

HOMŒOPATHIC DOSE : THE INFLUENCE OF DOSOLOGIC EXPERIENCE ON THE KNOW- LEDGE OF THE PHENOMENON "DISEASE"*

DR. VOEGELI, OF LAUSANNE

LOWER DILUTIONS : EVOLUTION & PRINCIPLES

Who was the person who first used lower dilutions ? It was Hahnemann himself no doubt, because he first of all made experiments exclusively with massive doses. The first case that Hahnemann reports to us is that of a patient who suffered from a "Colicodyna" i.e. from violent intestinal colic. These colic pains appeared periodically, with anxiety, oppression, fever and a general weakening of the patient's condition. The patient has already used several medicines but in vain and Hahnemann himself took recourse to 16 remedies, equally without any result. Then he decided to give him a drug which would cause a morbid state to appear, which is very similar to that of which the patient was suffering. It was *Viratrum Album*. Hahnemann knew the pharmacologic reactions of that drug exceptionally well, because, when he began his career as the professor of the University of Leipzig, he gave a lecture on that drug as an inaugural lecture. To the general surprise of his audience, he cited 60 other authors who gave reports of their observations on the same plant which was already used in ancient times by the Arabs and in all corners of the modern world. Thanks to his knowledge of languages, he could have read all the works in original.

Hahnemann prescribed 4 powders of 0.25 grammes each and instructed the patient to take one every day. But the patient took two per day which caused such an aggravation that the patient risked death. However, the final result was marvellous : After the dangerous crisis, that appea-

* Translated by Dr. Rajkumar Mukherji, M.A., L.H.M.S.

red after the over-dosing, the disease broke down and the patient was finally cured. This happened in 1797.

After this incident Hahnemann published in the journal of Hufeland a series of articles in which he explained his new method of curing diseases by the similar remedies. For Ignatia he fixed the dose to 8 grains (0.5 grs.) for Belladonna 0.75, for China 0.03 to 0.06 grains a dose (he used sometimes θ , sometimes the powdered root or the leaves, sometimes the extract, which one may read in the *Materia Medica Pura*, 1st. ed.). He maintained these gross doses and he continued to use these doses energetically for sometime about two years, and if we take into consideration the whole period during which he administered the gross doses starting from his first publication on the cure of ulcer in 1784, a publication in which appeared for the first time the new principles building the bridge between the allopathic method of treatment and the method which was taking shape in his mind, it comes to 13 years, during which Hahnemann used exclusively gross doses.

From the year 1798, on the contrary, he began to recommend smaller doses, which varied around one milligramme, sometimes still less. It is certain that this minimisation of doses was dictated to Hahnemann by the aggravations which were sometimes dangerous, that these remedies, selected according to the law of similars, caused in his patients.

In 1799, began the surprise, because, it is from this time Hahnemann began to recommend almost infinitesimal doses. He prescribed against Scarlatina a dose of Opium which corresponds to about 1/5,000,000th of a grain (1 grain—0 gr 062). However he continued still for years untiringly to find out the best dose. The idea which was still guiding him was uniquely the *Diminution of the Effect of Aggravation*. It is on that idea he began to diminish the dose more and more. However, sometimes he used to augment the dose in order to be sure if the effect of the gross doses was nevertheless superior. Thus changing the doses constantly during several years and making close comparative study

Hahnemann hoped to find the optimum of the curative effect.

After 15 years of experience, he was convinced that the infinitesimal doses were enough to cure on condition that the remedy is really a *Similar*. It is in this lies the condition *Sin qua non* of the action of infinitesimal doses.

Now Mr. Hufeland, the representative doctor of that period intervened and put the question—"What can be expected from a dose of Belladonna 1/100,000th part of a grain? Hahnemann gave the answer in different articles as follows: . . . A drug which has the biological power to provoke in healthy person a certain syndrome conserves that power (in patients sensitised by a similar disease) even in a minimum dose. . . In order to cure, some unbelievably small doses are enough. It is the shrewd observer alone can know up to what point the organism of the patient becomes sensitive to the exciting effect of a remedy. This is beyond all belief. . . It is true and which is most surprising is that the most robust persons suffering from chronic diseases, are influenced as deeply by a Homœopathically selected medicine as a new-born baby.

Modern doctors might have confirmed this fact in several cases (Tubercular allergy, allergy of blood groups, Hay fever, Asthma, Eczema etc. . .).

In the first edition of his organon, there was not yet the question of his centesimal system of dilution, which later on became an essential point of his doctrine. In that edition Hahnemann recommends first of all to adapt the dose to the particular case, prescribing however small a dose possible. Acting thus he aimed at another end. It is to avoid the troublesome effect in the case where the choice would have been erroneous. In a case report he says, "Being given that the power of the drugs and the individuality of the patients are so variable, it is impossible to choose precisely the dose."

It is only towards the year 1816 appeared the second edition of the "Materia Medica Pura," Hahnemann did not

give any precision on the dose in the first edition of the same work, neither in the organon. In the second edition of M.M.P. he communicates to us his whole system of centesimal dilution. He says at the sametime in what dilution he applies each remedy as for example Arsenic 12, 18, 30. On the contrary he recommends still for Pulsatilla, Bryonia, Rhus toxicodendron, to use a drop of the pure juice in patients having robust health and when the disease is tenacious.

However since 1814 an observation of a different category intervened. It is the fact that some substances which has no pharmacologic effect on the human organism, such as the common salt, silica, (H_2SiO_3), Lycopodium, vegetable charcoal, gold, silver, carbonate of lime etc. . . . become extremely active substances if they are triturated several times with sugar of milk on condition the trituration is very energetically done during sufficient duration (1 hour at a time). Although after three successive triturations the primary substance is reduced to a millioneth of its initial weight, the biological effect on organism is very high.

This can be chemically explained because the trituration leads to an enormous augmentation of the surface of the primary substances. Being crushed into infinite number of particles, the substance is transformed into a colloidal solution with the solvents and consequently, the contact between the drug and the cells of our body becomes more intimate, which causes reaction. Kirschhoff & Bunsen have shown by another method the importance of the augmentation of the surface. They triturated 3 mgs. of Chlorate of Sodium with some sugar of milk and vaporised this mixture in a chamber $60m^3$ in which they put a flame on one end. In spite of the enormous dispersion of the primary substance, the presence of Sodium in the flame was observed even in naked eye which was verified in spectroscope. By that experiment one may then make visible an unimaginable small quantity of Sodium Chlorate i.e., less than a trillioneth milligramme.

