraced his steps. He still searched for the specific, but for the individual patient, not for the disease.

This was one of the great contributions that Hahnemann made to medicine. He taught physicians to respect the patient, to listen patiently and without interruption to the details of the history of his sufferings. A cure depended on this individualizing examination of each case.

To the end of his life he maintained his standards, and at 82, when living in Paris, his first examination and investigation of a new patient lasted an hour and a half. One young patient recorded that he had to lie in bed and the doctor "examined me more minutely than any doctor hitherto had done".

Hahnemann was one of the great natural historians of disease and its cure. In his day, the little group of men "who devoted their lives to what was then known as natural history were whole men confronting a whole world, not human beings floating in a culture medium".

It has been said: "Vital knowledge can never be fully covered in words—to know the doctrine, one must live the life, and to live the life one must create a background."

Dr. Samuel Hahnemann certainly lived the life according to the truths that he discovered—and he certainly created the background in those tremendous compendiums of knowledge, the *Materia Medica Pura* and the *Chronic Diseases*. It was left for his followers to create the necessary institutions, the hospitals, the learned societies, the journals and the libraries. But Hahnemann was quarryman of the foundation stones : had he not earned his epitaph *hon inutilis VIXI* ?

—*The British Homœopathic Journal, Oct., '55*

MATERIA MEDICA QUIZ

FROM
HOMŒOPATHIC MATERIA MEDICA
DR. W. A. DEWEY, M.D.

CHELIDONIUM MAJUS

Where do we find the original studies of this remedy ?

In *Hahnemann's Materia Medica Pura*, and in the *British Journal of Homœopathy*, Vols. 23 and 24.

What is Chelidonium, when should it be gathered and what part is used ?

It is the greater *Celandine*, growing in France and Germany and in the United States. The fresh root, gathered in spring.

How should the tincture be made ?

Chop and pound the fresh root to a fine pulp. Enclose in a piece of new linen and press out juice. Mix with equal quantities of alcohol. Pour in well-stoppered bottle and stand for eight days in dark, cool place, agitating it daily, and then filter. Drug power, $\frac{1}{2}$. The tincture is brownish-orange colored, smells like *Apis mellifica*, is acrid, has a bitter taste and strong acid reaction.

What is the great characteristic symptom of this remedy ?

A pain under the angle of the right scapula,