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## HOMŒOPATHIC DRUG TYPES IN PSYCHOLOGY OF THE HUMAN EMOTIONS

CHARLES B. REITZ, M.D.

It has been aptly stated that man may change methods and technic but man can never change nature's laws. The greatest boon to humanity was the brilliant and curious mind of Samuel Hahnemann when he was intrigued whilst engaged in the translation of the materia medica of Cullen in 1790. Even though he wrested the secret of the homœopathic law from the jealously guarded bosom of mother nature as far back as his earliest treatise in 1796, and with the advent of his Organon in 1810, it is well proven that this law of "similia similibus curentur" has not changed one iota since that almost a century and a half ago. True there have arisen some slight differences of opinions as to the application of this law, generations of disciples have propounded their individual tenets based on Hahnemann's precepts; men such as Hering, Romig, Boericke, might come and propose individual theories and concepts pertinent to their era of knowledge, yet with it all we still study our cases, prescribe our indicated remedy, just as Hahnemann advised us to do in the dim era of the century or more ago.

We still recognize disease as a manifestation of symptoms, and that our knowledge of drugs must be gleaned

by experimentation on the healthy human body. We still recognize the fact that we must consider the totality of symptoms, both subjective and objective. The patient can only tell us the subjective sensations, we must discover the objective ones which are hidden and not readily evident.

It is the objective symptoms which we are so prone to overlook or cast aside as being rather immaterial.

Although Hahnemann ascribed to the tenet that the totality of symptoms is necessary to formulate a criterion for selecting a remedy, yet with the passage of time he believed that the subjective manifestations were more important than the objective. Constantine Hering had a much firmer leaning towards the latter phase of symptomatology. With our modern insight into human physiology, the altered physiology into pathology, and the means at our disposal for a clear-cut study of the internal mechanism of the body, we are in a better position to evaluate these objective findings as additional symptoms in correlating our symptom complex for selection of our remedy. Wisely too, we avail ourselves of accessory measures to assist in the cure of disease by our more intimate knowledge of changes which have occurred in the human machinery of the host.

If Hahnemann spoke mainly in terms of the remedy alone, we now think of that remedy and in addition aiding the forces of our human dynamo by using accessory therapeutic agencies in line with modern research. If St. John spoke in Revelations today he would have used the electric torch. So, too, had Hahnemann lived today he would have availed himself of our modern aids in selecting his remedy, and probably, too, would have been in a better position to evaluate his selection of his remedy had he at his command our modern clinical laboratory to aid him in discovering just what is the fault in the internal mechanism of the patient. This study of the patient's internal mechanism is not limited alone to the clinical laboratory's chemistry and biology, but also applies to the psychological or psychiatric

analysis of the basic mental and autonomic background, and then a further analysis of the changes evident by engrafted psychiatric conditions which measurably change the basic type yet unalterably follow a planned pattern of trends in conformity with the drug type personality.

Probably all too often we come across a doctor of homœopathy who by his tenets and creed is a staunch fundamentalist, he is the one who can see or visualize nothing but the internal single homœopathic remedy. It is he who will blatantly prescribe medicines without a thought of any possible pathological processes which may be occurring in the body. If such could visualize his real totality of symptoms he would be amazed at the volume of objective internal symptoms available, and probably would measurably increase his success had he just spent a few extra hours studying especially his chronic cases for a lead in prescribing.

We well know that Hahnemann disavowed isopathic medication, yet Lux and Hering taught that the toxins formed in the body, when properly attenuated, would be capable of curing the very disease that gave rise to them.

Do we not today use our toxins for such a useful method of preventive and curative medicine? It is a fact proven in the laboratory that one can increase antibacterial reactions against pertussis bacteria by injecting successively increasing doses of killed bacteria. By neutralizing technics one can accurately test the titer of antitoxin so formed. If, however, the doctor were to give a very small dose of these bacteria as an initial injection, and then in place of subsequent injections of bacterins he would use five minims of aqueous sulphur 200 subcutaneously, he would be agreeably surprised to find that he is building up a much higher antibody titer than when he used the vaccine alone. Is this a concordant remedy or application? This same principle may aptly be applied to the therapeutic use of the bacterins. An initial of a therapeutic injection of the vaccine to given in but a small amount, then when aggra-

vation of symptoms make their appearance just using injections of sulph. 200, amelioration of symptoms are noted within 24 hours, when aggravation ensues, if it does, another sulphur injection is advised. This is not isopathy, it is homœopathy.