As regards the insoluble substances like Salicylic Acid, gold, etc., the liberation of pharmacologic energy may be explained by the laws of physics and chemistry. For the soluble substances on the contrary that explanation is not enough. Ordinary salt, as for example, is almost an inactive substance in whatever dose it may be used. While it is treated by trituration, it acquires extraordinary pharmacological properties and may cause very powerful pharmacological action.

It was therefore completely a new fact up to that time which Hahnemann observed. The trituration develops the therapeutic value in some substances to some extent, which cannot be explained by the augmentation of the surface alone. The case is the same for succussion. However the succussion seems to act in a more weak manner than trituration and for the primary substances which are completely inactive, it seems indispensable that they are first of all submitted to trituration so that they may arrive at some sort of a dilution and jerked later on.

No one can believe it without experiment. The substances that seem to be the most favourable to that experiment, are in my opinion the Sulphur, the ordinary salt, and Thuja in persons who have eczema besides the characteristics of these substances. The experiments should be very expressive if at first a massive dose is applied and later on in trituration of 6th, then in 12th and 50,000.

Once this law is discovered, Hahnemann changes the name of the process and speaks no more of dilution, but of dynamisation. He says that "the dilution combined with succussion develops the therapeutic value of the drugs in an inconceivable way. Thus we arrive at the fundamental law formulated by Hahnemann i.e. *The Development of the Therapeutic value of a Substance by Trituration and Succussions.*

In short we may then say that Hahnemann used massive doses up to 1799, then he considerably reduced the dose between 1799 to 1814. From 1815, he used his new method

of trituration and of centesimal dilution which in his opinion caused a considerable augmentation of the therapeutic action. That discovery led him to think that the disease was not material (dynamic) and to push further the number of dynamisations. Generally he stopped at 30th and he treated according to these principles from 1815 to 1835.

Later on he developed his process up to 50 million, a method which he practised during the last part of his life in Paris (1835 to 1843). This process remained unknown up to 1921 as a result of the refusal of the heirs of Hahnemann to publish the results.

From this series of experiences of Hahnemann one can easily understand the discovery of Hahnemann, of the *Law of Similars*. It is necessary to fall first of all into that coincidence, then to verify the multiple experiences, to see if it is a simple coincidence or a general law. Every one can verify that law in any moment if he knows the effects of the drugs on the healthy organism.

Consecutive diminution of doses is similarly plausible. Having obtained aggravation at first, the diminution of dose becomes necessary, and acting thus Hahnemann simply followed the chains of his reasonings.

On the contrary the second point is difficult to understand: It is his decision to dilute in the scale of 1: 100. Each of us would certainly have tried to diminish the reactions by diminishing the dose, but one would have reduced it to half, quarter or perhaps to 1/10th while none would have probably diluted in the scale of the centesimal, being given that this is absurd at first thought. We do not know why Hahnemann, that close and minute observer, fell into that process. Because while reasoning he would surely have to say to himself that after one or two steps of such an infinite dilution the chance of getting still some curative effects should fall to zero. Here we find a lacuna in the chain of causality. Hahnemann does not speak to us any-

where the motive which led him to that kind of dilution which becomes astronomic already after some repetitions.

We cannot take up the succession of his ideas but from the time when Hahnemann took notice of the fact that, that paradoxal dilution had not only a moderating effect on the medicinal aggravations (which he desired to eliminate) but at the same time it had in fact a stabilising effect from the therapeutical point of view. The experience that the founder of Homœopathy gained during the course of the following 25 years seems to have confirmed the principle and thus we may explain to ourselves the fact that he developed later on a method with still higher dilution, i.e., up to 50,000. He expected surely to reinforce still once more the therapeutic effect, bringing down at the same time the primary reactions caused by the drug.

HOW THIS DISCOVERIES OF HAHNEMANN WERE WELCOME
BY HIS CONTEMPORARIES

At first the opposition was not great. While Hahnemann was still using gross doses, a number of physicians were watching with interest his works and Hufeland invited Hahnemann to publish his new ideas for the interest of the medical world, in his journal. But time came when the interest of some readers cooled down as a consequence of some incidents. In few words it may be said that those incidents were due, on the one hand to the novelty of the method to which some minds were not prepared and on the other hand to the little diplomatic nature of Hahnemann who was trying like a Bull to penetrate the wall already built up by the official school. Because of his loss of respect towards the tradition he had considerably increased the group of officials which was opposing his method and which was defending the tradition, however problematic it were. Those who had practiced throughout their lives according to the accepted method did not wish to be convinced to have groped into ignorance up till then for being taught at last the truth through the mouth of a simple physician. Such a reaction is human and can easily be

understood. All against one. They were stronger than he. To this was added the fact that his adversaries were holding the chairs of the Universities, the periodicals and "last but not the least" the government grants.

Besides there exist also in the doctrine of Hahnemann some weak points which greatly hindered its diffusion. First of all the law of similars is a law which seemed completely contradictory to logic. Although it was proved later on that this law very often proves to be true for example if the congelations are treated by the application of snow or the inflammation by the application of heat. During the time of Hahnemann the doctors were practicing the contrary, consequently the doctors could not understand the "Absurd" law. To-day that part of his doctrine does not face any such great opposition because many things have been discovered during these hundred years. But abstraction made of this contradiction which is rather apparent than real, there was still another crucial point in this doctrine: The final resignation to search for the cause of the disease and not to treat only the totality of symptoms by remedies selected empirically.

Homœopathy appears first of all under this aspect, because Hahnemann declared that the disease is not material in nature and could not therefore be understood in a different manner but by the totality of symptoms. The official school on the contrary, aimed at the search for the causes of diseases and tried to suppress them by necessary means. Instead of empiric treatment they wanted to establish a casual treatment and that tendency took up more energy from the moment when the discovery of microbes seemed to have solved the enigma of disease.

Nevertheless these two obstacles would have still been warded off, if a third barrier had not been erected which was a "taboo" for each sensible man. That obstacle was the phenomenon of dynamisation of remedies, the recourse to the astronomic dilutions of primary elements. None in the scientific world has yet seen such a thing and none

could explain a similar phenomenon. On the contrary, arguments did not fail to ridicule that doctrine so "absurd" as well as its discoverer. They said that according to that doctrine any water even the purest should possess all the elements existing on the earth and that objection has not lost its weight even to-day. Even to-day I hear my professor Naegeli say "That is not possible; we know the causes of reactions. What the homœopaths do is far from attaining the minimum and consequently it is mysticism and nothing else."

