

# THE HAHNEMANNIAN GLEANINGS

*with which is incorporated*  
*THE INDIAN HOMŒOPATHIC REPORTER.*

---

Vol. XVII

MARCH, 1950

No. 3

---

## EDITORIAL

### RELATIONSHIP BETWEEN MEDICINE AND BIOLOGY

It has been said that "medicine from the standpoint of science may be broadly regarded as a branch of biology—human biology, and the investigation of morbid phenomena, although allied to physiology, as sufficiently distinct to justify the recognition of a science of experimental medicine or clinical science." But, it will be our endeavour here, to draw a line of difference in the outlook and scope of medicine and Biology. An adequate exposition of this fact will serve to make the position or status of medicine rest on a firmer basis.

The subject-matter and aims of medicine differ from those of the materialistic biological sciences. *Medicine*, so to speak, says: here is the subject-matter of my study—life, health and disease. What am I to do in order to prolong life, reduce the duration and intensity of disease and prevent its occurrence? *Biology*, on the other hand, says: here is the subject-matter of my study—the living animal body. What is this living animal body? How can I analyse and describe it? Thus Biology is not interested in the duration of this animal's life or its sufferings. Biology's interest in the animal ceases when the answer to its question is given, and therefore it leaves off where medicine

begins. It delivers its product to the medical factory, giving no guarantee as to its duration, but only assurances that if some particular thing happens to it, the product will not last long. If Biology can give us no prognosis about the duration of life, why then are we taught biological sciences throughout the greater part of our medical studies, and why are we told by biologists that they supply us with the foundations upon which medicine must be based?

To the question "What is the animal body?" biology returns the reply "It is a machine". If we consider how biology arrived at this conclusion the only possible answer is: By contemplation of the animal, or to put it scientifically, by an *a priori* assumption skilfully disguised in the rôle of experiment so that the impression of an *a posteriori* conclusion may be given. In other words, biology pretends that it has come to the conclusion of determining the mechanistic conception of the living animal body through observations, experiments and inductive methods of reasoning; whereas the truth is that it has somehow got hold of the mechanistic conception of the living body to start with and its methods of observation and experiment have been adapted to this pre-conceived notion.

Biology, by the very nature of its subject-matter, can not use the experimental method to answer directly its main question, because it cannot fit the organs together according to a mechanical pattern and present you with an animal. Instead, therefore, it employs this method to answer the question, "What is the animal made of?" hoping or pretending to hope, that if the nature of the animal is known the answer to its main question, which is, "What is the animal?" will reveal itself. In an attempt to fulfil this hope, therefore, biology dissects the animal, reduces it to cells or even smaller units, removes or destroys some parts of the body, and then studies the influence of this procedure on the whole. Thus have been developed the sciences of Anatomy, Physiology (analytical and experi-

mental), Pathology etc. Biology is then entitled to say that under given experimental circumstances the animal can be reduced to cells or atoms or to a functionally defective body, but the final results are of an analytical character, whereas to answer the main question they would require to be of a synthetical character. The biologist claims that this analysis has revealed to him a pattern that can be identified as a mechanical one. By this he asserts that prior to using experimental methods he knew that the animal was composed of parts, each possessing a function and connected with one another in such a way as to fulfil the purpose of the whole; that in fact he had "a priori" knowledge that animal is a machine. The biologist, however, does not confess that he made up his mind what the animal was prior to the experiment, but instead disguises this fact skilfully in the principle of causation employed at the moment when he switches over from analysis to synthesis. In all his experiments the biologist seeks the corroboration of mechanical laws operating in the living animal body. Actually the experiments usually yield several results, but the biologist selects one of them and discards the rest as irrelevant. This selection is deduced directly from the principle of causation and indirectly from the main concept of mechanism.

The result of all those experimental labours or rather of those imaginings revolving in a circle limited by the experimental method, is not a real machine as built by an engineer, but a blue-print of a machine that it has never been possible to create. The biologist is a designer who claims that, although he may not be able to be the constructor himself, he has an intimate knowledge of the workings of the constructor's mind and that therefore, his blue-print is not a figment of his imagination but a true copy of a real machine with authorized comments regarding the purpose of the whole and its parts.

The biologist is not interested in the question: How acknowledging the existence of life, can we prolong it?

This is a medical problem. The biologist, delivering his self-produced blue-print to the medical factory, indicates through the pathologists those parts of it which should be changed or mended, giving assurances that when these changes are effected the machine will continue to work efficiently—but he fails to say how long it would work if the parts were not mended. For example, the patient has carcinoma. Science, *viz.*, biology, tells us that if it is removed he will live longer. Having humanitarian feelings, would we then fail to operate? Not in our present state of mind, when we are given suggestions labelled “scientific” and believe that they are really so. But to return to the patient, we are told that if we operate on him he is going to live longer, but longer than what? Presumably longer than if the tumour is left, but how long is that? To this biology makes no answer and since no answer can be provided by the orthodox scheme of medicine based on biological theory either, a new orientation in the outlook of medicine is needed.

