

Generally, these symptoms are capable of being produced in all who take the drugs in sufficient quantity. In other words, they can be produced at will like vomiting, diarrhoea, drowsiness etc., and their intensity is relative to the size of the dose. They have been called the "absolute" symptoms ; everyone gets them. In addition to these symptoms there are others, which the earlier homœopaths called "contingent" symptoms, which depend on the special sensitiveness of the patient taking the drug. They cannot be produced at will and are obtained irrespective of the size of the dose. They are what Kent has called "strange and peculiar", and it is they which will guide you to the choice of the remedy. Do not try to learn or memorize the various schemes. They were arranged by Hahnemann in careful order from above downwards, and from within outwards, so that they might be available for ready reference. The idea of the *Repertory* was to carry this availability a step further. It is the "contingent" symptoms which will be found helpful when related to the absolute symptoms or what others call, the "nature" of the remedy, and these you will be expected to know when using the *Repertory*.

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A CASE OF GOUT—COMPARISON BETWEEN COLCHICUM, LEDUM AND BENZOIC ACID

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E. J., a 63-year-old Swedish overnourished male, called me March 2nd, 1954. He had been abed for four days with a recurrence of gout in his left knee. He had been stuffing himself with loads of aspirin, cinchophen and colchicine with very little relief. He had learned about Homœopathy by a satisfied neighbour and wanted to try it to end his torment. Profuse sweat

is dripping from his pale puffy face and neck—possibly due to the liberal doses of acetylsalicylic acid. The left knee is very tender, hot, slightly red and swollen: $2\frac{1}{2}$ " larger than the right knee. T. 100° F; P. 80; BP. 160/100. His wife mentioned his most irritable disposition. She had tried hot packs, but they seemed to make things worse.

Here is a definitive history of gout starting in 1940 in both feet and recurring yearly. For the last 2-3 years the knees have been more affected. This last bout started with a head cold, some fever and pains in the left arm, then suddenly the localization in the left knee. He considers himself a very moderate man, smokes a pack of cigarettes a day, takes only two drinks before his dinner.

The picture is none too clear-cut due to the interference of the heavy suppressing medication, but *Ledum* cc t.i.d. is prescribed and cold applications advised.

Lab : Blood uric 5.7 mgm% (normal 2.5%)
 HGB 11.8 gm—75%
 RBC 4,120,000, appear normal. Corrected Sed. Rate
 (Wintrobe) 38 mm/hr
 COL. IND. .91

WBC	8,900	Eosin	5%	Stabs	9
Poly	69%	Baso	0	Juv.	4
Mono	4%	Seg. Neutro.	56	Myelo.	0

Course :

March 4th—Better. No more fever—T. 98° F, P. 72; marked aggravation after midnight—cramps in the left calf, white tongue. The knee looks better, $\frac{3}{4}$ " less circumference. Continuation of the remedy.

*March 5th—*The left knee is much better, but the LEFT foot is now swollen and very tender and even the RIGHT foot hurts a little. Some improvement by changing position. Does not want cold applications any more. Very restless; sneezes a lot; pulse irregular. *Rhus tox.* 12. every three hours.

March 6th—Patient hasn't slept a wink. T. 100° F, P. 90, irregular. Now the right knee is involved, white tongue.

March 8th—T. 100° F, P. 84. Wants hot packs. He is worse by motion, touch and stretching the leg.

March 10th—T. 98.6° F. this morning. P. 75, more regular. BP 140/85. Very weak but eats better. *Colchicum* 200. t.i.d.

March 12th—No fever yesterday : T. 99.6° F, this a.m. P. 72. Right knee red and still swollen, also same medication.

March 14th—Three toes of the left foot hurt. Right leg fine. Scalp very sore.

March 16th—Better. Tries to walk. Left knee hurts a little.

March 18th—Slight temperature this a.m. : 99.7° F, P. 72. Left knee much swollen—wants hot compresses. I am struck by the bad body odor. The sweat has an acrid urinous stench. *Benzoic acid* cc every two hours.

March 20th—Dramatic change. Slept most of the day yesterday and the whole night, making up for the loss of sleep. T, and P. normal. The tongue is clearing up. Limbs almost normal. Continuation of remedy.

March 22nd—Much better—very few pains. Wants to get up and go to work. From that time on, the patient has taken back his heavy job of accountant. He has lost 20 lbs. His BP is 125/80. No recurrence of his gout to date. (June 15th, 1954).

There is no question that *Benzoic acid* was the simillimum after the symptomatic picture was cleared up by *Ledum* and *Colchicum*.

Below is a tabulated comparison of the three main gout remedies ; all have many similar modalities and need careful consideration for differentiation.

COMPARISON OF *Colchicum*, *Ledum* AND *Benzoic Acid*

	COLCHICUM	LEDUM	BENZOIC ACID
Typology. (a) subjective :	Poor memory. Marked irritability from pains or odors during fever. <i>Confused</i> but answer correctly. Stupor.	Very irritable, violent rage. Desire to be alone.	Forgets words when writing. Sadness, anxiety, when perspiring.
(b) objective :	Gouty, rheumatic diathesis. Poor venous circulation. <i>Hyperosmia</i> . <i>Chilly and cold to touch</i> .	<i>Chilly yet plethoric</i> , florid complexion, puffy tendency.	Uricemia, gout with irregular diuresis. Sycosis. <i>Chilly</i> . STRONG URINOUS ODOR of body. Dark brown urine with powerful horsey smell.
Aggravations :	MOTION, touch, mental effort. Lack of sleep. NIGHT. COLD. DAMP WEATHER—changing w. AUTUMN. Stretching.	WARM COVERS. stove. MOTION, <i>Night</i> . Injury, trauma. Alcohol. Eggs.	<i>Uncovering</i> , open & cold air. Changing weather. <i>Motion</i> . Wine.
Ameliorations :	WARMTH. Rest. Sitting. Doubling up.	COOL air & applications. Uric acid elimination in urine.	HEAT. PROFUSE URINATION. No amel. from sweat.
Causality :	Suppressed sweat. Insomnia. Rheumatic <i>visceral</i> metastasis. Decreased uric acid output.	Alcoholism. Insects stings. Punctured wounds. Trauma.	Rheumatic, gouty metastasis, also gonorrhoeic.
Sensations :	Painful electric vibration produced by touch & motion. Soreness.	Soreness. Acute pains change place suddenly. As if cold water was poured on the body.	<i>Wandering</i> pains, change places suddenly.
Topography :	LEFT TO RIGHT for rheumatism. Right to left for headaches.	FROM BELOW UPWARD, Left up, right lower. Feet.	LEFT SIDE ; LEFT TO RIGHT. Below upward ; inside out.

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