It can be clearly understood that those who have experimented the law of similars, i.e., those who are familiar with the doctrine of Hahnemann in spite of the "taboo" of the official school, have tried to ward off at least the most unsurmountable obstacle which was the essential cause of opposition of the scientific world. It was the *Infinitesimal* dose. Consequently we have seen that already some homœopaths have grown up who have propagated a homœopathy on the law of similar alone, while the treatment that they do is by the application of gross doses. They are called : *The Lower Dilutionists*.

One year later after the emigration of Hahnemann at Paris (1835) the Homœopaths of Germany accepted the 18 thesis of Dr. Wolff of which the article 14 denies *Expressis Verbis* the augmentation of the therapeutic value by succussions and the dilution and stipulates "that process of Hahnemannian dilution can not be considered but as a process of diminishing the medicinal reactions". Besides this documentation contained a number of truths and agreed with many points of Hahnemann, specially with the law of similar and the necessity of administering small doses. From that time the Homœopath of Germany applied themselves with their heart and soul to use lower dilutions. We have seen the birth of "Naturwissenschaftlich-Kritische Richtung" which tried to build a bridge between Homœopathy and the official medicine. The most eminent of its representatives were Hans Wappler, R. Tischner,

F. Donner, H. Schoeler & A. Stigler. The works of these Homœopaths were partly very interesting specially that of Stigler, which have always interested me and opened to me many new perspectives on the action of drugs in small dose and on their organotropic character. Still later towards 1920, August Bier the leading professor of surgery at Berlin, became interested in Homœopathy. His works on the "Reizkörpertherapy" proved to him that some patients become sensitive to certain drugs. Formic Acid for example provokes in them a reaction in a dose corresponding to 25/1,000th a dose which is necessary to develop the same reaction in a healthy body. Thus he came closer to Homœopathy and after reading the works of Stiegele he made some experiments in his University clinic on Sulphur and Sulphur iodatum in Homœopathic doses. I assisted some of these experiments as I was then an apprentice in his clinic. Being convinced that Homœopathy is at least based on a solid foundation that famous surgeon one day ventured to give a lecture in favour of Homœopathy. That conference took place before the Berlin Medical Society and the result of that lecture was that his friends began to keep themselves away from Bier. Bier however outlived the last of his adversaries by 19 years and died in 1949. He has published some more valuable scientific works, and the lucidity of his mind was extraordinary till the last day of his life, while he was declared senile by his friends. Since the intervention of Bier the situation of Homœopathy became better in Germany, in the sense that a great number of practitioners now apply homœopathy in certain cases. But Homœopathy was still far from the power to triumph by miraculous cures as it was during the time of Hahnemann when he and his first disciples enjoyed a world reputation.

In France however the situation developed in a quite different manner. The last years of Hahnemann was poisoned by bitter fights. Those who were compromising Homœopathy were specially the colleagues of Hahnemann

who professed themselves Homœopaths while using gross doses. A group among them tried to build a bridge between Homœopathy and Allopathy basing themselves on the causes of disease for choosing the remedy instead of taking into account the complete symptomatology. Many books appeared in which the pseudo-Homœopaths, as Hahnemann called them, recommended some specific remedies against clinical cases and advised to try first of all the remedy in small dose and to increase the dose if it does not bite up to the desired effect. For Hahnemann the problem was quite different. It was the totality of symptoms which counted and not the "clinical name" of the disease. If the therapeutic effect did not produce the remedy was not well chosen. And then it was necessary to reconsider the case and make a new selection and this should continue till the key to the lock is found out in other words the "simillimum."

Abandoning this principle and wishing to arrive at a therapeutic result by the increase of the dose these "Pseudo-Homœopaths" unconsciously slipped into Allopathy. Thus they took the risk of compromising Homœopathy because the failures in that mixed method were naturally attributed to Homœopathy.

Amid great troubles the young Melanie d'Hervilly brought her husband at Paris. The German Homœopaths did not seem to be much impressed by the departure of the master. The *Allgemeine Homœopathische Zeitung* only gave the following notice " . . . Dr. Hahnemann has left for Paris on the 14th July". This is all that his motherland said at the time of the departure of her great son.

During this time some events were afoot. A very short time after his arrival in the capital the Minister Guizot discerned the diploma to Hahnemann and in September 1835 already the society Gallicane of Homœopathic medicine celebrated for the Master a Congress organised in honor of him which lasted for 3 days. France was then under the influence of Rousseau who was preaching the "Return to the nature and the relation between the nature and the

universe". None had better understood it as regards medicine but Hahnemann, because it was he who was trying to understand the individuality in his totality and to cure by the natural power of which he knew the secret. What a great difference between his conception and the conception of the official school which sought before all to label the disease in order to suppress it by a brutal way. The official school considered the disease and the patient as two distinctly different entities, naturally it raised opposition against Hahnemannian unity according to which the patient and disease were one and the unique phenomenon of nature.

At Paris, Hahnemann was moving from one success to another. The French homœopaths were practicing Homœopathy according to the principles of the master. They understood better the infinitesimal than their German colleagues, because France was then passing through a period when discoveries and inventions were in full swing. Steam engine was conquering over the town, the electricity was already appearing in the horizon. Some French savants were daily making astonishing discoveries and the people accepted that there may exist other forces of the nature still unknown, which were no less powerful. The old obstacles broke down and the extent of the ruling over the country was very favourable for the diffusion of Homœopathy.

In course of the last years only some Homœopaths began to think like the lower dilutionists of Germany. They were searching for a substantial standardised remedy provided that the substance is at least represented by a *Single* molecule. This corresponds better to the mind of a materialist of our day.

THE PROBLEM OF CAUSALTY IN THE PHENOMENON OF DISEASE

I have already said that a fundamental difference seems to exist between the official system of medicine and Homœopathy; the former seeks before all for the cause of

the disease and establishes on it a therapeutic which it calls causal, on the contrary Homœopathy establishes the structure of the disease basing on the totality of symptoms and choses directly the remedy without flattering itself to have found out the disease-cause. The principle of causality is not therefore in the basis of Homœopathy and at first sight it does not take into account whether it is acting causally or not.