The Medicine should take up the biological subject-matter in its changed form, *i.e.*, life, health and disease must be treated as an element of nature and medicine should answer the question. How can we make the most of it? Biology in turn, should then itself put the question, What is life, health and disease? and thus both branches of biological science studying the same problem from different angles could progress separately, but with the aid of mutual interaction. Medicine will occupy its right place only when it sheds off the mechanistic conceptions and determines to treat life, health and disease as realities of Nature and protests against substituting for them a product of man's imagination mistaken for the product of a mechanically-minded Creator. There are some non-physical planes of existence *viz.*, mental plane and vital plane which medicine should accept as verities of nature. That is why we always repeat that the physical sciences *e.g.* chemistry, physics or physiology or pathology is so far as they are

grounded on physico-chemical conceptions—are indispensable but not *basic sciences* in the researches concerning living organisms. They are as indispensable as, but not more basic than, speaking and writing are, for instance, to a historian. They are not capable of constructing concepts specific to the living human being.

B. K. S.

(2)

*Reply to Dr. J. M. Ganguly's query about Potency.*— I have received Dr. Ganguly's letter in which he has earnestly requested me to put my views to solve the question of Potency. For his satisfaction I hasten to publish the following lines, which, I hope, will remove the misapprehension under which he is labouring.

The question of potency is still a disputed point and it may be said to be the only point for which we generally conduct our disputing arguments. Perfect unanimity prevails as regards the law of similars. But great disagreement exists as regards the potency of the medicine selected after the law of similars. There are many practitioners who generally use the lower dilutions and do not go beyond the thirtieth dilution; on the otherhand, we find several practitioners whose souls delight in the use of very high potencies. The question of potency can only be solved by the piercing test of experiment, and every homœopath must come forward to make the experiment himself. No hard and fast rules can be given with regard to this important question. It would be a veritable dogmatic assertion to say that any acute disease will yield to any potency of the selected remedy. The constitution and idiosyncrasy of the patient must not be lost sight of when we shall have to choose the potency.

It is sometimes seen that in some patients an appalling aggravation ensues from the administration of lower

potencies, while the higher ones complete brilliant cures. It is often marked that the sixth potency having failed to cure an afternoon fever, the thirtieth has succeeded in its stead. But there are also cases where we have seen the most severe fits of epilepsy to vanish, the most agonising burning fevers to abate, the most excruciating torturing pains to be followed by soothing calm and sleep, all without the slightest sign of aggravation, under the influence of a single drop of the lower potency.

Hahnemann satisfies the demands of scientific rigor by laying down the following (*Organon*, Sec. 278): "To solve this problem, and to determine for every particular medicine, what of it will suffice for homœopathic therapeutic purposes and yet be so minute that the gentlest and most rapid cure may be thereby effected—to solve this problem is, as may easily be conceived, not the work of theoretical speculation; not by fine spun reasoning, not by spacious sophistry can we expect to obtain the solution of this problem. Pure experiment, careful observation and accurate experience can alone determine this."

The above lines are pregnant with an unfailing stock of truth. Truth is always truth whether we believe it or not. The dosage which has puzzled the brain of many distinguished workers of our own School can only be settled by the bed-side test of clinical experience. Faithful experiment, scrutinising observation and profound experience are of paramount importance if we wish to elucidate the mystery of this difficult point. Potency stands as a bugbear to many practitioners. I am very often importuned by students to suggest the potencies of our remedies, so that they can run the race of practice with some knowledge of the subject. Every practitioner is his own master and can choose the potency which he likes.

As Dr. Ganguly and several others have shown their eagerness to be conversant with my personal views pertaining to this important question, I may tell them that I have always been in the habit of using lower and medium

potencies in my practice and I have always been successful in my treatment.

In this connection, I may also add that late revered savant Dr. Mahendralal Sarkar, M.D., D.L., C.I.E., and Drs. D. N. Roy, B. N. Banerjee, Salzer and several others of Calcutta were accustomed to use lower and medium potencies in their practices and they are all known to be very successful practitioners.

In European countries the names of Drs. John H. Clarke, Burford, Stonham, Fergiewoods, George Royal, T. F. Allen, G. P. Cobb, William Boericke, Norton and several others may be mentioned in this connection who were also accustomed to use lower and medium potencies in their practices.

I hope these lines will satisfy Dr. Ganguly and others.

S. C. G.

## KALIUM CARBONICUM

DR. O. LUSER

Kalium carbonicum is potash, the carbonate of potassium. The names potash, potassium, as also Kalium, remind us of the main source of the substance from ancient times, viz., the ashes of organic material, especially of plants. The word Kalium, for which the chemical symbol K stands, is derived from the Arabic "al kaljun," i.e., plant ash.

Neither in the earth nor in living organisms do we find the isolated element potassium, K. It is a soft silvery metal. A member of the alkali group the atom has one single electron in its outer shell. There is practically no situation in which such an atom will not act by parting with its outer negative charge, thus becoming a positively charged ion, a cation. The nucleus of the potassium atom possesses an excess or 19 protons over nuclear electrons,