The study of basic psychological trends is still more intriguing.

Those of us who have spent years in psychiatric or psychological work can also realize there is a very material advantage to understanding homœopathic principles. If we thoroughly understand mental and autonomic reactions we have progressed one step in analyzing a mental reaction. It is this concept which Hahnemann has shown is so very vital and essential in prescribing a remedy and cure for a specific condition. It is only when we understand the basic mechanism of human reactions, the possibilities of their future, the possibilities of reversion to normalcy, then can we appreciate such case studies entail also a knowledge of the probable mental trends of drug-type patients, and with such an armamentarium the homœopathic physician is well fortified with weapons to fight any mental perversion. Let us consider such analysis.

In the ordinary walks of life, and quite apart from their physical and biological significance, the directing and controlling forces or influences of the emotions must be apparent. They express themselves in all our vital interests, in our social as well as in our national life. Broadly speaking, the entire fabric of human life, whether social or economic, whether civil or military, is organized for but one purpose, that of gratifying urges and desires natural to man.

Civilization itself, as a servant of culture, must indirectly serve the urge of human nature. Being a means and not an end, civilization is concerned with efficiency and material production. With all our refinements, with all our cultures and civilization, we are becoming emotionally anæmic. With the comforts of modern life, existence has been

decidedly reduced in colour and intensive value. For the thrills of real life and living, we are substituting emotional outlets in glamour, hazards, rapid pace of living and possibly the emotional fire of military exploits.

In the modern change so apparent in our social order, the transformation of emotions, the principles of rewards and punishments which are basic to morality and the chief means of securing submission and conformity, have been expanded in their influence and effectiveness by association and environment within an idealistic and mystic field wherein an appeal is made to the emotions governing the moral right to an established system of law and order. This concept is a marshalling of man's fears in securing social and moral allegiance. This same concept holds sway in a blind following of a religious tenet, the "fuehrer" of a people, patriotism en masse, and leadership deified. If any emotional crisis arises there is a grave possibility that such a crisis may provoke permanent injury to the individual's personality or character. Such change may and often does provoke problems for the medical man.

There is an inner man, a physical inner self, to whom we must ultimately attribute the real power of direction and control, this is the autonomic system. This may therefore be considered the true inner man because activity is so largely concerned with satisfying its needs. On the physical side we regard this system as man's prime mover. Feelings, emotions, impulses, desires and appetites are all of its making.

The brain is involved in emotions, but is not a part of the emotions, the seat is the autonomic system. An emotion is typically aroused in the presence of an exciting object, or in the course of stirring events. Undeniably sensations and feelings are the results and not the cause of the bodily changes. The stimulus object does not at first arouse a state of fear, or of anger, and then the visceral changes such as flushings, vomiting and palpitation ensue. We do not

meet the enemy, get frightened, and fight ; but we see the enemy, fight and then get frightened.

People are born with their emotions, and they are as permanent as are structural or physical creations. We are born quick-tempered or easy-going, bold or timid, fiery or sullen. It is by these natures that we recognize certain drug types of individuals. If resistance to discharges over the tension nerves is low, the individual will be excitable, the nux vomica or bella. type, he is prone to anger and to strong emotions. He is also apt to be thin and emaciated, the calc. phos. type, because of these emotions. The thyroid may be too active, and the adrenals over-functioning. On the other hand he may be the easy-going person, who is of even type, is not inclined to be irritable, the puls. type. Resistance within the sympathetic ganglia is high, it requires intense and prolonged stimulation to excite or unsettle him, thyroid function is low. Then we have the tenderhearted individual, inclined to be loving and affectionate, the causticum type. Such a person has a low threshold over the sacral pleasure nerves, the gonads are active. The fact is that in all emotions and temperaments the ductless glands play such a major part in determining the individual's emotional standard, the differences are often in direct ratio to the excessive or deficient secretions of the various secretory glands, and that often types are diagnosed as secretory faults for which the patient is absolutely irresponsible, inasmuch as these glands are subject to the influence and control of the pleasure nerves, and these nerves must be considered jointly in evaluating a sitting.