This problem however changes its face if we establish the percentage of diseases in which the official school has already found out what it calls the "morbid cause." Then we may say that it is only in infectious diseases that these researches have been crowned with success even in a very incomplete manner. Because there exists numerous diseases, which are surely infectious, in which they have not yet found out the virus of contagion. I mention only the ordinary Rhinitis, Influenzas of all types, Rougeola, Variola, Polymyelitis etc....

If that research of the causal factor has already some lacunae even in this last group of diseases, the failure of that system will become more apparent in other diseases. We have not the least idea whence come all the other diseases as for example, the Systematic diseases of the nervous system, the functional disease, the troubles of metabolism, the endocrinal diseases, tumors, psychoses, neurosis, and other mental diseases. That immense contingent which constitutes at least the three-fourth of morbid states is completely unknown to us so far as the causal factor is considered and the doctor nevertheless should treat the diseases belonging to this group, although he "ignores the cause." They do it still up to this day *symptomatically*.

Let one consider once the number of tons of Aspirin, of Salicylate, laxatives, soporifics etc. that are required every year and then one will understand the extent of symptomatic treatment still in vogue. If we compare the number of cases where the doctor make a real symptomatic treat-

ment, we must admit that the percentage is insignificant. We will prove it easily by an example.

Let us take the case of a pulmonary tuberculosis. The Official school makes the diagnosis and what interests it the most, is the Koch's Bacilli because in its opinion Koch's Bacilli is the cause of Tuberculosis. The official school therefore tries to eradicate the bacilli if it can do so. However this method is successful in a very limited number of cases. In most cases it is forced to take up a purely empirical method, to send the patient for altitude cure. Some one has some time empirically discovered that system of cure but he does not know why. In any case this altitude cure has nothing to do with the discovery of Koch's Bacilli. Here it is the question of a general stimulating effect which causes a certain augmentation of the resistance of the patient on account of which the patient can fight well with the microbes and can win over them under good conditions. But this kind of cure lasts for a long time and also entails a very high cost. Not only that, in some cases this kind of treatment has been proved useless and even in some cases it has proved dangerous for the health of the patient. By all this I do not mean to create doubt upon the inefficacy of the altitude cure, but I can furnish a good number of cases in which the altitude cure has considerably aggravated the diseased condition.

Whatever may be said of this method of cure, neither the therapeutic factor of this type of treatment nor the cause of cure by such treatment is known. It is purely empiric.

Homœopathy on the contrary proceeds in a completely different manner. The homœopathic doctor notes attentively all the symptoms of the patient. If he finds a tendency to cold, cold feet which gives out a bad smell, nails that break transversally with white spots, rheumatic pains in the neck rising towards the occiput and extends to the forehead ending in a kind of periodic headache with the feeling as if the head is under a vice, then these symptoms

indicate Silicea. This remedy will cure the disease if applied in adequate dose and that cure will not be ephemeral as is the case in a great percentage of cases treated by the altitude cure. The cure will be permanent.

The Official school will exclaim—what do these futile symptoms mean? They have nothing to do with tuberculosis! A homœopath will reply—they have much to do because these symptoms indicate a deficiency of the assimilation of Silic acid and this deficiency was favorable for the invasion of K.B. These futile symptoms which are for the adepts of the empiric school only a movement of the head, are the indications of a cause of the disease which has proceeded the invasion by the bacilli. Consequently these symptoms are extremely useful. If this primary cause is cured, the patient is radically cured while one, wanting this cause, has no other alternative but to attack the bacilli. For the patient the result is also very different, because in the first case, he will become resistant to the microbe, while in the second case he will have a relapse as soon as he will have a new attack from the microbe.

How to cure the Silicate metabolism? The allopathic doctor will apply massive doses of acid silic. However that substance is not soluble and even if a solvent is found out, such a therapeutic will be useless. We have already the negative experience while trying to use Calcium in rachitis. The deficiency does not reside in the foods that do not fail to contain Silic acid but in the organic weakness for assimilating the acid. That deficiency may be repaired as experience shows clearly, by the application of a Homœopathic dynamisation of Silicum. It is not the same thing as the administration of Silicum in massive doses as we shall see later on.

We could have followed up this case still for a great length. The symptoms of Silica deficiency existed already considerably long time ago before the appearance of tuberculosis. We have observed this in all these cases and our experience is based on a sufficient number of observations

by means of which we may affirm this fact. Such a patient has already formed a number of diseases before tuberculosis because the silica deficiency is characterised by a predisposition to inflammations and ganglionic tumors, rhinitis with a secretion having bad smell, dental granulomas, repeated anginas, liver troubles with distention of the hepatic region, stubborn constipation, purulent bronchitis appearing every winter etc. . . The patient has surely consulted some doctors for his diseases. However these doctors have ignored the totality of symptoms and have not taken into account the troubles of metabolism which was the real cause of these diseases. Every time, the anginas, the bronchitis, the inflamed glands etc. . . were treated and treated *symptomatically*. If the patient had consulted a shrewed Homœopath, the latter would have discovered the cause of all that and would have given him the Homœopathic dynamisation and thus all colds, anginas and other diseases resulting out of the Silica deficiency could have been completely cured and the Tuberculosis would not have attacked him.

However it is not always Silicum which is deficient in Tuberculous patients. Another patient, tall & lean, suffering similarly from tuberculosis may have a great desire of undigestible things, generally suffers from aggravation during the smelting of snow. Questioned about his infancy we understand that he could not digest mother's milk, that he has often suffered from diarrhœa and colic during his infancy. In this case we have the deficiency of Phosphate of Calcium. From this deficiency equally follows a diminution of the resistance which may end in an attack of K.B. This two tubercular cases represent therefore a causality completely different and should be treated differently. It is Homœopathy alone which can find out the key and the remedy will repair the want of that salt in the organism.

In a third case, we find some symptoms of Arsenic : Marked chilliness, neuralgia with burning sensation, great thirst with desire to drink small quantities of water. The

patient is very careful for his personal bearing. His diseases will always be aggravated at night. The persons suitable to Arsenic are the best cases suitable to tubercular virus from the point of view of therapeutic results as says Paracelsus. If they are treated with Arsenic in infinite doses they will be cured rapidly and completely. However we must not send them in mountains because Arsenic has aggravation on hills.

