

## HOMŒOPATHY, GOVERNMENT AND THE PLAN

(1)

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*Mr. President, Honoured Guests, Colleagues, Diplomats and dear Students,*

It is with unique pleasure and deep sense of gratitude to our past masters that I stand before you with the privilege of addressing this first Convocation held under the General Council and State Faculty of Homœopathic Medicine, West Bengal, in this great city. This is the city where Homœopathy was first introduced by Babu Rajendra Lal Dutt of hallowed memory, who spent a princely fortune for dissemination of its principles and practice among his countrymen. This is the city where took place the dramatic conversion of one of the then medical luminaries of the first magnitude, to the practice of Homœopathy under the influence of Babu Rajendra Lal. I mean Dr. Mahendra Lal Sircar, M.D.D.L., C.I.E., who became the high priest of Homœopathy, spread its glory far and wide and gained thereby an international reputation for himself and his country. This is the city where the celebrities of Homœopathy like Dr. Berigny, Dr. Salzar, Dr. P. C. Majumdar, Dr. D. N. Roy, Dr. Younan, Dr. J. N. Majumdar, Dr. S. K. Nag, Dr. Baridbaran Mukherji, Dr. A. N. Mukherji, Dr. Dinabandhu Chatterji, Dr. T. N. Palit, Dr. G. Dirghangi, Dr. Nilmani Ghatak and a host of other talented Homœopathic physicians practised this healing art with credit and success and held aloft the banner of Homœopathy. This is the city where exist pioneer Homœopathic institutions and formost Homœopathic chemists and pharmacists. This is the city wherefrom Homœopathy has spread to all parts of India and its votaries are doing yeoman's service for the good

\* \* The Senate Hall, College Square, Calcutta The 12th February, 1956.

of the suffering humanity. And it is in this very Hall the Senate of Calcutta University met on the 31st August, 1878 to decide the question of propriety of election of Dr. Mahendra Lal Sircar as a member to the Faculty of Medicine as he was charged with practising "a system of absurd transcendentalism tinctured with positive quackery" and as such unassociable with the other members of the said Faculty, who claimed to cultivate and practice medicine as a rational, an inductive and a progressive medical science! To talk in the language of Dr. Sircar the meeting was one of the largest, grandest and most solemn that had ever taken place since the foundation of this University. Among the members present were found the most noted personalities of the time *e.g.* The Hon'ble Chief Justice of Bengal, Dr. Rajendra Lal Mitra, Hon'ble Ramesh Chandra Mitra, Hon'ble Maharaja Sir Jatindra Mohan Tagore, Pandit Mahesh Chandra Nayaratna, Rev. Dr. K. M. Banerji, Babu Durga Charan Law, Hon'ble Ameer Ali, Mr. W. C. Bonerji, Rev. Lal Behari De, Very Rev. Father Lafont, Munshi Tamiz Khan, Rai Bahadur, Rev. Dr. K. M. Banerji, Moulvi Abdul Latif, Khan Bahadur and others of cherished memories. The members of the Medical Faculty and the official element mustered strong to secure victory to the dominant Faculty. But the lovers and supporters of freedom of thought also mustered strong. A learned member of the Faculty, fired with zeal for orthodoxy, rose and spoke a few words about the absurdities of Homœopathy and the guilt of the offending member in recognising the Hahnemannian reform as the most advanced point reached in the domain of therapeutics. This was all the speech on the side of orthodoxy and conservatives. On the other side the speeches were the most magnificent and effective of any that were ever delivered in this Hall. Dr. Rajendra Lal Mitra, L.L.D. concluded his masterly speech with the following eloquent words: "It rested with the meeting to decide whether the University should be known to the public and posterity as composed of the representatives of those who condemned Galileo or of educated gentlemen of the latter half of the 19th century, whether the fellows should be the leaders of trade-guilds and professional jealousy or liberal patrons of science; whether they should be

men at strike ready to ratten those who did not fall into their ways or upholders of perfect freedom of thought and action ; whether they should be administrators of a moral Lynch law or the protectors of honest and independent inquiry into the arena of nature ; and it was earnestly to be hoped that their decision should not disappoint the public." The Senate, true to its tradition of supporting the advancement of learning, upheld its own resolution and thus triumphed. I presume that the voice of Rajendra Lal, raised in defence of truth and justice, might still be reverberating within the four corners of this Hall ; and might awaken a kindred spirit in the heart of the present members and fellows of the Calcutta University to incorporate Homœopathy under the Faculty of Medicine and to press the State Government for the purpose ! Well, much water has flown down the Ganges since then ; Homœopathy is rapidly gaining ground all over the world ; experimental laboratory verifications of some of the fundamental tenets of Homœopathy are forthcoming ; the dreams of Mahendra Lal and Rajendra Lal are going to be materialised ; a General Council and State Faculty of Homœopathic Medicine has been constituted and has started functioning since 1943. And it is a historic and highly gratifying occasion for us to meet in this very Hall after 78 years to hold this Council's first Convocation ceremony.