In his emotional life man shows a close kinship to animal creatures which is not usually true in his practical life. Under the sway of emotions he becomes a creature of impulse and action and ceases to be a person of thought, the thin veneer of civilization is removed and he becomes a primitive aborigine, ready to maim, kill, mistreat, without mental compunction, he is the animal at the "kill."

Man demands vicarious expressions. It is in play and the pursuits of a leisure hour that man's inner life is most clearly revealed, it is then we see the cravings and interests which lie deepest, there are not material or physical, but rather mental and emotional. These we do not see in everyday life and are only realized indirectly or vicariously. We seek refuge in "daydreaming," in art galleries, in lodges, churches, reading and other recreations. Play to us is often a vicarious splurge, a relief for pent-up and accumulated repressions. This readily typifies the daydreaming opium type patient. The "whoopie" is can. sat. type.

Emotional hysteria is no fiction of the mind, propagandists live and thrive on it, nationalistic leaders have not been slow in recognizing this, and they realize a strong emotional appeal is necessary to make men do and die, our igna. and puls. patients. They also have learned that to prepare men to trustfully and blindly follow them depends on preparedness made through earlier education. This is a psychological study and a shrewd investment made by totalitarian states. There is, however, a need for close association of the emotional and physical objectives, we must realize that values cannot exist in something external and independent alone, it must depend on interests and needs. Of indifferent value must be everything which is without emotional appeal. Life can only gain its significance and value from the existence of needs, the satisfaction of which is the aim of the individual and the group.

There is another approach which is not external, this is empirical and biological. It conceives of motives as a product of natural demand. An aggressor without moral right, slays and pillages, the nux. vom., the absinth or stram. patients. The moralist repudiates any righteous grounds for the aggression and therefore there is no moral force justifiable in retaliation, the caust., coccus and pulsa. patients. The biological approach is from an inner concept demanded by a temperament of motility and drive, refutes any moral right, it demands force with force, gleefully and

spiritedly, this is our conception of pure sportsmanship. This is our cocaine, arg. nit., and nux. vom. patient.

The control and direction of emotions is a social problem, as Prof. Cannon has pointed out, in reference to the energizing effects of emotions, if not too extreme, upon the bodily activities which the situation requires. Through the sympathetic impulses, and especially through adrenalin, the effects of fatigue are removed, metabolism increased, and the whole body energized to a degree unknown in calmer moods. These emotional states were of much more material benefit to primitive man for their attending pursuit and flights, mortal struggles and violent emotions which accompany them, than they are to modern civilized man. Our modern needs are of a different order, physical struggles and the violent emotions accompanying them are a menace rather than a benefit, however, we still today recognize these emotions in our wars and pursuit of our loved one even though caveman style has passed us by. These types are typically bella.

Personalities are mainly social facts which consist largely of proponent reflexes, habit formation ideas, thoughts and emotions. We should be concerned, not so much with the manner in which the emotion takes place, as with its frequency, strength and manner of release in a given individual, the bashful pulsa., faultfinding cham., hilarious hyos. In a word, we select certain fundamental aspects of behaviour and describe them with a view of evaluating the individual as a whole. A man's self-assertion, submission, quickness of temper, suspicion, pride and inferiority are all dependent upon the existence of other human beings toward whom these attitudes may be displayed. The hermit, gel. and igna. type, exhibits little personality, except in the sphere of pure intelligence, yet even here he may be lacking since intelligence is a fixed capacity for the problems of life, or stated in less behavioristic terms, it is the capacity for reasoning. The nature of intelligence is the ability to learn and profit by what is



learned, the hermit may lack that propensity. In this same realm is our capacity for observation or perceptual ability, and this is important, a person may see a mountain, but an artist will see beauty, the difference of calc. carb. and cocaine patient type.

Two other traits in the general adaptability field of intelligence are capacity for making mature decisions in crises, and the ability to adjust one's self to the group, its persons, its laws and environment. Here is the great field of usefulness of every individual of any account in man's scheme of living, this is the coff., cocaine, pyrogenium types. How often do we find individuals who in spite of character, vim and vigour, knowledge of a subject, his psychological analysis of contacts, his push and force, fails to make the grade, is in brief a "misfit." He is always in a hurry, emotional threshold is low, yet he never accomplishes dramatic objectives, typical igna. and stram. patients.