The Official school will send them to hills even the last one inspite of the fact that this is counter indicated. On the contrary Homœopathy can fix all these differences. Consequently Homœopathy treats the patient causally while the allopaths who base themselves on clinical diagnosis alone can not come to similar conclusions. Their aim then will always be to treat the tuberculosis and not its cause which is situated in a deeper sphere, inaccessible to modern laboratory methods.

Let us show this problem still by another example. Let us take the case of a patient who is suffering from a seasonal influenza. This is a conventional name that we have used, nevertheless the naming should not induce us to make an error as regards the essence and the cause of the morbid phenomenon in question. In influenza we accept neither the virus, nor the condition of its development in the patient. All these may greatly vary, even the organs affected may be different. All that we can find out by our methods of investigation are some relatively superficial troubles, such as the fever, the cold in the head, headaches, inflammation of the bronchii, constipation or diarrhœa. No trace of causalty appears to us and consequently the Official school is obliged to treat all these affections only symptomatically.

Let us suppose that the fever has began with a shivering followed by heat without thirst which is followed by a slight perspiration. Let us also suppose that the liver is painful and that the back of the tongue is yellow. In the presence of these symptoms we will apply China 30, a few

granules dissolved in a glass of water to be taken in three parts at an interval of two hours and the patient will be completely cured in 24 hours, rarely it will take 36 hours, but very often it does not take more than 36 hours which I can prove by the help of numerous observations.

On the contrary if the fever is called influenza which has begun with coldness of extremities, accompanied by muscular pains followed by a dry suffocating heat within the body and if at the same time the patient is anxious and agitated and if the patient has intense thirst simultaneously with fever then we will give him Aconite 30 and our patient will be cured in less than 12 hours, often even within 3 or 4 hours.

(To be continued.)

Dr. W. KARO, M.D.

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levying excise duties on alcohol by certain states of the Indian Union e.g., levying of excise duty at the rate of Rs. 70|5|- per proof gallon by Bombay state for importing Homœopathic medicines containing alcohol which are of Indian manufacture; whereas homœopathic medicines containing alcohol which are of foreign manufacture can be imported at the rate of Rs. 45|- only.

5. This Congress deeply mourns the death of all those homœopaths who have passed away during the last 2 years and sends their heartfelt condolences to their bereaved families.

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Nevertheless, if we give in the first case Aconite and in the second case China 30, we will have no effect for the very good reason that the homœopathic remedy will cure our disease specifically and causally on condition that *The Remedy and the Cause of the Disease are Perfectly Releted. And that Concordance is Manifested by the Characteristic Symptoms in Consequence of their Appearance as we have Indicated hereabove. It is these Symptoms which Help us to Choose the Specific Remedy and not the Name that Clinic Discerns to these Morbid States which are Extremely Different from one another so far as their Nature is concerned.*

However, China in gross doses, is capable to suppress

* Translated by Dr. Rajkumar Mukherjee, M.A., L.H.M.S. from l'Homœopathic française.

all these fevers but then it will not be a cure. The patient will not feel the well-being, he will have more attacks and will be cured at last after several weeks. This explains the fact that China does not cure. It acts only symptomatically i.e., it *Paralyses the Repairing Function of the Organism*. The fever will also disappear no doubt because the poisoned organism has no more the power to react; however the maltreated organism takes much more time to overcome the disease than it had not been treated at all. Moreover the use of other medicines after China in course of different diseases that every human being suffers from will endanger other diseases much more dangerous than an influenza which is relatively innocent. These are chronic diseases of all sorts specially the rheumatic affections, diseases of stomach and liver, bronchitis, some times eczema or asthma. These diseases are incurable by the long series of allopathic drugs because they are caused by these medicines and which are very much current in a country where the patients have the habit to be treated by these symptomatic remedies. Unbelievable morbidity in civilised country is an indication for this conclusion of which every homœopath is convinced from their practice.

From the above observations we learn that the remedy is chosen causally on the only condition that it cures in infinitesimal dose. Then it acts in the same way as a key can open only one particular lock. For finding out such a remedy numerous relations should come into play simultaneously and the expression of these relations is the law of similars.

On the contrary, the very moment we see that our remedy is not acting, we understand that our choice is wrong. However we may very often get an effect by increasing the dose. But in such a case it is not the biological reaction, provoked by the dynamised remedy which cures. In this last case our method of treatment becomes more and more allopathic and consequently *Symptomatic*. This is not a real and final cure.

THE HIGH DYNAMISATIONS

If the application of lower dilutions does not give rise to any very great problem being given that their action may be explained by pharmacological laws, the case is quite different with regard to the high dilutions which are used as medicines though they do not contain any molecule of the curative substance. The most interesting dilution of that category is unquestionably 50,000, because the dilution of the primary substance is so astronomic that any Chemical or Physical law known up till now cannot give us any explanation of their actions. This problem exasperates many homœopath and so Dr. Voisin, our very experienced colleague has published an article in which he criticises these dilutions. First of all he puts forth some doubts on their actions then he says that they cause some aggravations and finally he assures that he has obtained some good results with LM., as for example in Myelites, Paralysis, Locomotor ataxia, Ankylotic rheumatism etc. . .

It is necessary to enter into the problem basing ourselves on the fact that it is the question of fundamental problems of the art of cure. I will set aside the question of the superiority or inferiority of LM. because I said with what Dr. Jarricot has said when replying to Dr. Voisin : "All the dynamisations have their *raison d'être* and may be used ;" however one must know the indications.

In the second place, we must not consider the LM. as if it acts in a quite particular way and has no relations with other potencies. The LM. is only a *category* of high dynamisations and the numerous criteria which are applicable to the LM. are applicable to Hahnemannian or Korsakowian dilutions.

The question which interests us particularly is to know whether the LM. has really any action inspite of its astronomic dilution. Then we must know whether a dilution is *aggravative* or *curative*. And thirdly we would like to know the criteria for their indications. Thus in time we

shall know the conditions in which the LM. is preferable and those in which they are inferior to other potencies.

The first question is interesting from the point of view of the general knowledge, because the action of non-substantial remedies may open to us some important perspectives on the phenomenon of the disease, while the other questions are interesting from therapeutic point of view.