With our respectful homage to the memories of all the known and unknown pioneers and martyrs to the cause of homœopathy in our country and abroad I take the opportunity of emphasising some features in the activities of this General Council and State Faculty of Homœopathic Medicine, a report of which has already been read out to you by the Registrar of this Council. I will also make some remarks about the present status of Homœopathy vis-a-vis the State and the Central Government.

#### **The Syllabus of Study followed in the Homœopathic Institutions affiliated to the Council**

Here I like to make a special mention of the Syllabus of study which this Council has framed for the D.M.S. Examina-

tions Course. The Council long felt that the Syllabus was too heavy for the students. The variety of subjects and standards set for their study that had been crammed in the four years course, defeat their very purpose *viz.*, turning out of complete physicians who would be at the same time Homœopathic specialists. With this view it was decided to cut down as much as possible, the unnecessary theoretical and speculative portions from medical subjects both basic and ancillary, and to amend the Syllabus of the Homœopathic subjects *viz.*, Organon and Homœopathic Materia Medica, in such a way as to teach the science and art of Homœopathy critically enough in the light of modern medicine and to impress upon the students that the basic principles of Homœopathy as embodied in Organon lose nothing in their essential validity and therapeutic superiority when compared with the practices and concepts of the so-called modern scientific medicine. Instead of avoiding discussions or encouraging wholesale condemnation of the other school of medical thought a comparative study of the Homœopathic principles with those of modern medicine should be undertaken to develop critical faculties in the minds of Homœopathic students.

I like to mention also that the Syllabus of study framed by this Council has been practically accepted in toto by the Central Govt. of India (with minor modifications, *mutatis mutandi*) for the proposed five-years degree course in Homœopathy. The Council's contention that the Syllabus of study of non-homœopathic subjects should be determined by the Homœopaths themselves has thus been tacitly accepted by the Central Govt. of India. This will go a great way not to crowd out or to overwhelm the Homœopathic subjects under the pressure of heavy Syllabus of the Allopathic degree-course College as has happened in U.S.A. In this connection I like to clarify the position of the Council with regard to its endorsement for a five-years degree course standard in Homœopathy as envisaged by the Central Govt. of India on the recommendations of the Central Health Council and the Ad Hoc Committee on Homœopathy. There are two questions here, which should not be mixed up with each other. First, there is a point for imparting the highest type of training in Homœopathy. Secondly, there is the problem of

supplying medical relief to the people of our country. This Council and Faculty is primarily concerned with the standard of Homœopathic training and practice to the highest possible in order to enable Homœopathy to rise to its proper stature and the institutionally trained Registered Homœopathic practitioners to acquire status and rights and privileges equal to those enjoyed, at present, by the Allopathic practitioners. It has accepted the degree course as well as the post-graduate course of training in Homœopathy. As regards the second point, this Council has recommended for inclusion of other categories of Homœopaths (who are in a majority in the Homœopathic profession) in the Auxiliary Health personnel, a scheme proposed by the Govt. of India with regard to Allopathic system of medicine. Considering the vastness and poor economic condition of our people, dearth of properly qualified medical men to meet the problem of national medical relief, the vast difference in the standard of living, as yet, between the urban and rural population in our country. I personally believe that there should be graded medical service in the country for a long time to come. But the recommendations of the Bhore Committee, instituted during the British regime, still seem to sway the minds of our Governmental authorities and they will have nothing short of the highest standard and that being the only standard. That is why the Govt. of India has reverted to one standard of training in Homœopathy though the Third Health Ministers' Conference adopted both the college and school standards in Homœopathy and the Indigenous Systems of Medicine. But I am afraid that this Governmental policy of running a Rolls-Royce car on a road just suitable for a bullock-cart may not succeed in near future; and signs are not already wanting in the turning of the attention of the Govt. of India to the schemes of Auxiliary Health personnel etc. I hope our Government will take a leaf out of the activities of Russia and China in this direction.