Just as some individuals are always bustling, talking and rushing through their duties and pleasures at a great rate, so also others have inhibitions with the tendency to block the release of certain motor impulses. These inhibitions make for uncertainty of decisions under duress and crises. They are the ones who have frequent motor accidents because of lack of "intuitive" judgment on the spur of the moment, or the commander of troops loses the golden opportunity to record a gain in position. They are the ones who ponder and ask "just what should I do?"—typical kali. phos. type.

Then there is the tenacious group who have persistence in a certain line of activity in face of obstacles and discomforts. This is "will power", some say stubbornness. It is not the recklessness of Pickett's charge, but the honourable defense and onslaught at Stalingrad. Pickett had the impulsiveness of cham., anac., nat. mur.; the Russians the stubbornness of silic.

Since feelings and emotions are the main constituents of personality, what do the emotions play in our daily life?

Are we choleric as *bella*. or phlegmatic as *gel*.? Do we have fits of anger, excitement, and eroticism so great that they are either uncontrollable, as *nux. vom.*, or else controlled with obvious efforts of repression, the *canth.* type.

Some persons have a characteristic mood on the affective side. They are permanently of the cheerful or gloomy disposition. Ever see a likeness of Napoleon in which he smiled? Some are of the suspicious type, timid, embarrassed, oversensitive, *silic.*, *valerian* type. Alexander Hamilton was a good example of this personality. Others may be of the pompous dignitary as Louis XIV *calc. carb.*, *ver. alb.*; General Gates, the snob, *pall.*, J. Edgar Hoover, the avenging nemesis, the *nux vom.*

The physiology of the forces which drive us is obscure. The original motive force arises from one or more of the proponent reflexes. Early in life a habit is formed and built upon these reflexes by the usual learning process and because of its high adaptability and affinity with the special talents of the individual, acquires a basic position in the action system. Since it began early in life and gradually and unconsciously penetrated his whole life, it is considered to be an end in itself. The driving force therefore is a potent habit or group of habits, which acquires a compelling force which controls the integration of other habit systems in the individual's development. This is the vim and vigour of the attack, their ambitions, desires, wishes and pushes with which the individual continues to be useful to himself and others. Without this the most educated person becomes a drone, the finest mind deteriorates. This may easily be the passing "knight of the road," and you might prayerfully exclaim: "There, but for the grace of God, go I." This is easily the *sulph.*, *merc. sol.*, *conium* type.

Having thus far rather sketchily reviewed basic created man, his drug type personality and reactional probability, we can readily evaluate a basic reasoning proposition upon which a material emotional metamorphosis may be

engrafted under changing environmental conditions, social, economic or business changes or reverses. By a better understanding of the past history or type of person we are dealing with, one is in a favoured position to evaluate a case showing mental changes, and thus study the case as a whole rather than the immediate picture presenting at the time of the possible acute mental illness. We are then passing the poorly defined borderline between the realm of the psychologist and the psychiatrist. It is the province of the homœopathic physician to thus better evaluate his case and prescribe appropriate therapy if he can delve into the past and constitutional makeup of the patient, and note the engrafted mental disease. The whole should form his totality of symptoms, and not alone the present acute mental reaction. It is properly pertinent to remember that a certain basic type of individual will exhibit trend symptoms common to the type. If for instance a man was normally of the high emotional threshold type of *pulsa.* or *gel.* and should in late life be inflicted with senile delusional type of insanity, it is conceivable that his basic personality trend will exhibit itself in his erotic symptom complex. He will not be the irascible *nux vom.*, the lascivious *selenium* or *sene.*, the filthy, ill-humoured *sulph.*, but his reaction will be mildly delusional, rather quiet, possibly low muttering delirium.

It is not the intention of this paper to delve into the psychiatric trends of the individual, only to remind you that whatever the case under advisement or treatment may be, one should not forget that although the single remedy selected may not cure the patient, it will so modify the course of the disease as to make the patient much more comfortable as well as relieving a great burden of the intimate family concerned. Just as we may not always hope to cure syphilis, yet we may so modify the disease as to make the declining years comfortable. And a further point to stress under such conditions is not to entirely rely on the internal remedy alone. Adjunctive treatment is as much

indicated in treating these cases as would be indicated in any other physical ailment.