As regards the precise indications about the application of the different degrees of dynamisation, I should ask the readers to refer themselves to the Homœopathic literature, specially to the different works of Dr. Vannier which have put a certain order in this complicated problem. And as for the indications of LM. in particular, I think that experience is not yet mature to give any precise indication. Alone a great number of observations meticulously followed can only make us wise on that point. In three years I have applied the LM. only in about a thousand cases. In half of these cases, I have applied also other dilutions before or after the LM. So it is not possible to deduce from these observations an irrefutable conclusion. Therefore it remains to me 500 cases well observed and treated only with 50,000, a number which seems to me not sufficient to formulate a law. I regret that my researches advance very slowly. However if one wishes to establish some proofs, the materials should be consciously examined. Each of the above cases then were put to a deep clinical examination, to an examination of blood and very often to a complete radiologic examination. Moreover a detailed anamnesia was collected and all the emotive, mental, sensorial, functional and lesional symptoms were noted. Each patient has then his history of his disease running at least over three pages and often 5 to 7 pages. I think that all this is necessary for arming ourselves against the errors, rather against the justified observations of the official school. Unfortunately there are many Homœopaths who publish cases of cures of cancer and of other diseases which are considered to be incurable. However if we challenge them for a proof they

will show us a doubtful radiograph or nothing at all and thus they cause injustice to our idea for the very reason that no doctor will take such assertions seriously. If some Homœopaths wished to take up the criteria that the Official clinic thinks necessary for a correct clinical diagnosis and ceased the practices criticised so long they would render a great service to the cause of Homœopathy.

An essential point alluded to by Dr. Voisin concerns the aggravations observed by him after the application of the LM. He reproaches these dynamisations for having caused aggravation.

However, is he right to interpret the effect as a cause of reproach to the LM.? Can we not conclude quite differently saying for example: if a remedy is capable to cause an aggravation, does it not contain a factor which acts on the diseased organism. An aggravation or an amelioration is secondary for our knowledge. But according to Dr. Voisin, that action is indubitable, or rather, it is even stronger than other dilutions. Dr. Voisin then confirms my experience, and I may still add that it is precisely for that reason that LM. particularly interests me.

These aggravations have finally led me to other conclusions than those of my colleague. Instead of reproaching for these aggravations the LM. should we not rather put to ourselves the following question: *Since these dilutions have a marked power to aggravate can we not use them for curing rather for aggravating?* This is really a Hahnemannian idea which goaded Hahnemann to use the "Simile" inspite or rather because of its aggravating effect. That thought led me generally to discover Homœopathy. The consequence of that method of thinking is: *To study the method of administration of LM. and to change it methodically in the aim of transforming the aggravation into curative effect.*

In order to proceed logically, we must first of all take into account the fundamental difference which exists between the preparation of dilutions in centesimal and that

of 50,000. The essential point is the number of jerkings which are impressed with each degree of dilutions. We know that Hahnemann gave first of all 10 jerkings, and found that the reaction was very strong. Consequently he reduced later on the number of jerkings from ten to two. We see here then a new problem which is in my opinion, one of the most important factor for the art of cure. Is it that the number of jerkings given to a dilution has really any importance? One is tempted at first to think so. I also thought so in the beginning of my practice. However, it seemed that Hahnemann attached too great an importance to it because he says in the sixth edition of Organon Ch. 270 ". . . Uniquely maintaining that proportion of the 50,000 one can obtain by means of a very great number of succussion an increase of the therapeutic value which surpasses greatly that which is obtained up till now (by centesimal dilution and jerking only twice-Auth.)

We then see clearly that Hahnemann was led to the search of the new process (that is the dilution by 50,000 : 1) in order to be able to increase the number of jerkings and side by side with this the increase of the therapeutic strength of his remedy. Then he gives to these new dilutions each time hundred jerkings instead of two and affirms later on that it is possible if the dilution is made in the scale of 1 : 100. The idea of Hahnemann must have been this : He said to himself, by jerking 100 times the biologic energy of a remedy augments in such proportion that the dilution in the centesimal cannot possess. In diluting centesimally there would be disproportion between the number of succussions which augment the therapeutic strength of the remedy and the dilution that diminishes its chemical effect (pharmacologic effect) on the cells. One can get over this difficulty only by making further dilutions. Then the pharmacological effect on the cells will diminish almost completely, while augmenting the biologic (dynamic) strength up to the extreme limit.

That conception results clearly out of a passage of

Ch. 270. Under observation 1. Hahnemann says: "If we incorporate so many succussions (100 instead of 2) to a remedy which is diluted in the scale 100 : 1, then we obtain some remedies which act almost instantaneously, specially in higher degrees of dynamisation, *but in such a violent way that the vital force cannot react in a moderate or durable manner.*

Hahnemann had therefore a very clear idea about what he was doing. However during his time only a few energies were known. The only energy that Hahnemann mentions is the magnetic energy and the electricity of a constant induction machine. All the ideas of his time were purely material and mechanical. For this reason his contemporaries could not have understood the idea of Hahnemann. And since the idea of the Official school has developed on that plan and finally celebrated its triumph in bacteriology, in surgery and in therapeutics *Sterilisan magna*, the conception has not much changed since then.

By the application of non-substantial dynamisation the disease problem appeared in quite a different aspect. It becomes a biological question, a phenomenon related to the vital energy. The explanation of life as the chemical function of the cells—hypothesis on which is based the official method of treatment still to-day, by its method at least—can no more be accepted because the observations on patients are in flagrant opposition with that thesis purely speculative and without any proof to uphold it. We must consider life as a specific energy, similar to that of electricity. As electricity moves the motor, so the vital energy animates our physical body. Without that energy, man is nothing but a dead-body and decomposes on the spot. We must admit that all our laboratory researches and all our means of investigation have not helped us to proceed even an inch towards the real knowledge of the phenomenon of morbidity as far as vital energy is concerned. Because all these methods can analyse only the morphologic cells and its secretions. However, that do not give to us any idea

about the energy which produces these phenomena and consequently these means are inadequate and do not lead to the complete knowledge of the problem of the disease.

Hahnemann on the contrary, if one wants to understand this portion of his teaching, have given us the key to make a solution of this problem. However, we have adapted his ideas to the knowledge of our age. Now our idea about the energy has much more advanced and we can have some ideas much more satisfactory in this regard. That knowledge is the result of observations that we can make on the patients who have taken our non-substantial remedies.