#### Clinical Teaching

As regards clinical teaching and arrangement of wards (both in-door and out-door) in the hospital this Council has recom-

mended an original plan in the distribution of wards into Acute Disease and Chronic Disease wards in the scheme of a model College Hospital submitted to the Govt. of West Bengal. The Homœopathic School of thought stands for integrated Medicine, as it always views and treats patients individually and as a whole. So it is our idea that there should be specialists in Eye-Ear-Nose-Throat and Dental Diseases attached to the indoor and outdoor patients separately, who would help the Visiting physicians in eliciting precise structural changes occurring in patients, which are considered by the Homœopathic School as ultimates of morbid vital processes (*i.e.*, disease *per se*) and as such though not indispensable but often helpful in Homœopathic prescribing and also very often indispensable for correct prognostications and general management of patients. A certain number of beds for them may be kept ear-marked in different general wards. They will visit the out-door departments by rotation. They will have independent charges of those beds in case they happen to be Homœopathic practitioners with a specialist's knowledge in those subjects. They will also have to teach the students the up-to-date methods of investigating the nature of structural and functional changes and also the methods of arriving at a nosological diagnosis of such disease-conditions. With this view the Council suggested the new naming of different wards to impress the right Homœopathic orientation of ideas and outlook in the minds of homœopathic students from the beginning. This Council feel that the failure on the part of Homœopathic institutions to survive as completely separate institutions all the world over, is due to the fact that sufficient care and attention were never given to put the specific orientation of Homœopathic principles into practice in the said institutions heretofore. Further as the specialists are exaggeratedly interested in the progress of their own particular studies their services will be utilised by the general physicians who must possess a synthetic mind capable of embracing all sciences. So there should not be completely separate wards for the specialists. This Council feels that the watertight and arbitrary division of medical men as physicians and surgeons should go; and it wants to teach the Homœopathic

students that "a surgeon is a physician who can use his hands."

### **The Status of Homœopathy vis-a-vis the States and the Central Government of India.**

To assess the present position of Homœopathy vis-a-vis the State and the Central Govt. of India I will touch upon some of the important facts in the march of events in a chronological order :

(1) The Government of West Bengal is continuing an anomalous position with regard to the status of Homœopathic practitioners registered with this Council by withholding certificatory and other rights and medico-legal privileges which are enjoyed by Allopathic practitioners registered with the West Bengal Medical Council under the Bengal Medical Council Act 1914.

The only way to remove this anomalous state of affairs is to pass a legislative enactment on Homœopathy. It is a pity that inspite of repeated representations from this Council and attempts by individual members to place a Homœopathic Bill in the legislature, the Govt. of West Bengal has turned down the proposal though the Chief Minister assured the House on more than one occasion that his Government would bring a suitable bill for the purpose ; whereas Homœopathic Acts have already been passed in the states of Bombay, U.P., Madhya Pradesh, Travancore-Cochin, Bihar etc.

(2) I hope you are all aware of the Homœopathic Enquiry Committee and its report (1949) ; the third Health Minister's Conference accepting the H. E. C. Report (Aug.-Sept. 1950) ; the resolution of the Indian Medical Council adopting the modern medicine as the only officially recognised medicine in India and recommending the introduction of Homœopathy only at the post-graduate level (April 1952) ; the protest on the said resolution by this council and non-acceptance of that resolution by the Govt. of India (June 1952) ; Planning Commission's recommendations regarding Homœopathy under the First Five Year Plan as submitted by the representatives of the Homœo-

pathic profession (1952); the formation of an Ad Hoc Committee on Homœopathy with D. G. H. S. as chairman and its agreed decisions on all aspects of Homœopathy in its three sittings (1952); formation of an Advisory Body on Research schemes of Homœopathy (1955); and lastly, in pursuance of a resolution on Homœopathy adopted by the Health Minister's Conference at Rajkote (Feb. 1954) the calling of the representatives of three affiliated Calcutta Homœopathic Colleges by the Minister of State-in-Charge Public Health Dept., Govt. of West Bengal for considering the proposal of amalgamation of those colleges to provide a nucleus for the five-years degree course standard college and a public statement by him to that effect; and to our deep regret, the failure, so far, to materialise the amalgamation scheme for a variety of reasons. I am afraid if we still do not wake up to the realities of the situation we may miss the bus and future generation might not forgive us for missing such an opportunity at such a psychological moment. May we not expect the saner section of Homœopaths and elites of our society to rise up to the occasion and to defend the right cause as they defended and supported Dr. Mahendra Lal Sircar in the past? We are still of considered opinion that under the present circumstances it is possible only at Calcutta to have a fully-equipped Homœopathic institution with an attached hospital which can be manned by practising Homœopaths.