It would seem entirely proper, before closing this interesting subject, to raise the point as to when is a personal normal and when abnormal. What is the yardstick over which one measures? To measure something one must have a standard gauge of some natural or artificial structure over which to measure. Just what constitutes normal man? This is indeed difficult to determine or define. Shall we judge others by ourselves? In the eyes of the British, Washington was a rebel, in the eyes of the Colonials a patriot. Shall it depend then upon which side of the fence one is resting? Shall the alienist tell us who is normal, when perhaps he himself might be abnormal from long association with enfeebled minds. It is only by taking a cross section of a given populace living under identical conditions that we can form a group action of a certain type, which we correlate as points of the measuring scale. If then we have a heterogenous mixture of reactions which appear as consistent in the largest number of individuals, such as emotional and psychological trends, and think of them as being relatively normal to a certain group, then we must think of going just one step further and consider reactions which step beyond the above described conditions and become distinctly abnormal. What then is mental sickness? This may briefly be defined as a prolonged *départure* from the individual's normal standard of thinking, feeling or acting. Any of the basic types of emotions or personalities may exhibit temporary or prolonged departures from their normal status, this then becomes an alien condition, for which the patient or family will seek relief. It is only if the interested physician will sympathetically and with rare skill and judgment completely review the symptom and patient complex that he can intelligently sit in judgment and help ailing humanity.

Instinctive intuition is a great asset to the physician when interviewing patients or contacting other individuals.

Very often one trained to observe traits and character of personality will recognize a wanting something when interviewing them, even by merely observing the person's mien, posture, facial features or reactions; one can at times notice a certain mental or emotional trait, which from past experience we know are borderline cases who easily may precipitate into unwanted emotional or mental reactions. Often we can notice certain traits which we may call the dementia præcox type. Such case may have no vestiges of mental symptoms, and in all likelihood will round out a useful life as long as not subjected to stress or strains. If the exciting factor presents itself, an attack of mental disease may be precipitated which may make a confirmed invalid of the individual for the remainder of his natural life. If one can thus recognize such a potential condition, and caution the family about the possibilities, one has won the first round in the contest with fate. In recognizing such types one naturally thinks of the type remedy, and when circumstances require it medication with the chosen remedy will ever so often work marvels.

The layman cannot recognize potentialities, the trained physician will. Usually courts of law are cognizant of these potentialities, and very wisely cooperate with alienists and mental institutions. They send wrongdoers to institutions for mental observation, depending on the trained skill of the medical man to advise either mental treatment or penal servitude.

Under stress of our modern life, and more particularly the reckless hazard and danger of military service, emotional stability must be most accurately balanced, else an explosion occurs. This most often is a deviation from normal emotional reflexes to the abnormal in the form of the psychopathic state. It is this form we so often encounter in everyday practice, the neurasthenic, the hypochondriac, the hysterics. Most of them are due to the maladjustments of the home, business or economic sphere. In them the dominant note is extreme motility of the emotions, from

joy to sorrow, from feverish activity to profound discouragement, from affection to hatred, from egoism to the most exaggerated generosity or devotion. Here we should readily recognize the basic drug type. It is by a proper prescription that we may be able to do wonders, but that does not cure the case. The cause must be removed. It is only by a close psychological study and conferences with the principles of the involved case, and "father confessor" suggestions and advice, that we can hope to overcome the difficulty and produce a balanced emotional harmony in the individual.

Today's greatest problem is that due to the war, the war neuroses. These invalidate thousands, and thousands more are in the offing. The four greatest factors considered are alcoholic excesses, stress of the life they are leading, privation and heredity. The doctors of today and tomorrow will do well to take cognizance of the professional demands that will be made upon them. If we are well prepared with a basic knowledge of man's constitutional makeup, his emotional and psychological trends, and the potentials of mental alienation, then we are in a position to do ever so much for these unfortunates. And if we are further fortified with the knowledge that we have at our command drugs which by proper use must surely work wonders, then we have at last reached the utopia of egotism, and perhaps should self medicate ourselves with can. ind. And then when we are back again to normal, let us not forget a very reliable remedy in sulph. to keep us out of the depths of abased senility.

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