We must first of all distinguish between the pharmacological strength of a remedy and its dynamic power (which acts on the vital force). But this latter strength does not exist in the remedies of the official pharmacopia. We may, thanks to them, chemically act on tissues, i.e. to say we may stimulate them or paralyse them according to the law of selection. However, we cannot probe into the vital sphere. Therefore the action of the remedies is of relatively short duration and does not reach the vital sphere itself. Acting in this way we may sometimes eliminate temporarily some obstacles which obstruct the cure. But if the vital force is not capable to bring back the equilibrium and complete the cure, the result of the administration of substantial medicine is not satisfactory. For this reason the allopathic process may give us service when the functions are temporarily over-excited or paralysed, as for example in acute cases (fever, constipation, acute diarrhoea etc. . .). The application of such medicines may check some dangerous crisis in course of which the organism may have the risk of being damaged (hyperpyrexia, syncope, pulmonary stasis, colic etc. . .). By checking these moments of crisis the allopathic doctor renders service to his patient and if it is the question of an acute disease where the natural energy towards cure manifests itself powerfully, the cure will result sooner or later. However, acting in this

way, the allopathic doctor will apply almost always a toxic agent which destroys some functions of our organism, a fact which the official school neglects. The allopathic doctor therefore acts like a surgeon who sets up a fracture and eliminates in this way a mechanical obstruction which hampers a cure. However, afterwards he lets the vital force to act which consolidates the fracture without any medical intervention. If the vital force had not do so the fracture would not be cured.

Such cases are generally seen in chronic patients where the organism has not the power to overcome the vital balance which has caused functional weakness and weakness of the tissues which is the unique object of the official research and which constitutes its clinical diagnosis. Consequently, the allopathic drugs, do not in these cases, serve much, they act only as palliatives. But the real disease, that is to say the loss of vital balance continues to persist inspite of these treatments. The official school even has the tendency to aggravate the loss of vital balance in course of years. In order to re-establish the biological equilibrium we have the need of a method which acts deeply and which directly hits the vital centres. This is possible if we have some remedies which contain a specific energy of the category of vital energy. These remedies have the power to act on the loss of balance of that mysterious force which guarantees the good functioning of our organism. And this is precisely what Hahnemann does when he dynamises the medicines. By his trituration and succussions he has transformed the chemical power of the remedy into vital power (biologic energy). That energy is given to the dilution in the solution by succussion, just like the electrical energy contained in Carbon in a latent form, is transformed into electrical energy by an adequate apparatus. It is not a drab theory. It is the interpretation of thousands and thousands of observations done by Homœopaths. The number of succussions give to that energy, its frequency, while the original substance gives it

its voltage. This is but a comparison for better representation of the thing.

In the lower dilution, that energy just begins to appear, but it cannot reach the deeper spheres of the organism. The more the dilution is higher, the more the frequency of the energy is great and the more it penetrates deeply. In order to hit the functional organisation the lower dilutions are enough, while to hit the sensorial plan we have the necessity of a higher dynamisation. If we increase further the frequency of the dynamisation its action enters into the emotive sphere and increasing it still further we can hit the mental plan and the character. In this way we may act upon all the spheres of the human organism, first the physical sphere by the substance, then successively the functional and the mental plans. The fundamental difference between the official conception and that which results out of the Homœopathic experience consists as *Primum mobile* the physical body and supposes that the subtle manifestations of the life are some functions of that physical body, while the homœopaths should consider the human organism as a play of equilibrium of different energies which express themselves on the one hand on the physical body, and on the other hand by the sensations, emotions and thoughts.

However, if we wish to act upon our organism we must select the voltage which will give the desired effect. This voltage depends on the primary substance which we should select according to the law of similars.

Hahnemann first discovered this principle by his experience during the course of his 50 years of practice on his patients. Experience alone may be the arbitrator in this domain ; without it everything will be only a hypothesis having no practical value, like that of mechanical theory of the last century which still to-day goads the Official school to search for the disease in the weakness of the tissues. However, it does not take sufficiently into consideration that this is only a part of the whole and that

what are taken to be the causes of the morbid process are only the results of the troubled vital equilibrium.

But what makes our theory valuable, is the fact that experience always confirms it to such an extent that there can not be the flimsiest doubt as regards its perfect relation with the reality.

He who has understood this problem has understood the art of cure and also Homœopathy.

In summary, let us repeat still once more the essential points of the therapeutics by high dilutions: The biological energy is developed in a remedy by the trituration and by succussion. However, if the dilution is made only in the scale of 100 : 1 sufficient number of succussion cannot be incorporated in order to attain the finer spheres of the organism, because then the remedies will cause dangerous reactions. Therefore, one must be content in case of centesimal dilutions with 2 to 10 succussion for each degree ; on the contrary if the dilution is made in the scale of 50,000 : 1 the attenuation of pharmacological power is sufficient for the intervention of one hundred jerkings by degree of dilution. Thus some non-substantial remedies are obtained which contain high energy and which act on all plans of the living organism, without causing dangerous reaction if one knows how to manipulate these dilutions.

Such is the idea of Hahnemann if it is adapted to our contemporary ideas. However, it is strange there are Homœopaths who have not yet arrived at such conclusions.

In order to make me familiar with this subject, I have studied the Homœopathic literature of the past and have found the following :

Gallivardin—The eminent Homœopath of the past century already spoke of this problem. He prescribed to a patient *Hyocianus* 30c then 200c, without effect. Having doubt on the genuineness of these dilutions he procured himself with the same dilutions of the same remedy of which

the genuineness was guaranteed, and the patient was cured by a single administration of the remedy. And he argues as follows : If it was not genuine, that should not be astonishing, because, since forty years, some French, English, and German Homœopaths thought that they have been able to prove themselves progressive by retrograding upto the time when Hahnemann, having not yet found the infinitesimal, used, according to the law of *similia similibus curantur*, the medicines in massive or ponderable doses. From that time these doctors have spread the habit to administer the remedies in those doses, or in lower dilutions (1, 3, 6, 12, and the highest 30th.).

We may add what says the contemporaries of Hahnemann and his disciples as for example : G. H. Jahr, C. von Boeninghausen, Stapf, then recently Dahlke and Fritsche. These doctors have the experience of miraculous cures. And what is interesting to state, that all these doctors insist on the fact that *the experience on the patient is all*, while the lower-dilutionists exclusively give out the theory on the nature of remedy without any stay for its support.