In this connection we fail to understand one thing. If the Govt. of India were really keen on developing Homœopathy on right lines straightaway, they and the Planning Commission should have provided money for upgrading the existing Homœopathic institutions or starting at least one new model Homœopathic College with Hospital on an All-India basis and this item should have occupied the top priority under the First Five Year Plan or even in the Second Five Year Plan which contains recommendations for founding of five new Allopathic medical colleges with a crore of rupees as capital expense and fifty lacs as recurring expenses for each of them. Whereas the Govt. of West Bengal has recommended only one lac of rupees to one of the Calcutta Homœopathic Colleges to upgrade it to the required degree-standard! On the other hand the item on



Homœopathic Researches has been given the top priority and the sum for that also has not been earmarked, as yet, but jumbled with the total sum of 37.5 lakhs of rupees covering research schemes on Ayurveda, Yunani and Nature Cure Systems. According to us this is something like putting the cart before the horse. As a result lots of correspondence are being held between the Central Govt., the State Govt., and the institutions concerned but nothing has materialised as yet and the term of the First Five Year Plan is going to expire by the 31st March, 1956. There is some improvement noticeable in this direction under the Second Five Year Plan. The Ad Hoc Committee on Homœopathy, in its meeting held on the 2nd April, 1955 to consider proposals for inclusion in the Second Five Year Plan in respect of Homœopathy, recommended financial assistance for upgrading colleges at Calcutta, Midnapur, Bombay, Lucknow and Gudivada (though the allotment is not yet specified); recommended Rupees ten lakhs for instituting clinical Research Units consisting of 25 beds to be reserved at each of the 4 Homœopathic Teaching Hospitals on payment of grant at the rate of Rs. 2,000/- per bed per annum; for other research schemes of a general nature, Rs. 5 lakhs; provided Rs. 1 lakh for testing of drugs in the upgraded Homœopathic Colleges at Calcutta or elsewhere; and for preparation of a Homœopathic Pharmacopœia, Rs. 50,000. Thus a sum of 16.5 lakhs of rupees has yet been allotted for Homœopathy out of Rs. 125 lakhs provided by the Central Govt. of India for development of Homœopathy, Indigenous systems and Nature Cure Systems under the Second Five Year Plan. It is to be noted that the Govt. of India has so far decided to upgrade only one institution out of the three affiliated institutions at Calcutta on the recommendation of the Govt. of West Bengal against the recommendation for the amalgamation proposal by this council which is the only body competent to advise the Govt. of West Bengal on all matters on Homœopathy. It is also a matter of great disappointment to find that while the other States like U.P., Bihar, Madhya Pradesh, Assam, Travancore-Cochin, Ajmere and Himachal Pradesh have allotted Rs. 36 lakhs, 26.15, 5.95, 1.15, 1, .50, .50 lakhs under the Second Five Year Plan,

the States of West Bengal, Bombay, Madras and Orissa have allotted nothing for development of Homœopathy.

Lately the Dave Committee is receiving much publicity through the press. This Committee with Sri D. T. Dave, Saurashtra Health Minister as Chairman, has been appointed by the Govt. of India to study and report on the question of establishing uniform standards of education for practitioners and regulation of practice of indigenous medical and Homœopathic practitioners of India. On the face of the Chopra Committee on Indigenous Medical systems and the Homœopathic Enquiry Committee, the Homœopathic Ad Hoc Committee, Advisory Committee on Research schemes on Ayurveda and Yunani and Homœopathy and the Central Health Council we fail to understand the rationâle of setting up of another Committee for similar purpose. As regards devising ways and means for stopping quack practices in Homœopathy and Indigenous Medical systems through this Committee we hold that the Govt. of India has approached the problem from its wrong end. In this respect reported recommendations of this Committee appear to be somewhat anomalous. Though the Committee has recommended that only registered Homœopaths, Vaidyas and Hakims, possessing "some recognised qualifications" should be allowed to practise, not only those qualifications remain undefined and there are as yet no official organisations in several states for registering the medical practitioners of those categories but the recommendation itself is qualified by an ancillary recommendation that the existing practitioners who are not qualified for registration, may continue their practice. The Dave Committee's recommendations regarding registration can hardly be implemented unless either standard institutions for imparting training are set up or the existing ones, at least, a number of them are upgraded. I dont want to dilate on this topic as you will find corroboration of my convictions from editorial articles lately published in the leading newspapers e.g. Amritabazar Patrika, the Hindusthan Standard, Anandabazar Patrika and Jugantar.

**The Role of Homœopaths in the present content.**

In the context of the present confusing and anomalous situation what part we, Homœopaths have got to play in shaping the future of Homœopathy? It may be that forces of disruption, destruction and obstruction are at work; it may be that self and vested interests seem to thwart the smooth progress of Homœopathy: it may be that some may seem to play in the hands of the powers that are not too sympathetic to the cause of Homœopathy: it may be that the present seems to be chaotic and future of Homœopathy dubious but great is truth indeed and will prevail. We should not lose heart or throw up the sponge. Tradition, authority, sectarianism and dogmatism are great obstacles on the way. But obstacles and difficulties are meant to be overcome. Strifes and dissensions, discords and disunities may hamper our progress for the time being but they are non-the-less signs of life's activities. It is a good augury that the Homœopathic profession in shaking off its age-long slumber and getting more and more conscious of its duties and obligations, its rights and privileges and of its shortcomings and practical difficulties. The life of our master Hahnemann is there to encourage us; the masterful will of his dynamic spirit is there to inspire us to intensify our activities; his achievements are there to keep us going and not stopping till the goal is reached; and his personality is always before us to take lessons from, in our life which as Swami Vivekananda puts it is "a process of unfolding and development of a being under circumstances tending to press it down."

To gain popular support we must have fully-equipped hospital, both general and special, to prove that Homœopathy can cure all sorts of curable dynamic disease-conditions and that it extends its therapeutic sphere far into the region of ailments which are commonly known as 'surgical.' To carry conviction to the scientific and 'intellegentsia' section of our people we must present Homœopathy in its proper perspective, both scientific and historical. We must explain to them the distinctive features of Homœopathic philosophy, its distinctive qualitative-synoptic-experimental approach to the study of diseases

and drugs. We must explain to them the apparently paradoxical nature of the Homœopathic Law of Cure; we must advance scientific proofs for the justification of the use of drugs in infinitesimal doses, Homœopathic potencies, as they are called—fortunately such proofs are forthcoming through Byod's researches on Emanometric workings and other electro-physical and biochemical phenomena. We must explain to them why Homœopathy justifiably deviates from the path of causal medicine, still the essential feature of modern scientific medicine. We must explain to them that to know the cause, nature and course of disease is not of necessity to know how to cure it—it may be a necessary preliminary step but it is nothing more. We must show them how Homœopathic concepts are on par with the most advanced concepts in Physics, Chemistry and Biology. We must point out how modern medicine is fast approaching the fundamental tenets of Homœopathy, discovered over a century and a half ago. We must indicate how Homœopathy falls in line with the trends in Medicine of the future and what part it will play in the Synthesis in Medicine. Real synthesis of the different medical schools will only be effected when laws embracing those of matter and life are discovered. With the growth of knowledge in physical sciences they have come to a stage where matter and energy have become convertible terms. It has still to synthetise matter and energy with life and consciousness. Some day it will happen but only after the fundamental conceptions of the present day physical sciences have gone a revolutionary change. Similarly real synthesis in the three systems of medicine will be brought about only after a revolutionary change in the fundamental concepts regarding the subject-matter of the medicine proper. Any premature attempt at synthesis in medicine will defeat its own purpose. We must put it before them that the Law of similars is not an original discovery of Hahnemann; and that it was observed by Hippocrates that the complaints or individual manifestation of disease should be treated by contraries and disease-condition, as a whole, to be removed by similars. There is also a distinct reference to Homœopathic system of treatment in Ayurveda under the style of *biparîtarthakârî* treatment besides the methods

of causal and symptomatic (*i.e.* *hetubiparīta* and *vyādhīparīta*) treatments. As regards the development of the western medicine Galen emphasised the first of the Hippocratic method where as Hahnemann, several centuries after, took up his second method. We must try to determine the exact scope and sphere of each method. It seems when an alleviation of the complaints or manifestations is the only possibility Antipathy or Allopathy or substitutive therapy may be the more effective treatment under certain conditions; but in all other cases where it is possible to remove the disease-condition, as a whole,—*i.e.* cure the patient—homœopathy is the method of choice. In fact, some are beginning to discern that the real mechanism of a homœopathic cure is by the Law of *Contraria Contrariis Curentur*, much more nearer to perfection when the medicament is more accurately chosen according to *Similia Similibus Curentur*. We must boldly assert that Hahnemann's originality lies in his discovery of the technique of preparing Homœopathic remedies, which rendered the therapeutic application of the Law of Similars easy and possible on a systematised and comprehensive scale. As science is nothing but knowledge reduced to laws and embodied in systems Homœopathy with the discovery of a Therapeutical Law, has raised Therapeutics to an independent scientific level in which different elements constituting knowledge of physiology, pathology, medicine, and pharmacology find a scope of infinite progress without detriment to its integrity as a whole. That is why Homœopathy is never reduced to therapeutic sterility as is often the case in the Allopathic system of Medicine with all the progress in knowledge in subjects satellite to Medicine. We must make it clear that the Homœopathic physician has no remedy for the name of a disease, has no specific for any disease by name, but it has a true specific for each individual case of disease. We must induce our Pharmacists to manufacture genuine homœopathic drugs and to be as much independent of foreign pharmacists and foreign supply of Homœopathic drugs. Above all, we, the practising homœopaths, must be well grounded in the fundamentals of the science and art of Homœopathy. We must possess a fair share of general culture and education in the fundamentals of natural sciences,

logic, philosophy, psychology and Biology—so that we can easily command respect and confidence amongst our clientele. Last but not the least, we must be alert in maintaining the dignity and prestige of our profession through our carriage and conduct. We must not stultify its fair name by using bogus degrees or diplomas or by being a party to set up institutions only to sell bogus degrees and diplomas and as such to hoodwink and exploit the ignorant mass in time of their dire distress and extreme physical agony.

I am afraid that Homœopathy with all its scientificity, philosophy, logicality and pragmatic therapeutic success, will continue to be an art practised by a minority for some time to come. This is because of the fact that modern science obsessed with the greatness of the physical discoveries and the idea of matter as the basic reality, has long attempted to base upon physical data even its study of mind and life and of those workings of nature in man and animal in which a knowledge of psychology found itself upon physiology and the scrutiny of brain and nervous systems. So long as mind and life along with matter are not accepted as fundamental verities of nature, so long as this re-orientation in outlook is not reflected in the field of Medicine the pursuit of medical art would not be as fruitful as it should be! As such a change in outlook would shake all pedagogies in Medicine, Hygiene, Psychology and Sociology to their very depths, I am afraid that the rank and file of the so-called modern scientific medical profession would not easily give up their previous faith; and there will continue a perpetual war of school against school, system against system to the great detriment of the profession and misfortune of the human race—how long, Heaven only knows!

It may be customary to speak a few words of advice and encouragement to the young deplomates who are about to enter into the life's battle that awaits them. But I leave it to our revered President Dr. S. N. Sengupta, a life-long teacher and a life-long servant of Homœopathy. He might tell you about some of the difficulties, duties and obligations of the profession which you have chosen. I will just quote to you a pithy remark of Sri Aurobindo in this connection; A doctor should be soft

like butter, soothing like treacle, sweet like sugar and jolly like jam. And I will conclude with the memorable words that fell from the lips of immortal Dunham in his valedictory address given to the graduating class of the New York Homœopathic Medical College on Feb. 29th 1872 :

"And at the close of long and busy careers, may you have the pleasant consciousness, not only that you have made some permanent additions to the common stock of knowledge for the common good, but also that many men and women have been the happier for your lives."

In the name of Hahnemann, Homœopathy and our great Mahendra Lal with whose memory this Hall will ever remain associated I thank you all from the bottom of my heart for the patient and kind hearing of what I had to tell this evening.

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(To be continued)

### **ÆTHUSA CYNAPIUM**

DR. H. LUNA CASTRO, M.D., MEXICO.

*Every medicament produces a special action in the body of man that no other substance is able to produce in exactly the same way.*—Dr. Samuel Christain Friedrich Hahnemann.

SYNONYMS—Æthusa Cynapium (Linn.), Fool's parsley, Dog parsley, Fool's cicely, False parsley, Lesser cicuta, Bastard parsley, Dog celery.

FAMILY—Umbelliferae.

CHARACTERISTICS—An annual plant very similar to the parsley that grows in cultivated lands and in fallow fields. It reaches a height of from 10 to 50 cms. Erect stem, branchy and fistulous, with reddish grooves and leaves of a dark green color, biotripinnisect with oval lanceolate segments, divided into mucronate lacinias, sheathed at the base, the superior are petio-