C. von Boeninghausen, as for example says in his "*Repertorium der homœopathischen arzneien*" : "Let one compare with intelligence and clearness and with a pure heart the progress that our science is making constantly from hand to hand with the experience always putting aside speculation . . . and estimate afterwards with its real value the contradictions and assertions of those who judge our conceptions according to their self-evident reasoning which is purely theoretical and which does not really base itself on any experience".

And Fritsche speaks thus "Here as well as there, is only the result which decides and what Hahnemann and Lutze (another high-dilutionist) might have realised is so impressive that no adversory cannot refute.

As the writer of this article, I only underline this fact. Never the idea of using the high dilutions would have come

in my mind and I was very sceptic when I heard of it for the first time. However, what I have seen during the course of a number of years of practice and what I still see every day is so conclusive that I believe more my experience than my reasoning. Last of all I must say that the effect of the high dynamisation is no more to-day a phenomenon as inexplicable as it was in the time of Hahnemann.

According to Hahnemann the succussion increases the energy (biologic) of the primary substance, but that augmentation cannot be tolerated by the diseased organism on condition that the pharmacologic (chemical) effect of the remedy is sufficiently attenuated.

Now the problem is to know how to administer these dynamisations in the ratio of 50,000 : 1.

1. First of all the remedy should be applied in solution.
2. That solution is obtained in diluting a granule of 50,000 in 8.0 Alcohol to 25%.
3. The patient is instructed to jerk the little phial 100 times before the first dose, then ten times before each successive doses.
4. The patient should generally take four times a day, the Mondays, the Tuesdays, Wednesdays and Fridays.

That division of doses gives at first a cumulative action, then a period without remedy which allows the organism to react. In certain cases 5 times a week may be applied, in other cases we are obliged to reduce the number of doses to one or two doses a week (Arsenic, Mercury, Natrum muriaticum, Sepia, Lycopodium etc. . .). It is necessary to proceed very cautiously the first week. In the course of the following weeks it is generally seen that the remedy is well tolerated and then the number of doses may be increased. The therapeutic value depends on the care that the doctor takes for the manipulation of his art.

5. The very moment the patient feels the slightest reaction, he should immediately cease to take his remedy

during 3 or 5 days then he will recommence it. If still a reaction is felt, however least it may be, he should see his doctor.

6. In such cases I act as follows :

- a. I prescribe an antidote if the reaction is strong.
- b. I stop the medicine for ten days if the reaction is not very strong.
- c. I instruct the patient to take the medicine only once a week when the reaction is slight.

Proceeding in this manner, I have seen in my patients that all the aggravations may be controlled and may be oriented towards excellent curative effects. If the remedy is well chosen one will be astonished at first to see the high percentage of aggravating reactions. But from the moment when we dose them correctly in such a way that no reaction is any more caused, we will obtain often the best therapeutic results precisely by the remedies which were at first causing some dangerous aggravations.

A doctor who does not observe the above-mentioned rules should not complain that the LM. is deceiving. It is so only because he knows not how to manipulate the dynamisations.

In order to learn how to apply the high dilutions in general it is indispensable that one should read the first volume of the "Chronic diseases" of Hahnemann. A number of details of great therapeutic value may be found therein. One should check himself or follow the advice of Hahnemann specially when it is the question of not giving the high dilutions in centesimal in a very long interval. Because even in *us* there still persists always the remains of an allopath, and this trace of old conception goads us to act.

However in following the advices of Hahnemann in a meticulous way we may slowly understand that the homœopathic remedies have nothing to do with chemistry, neither

with the turbulence of our time of which the sons wish always to act brutally, constrain and to dominate even the nature. The homœopathic remedies in high dilutions may be compared to a seed sown deep in the ground. The ground is in that case the patient and if that ground is fecund, which is generally the case on condition that the remedy is selected according to the laws of Similars, then the seed will germinate all alone and the less one acts the better will be the result. Like a gardener who will not constantly move the earth and will not put always some new manures after having put his seed, the Homœopathic doctor should equally abstain from acting too much, if not he will not obtain good results.

(To be continued)

Dr. W. KARO, M.D.

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sation of heat, increasing to migraine with vertigo, nausea and vomiting; heart symptoms (sensation of strangling, fear of suffocation, weak and irregular pulse, pain radiating into left arm with paralytic sensation; constrictive feeling in throat; cold extremities; sticky perspiration). Diarrhea frequently. Very trembly.

Tarantula 6x to 30x—Its excessive irritability is shown in general haste, especially in hands which always must play with something. Yet there is aggravation from motion. The irritability also causes poor sleep, trembling and jerking in extremities. The numbness in legs may here also be connected with sexual irritation. There is a sensation of chilliness all through the body.

Theridion 4x—The head symptoms are most prominent. Throbbing, pressing headache from brow to occiput, worse at beginning of motion; vertigo spontaneous or when closing eyes; may increase to migraine with nausea and vomiting; flickering before eyes, or pressing and burning in eyes; tinnitus aurium. Aggravation after awakening. Vertebrae are sensitive. Patient is very tired and sleepy. Aggravation from every noise and heat of sun; great irritability. Shivers and trembling are usually present. Sexuality weak.

—*The Homœopathic Recorder, May 1953*

HOMŒOPATHIC DOSE : THE INFLUENCE OF DOSOLOGIC EXPERIENCE ON THE KNOW- LEDGE OF THE PHENOMENON "DISEASE"*

DR. VOEGELI, OF LAUSANNE

(Continued from Page No. 80)

Nevertheless, the growth of the plant depends also on some circumstances as for example of the tempera-

* Translated by Dr. Rajkumar Mukherjee, M.A., L.H.M.S. from l'Homœopathie française.

ture and humidity etc.. These circumstances are in the patient his habits of nutrition, his family ambiance, his works, his rest. All these should be related reasonably. The patient should avoid all sorts of stimulants specially coffee. On the contrary, a glass of wine may be admitted. He should nourish himself with a simple and healthy diet composed of a varied way and containing among other things some green vegetables and fruits. All sorts of one sided regimen is in my opinion prejudicial to the success of the cure. We should recommend to our patient not to read periodicals too much, to take a walk every day and to lie down early. This is all what we will recommend on the domain of regimen, however it is indispensable that the patient observes these minimum precautions. If he does not, it is better to refuse to treat the patient, because the patient who ever-exerts himself every day, who makes error of regimen one after the other, who smokes a *turc*, and drinks every day a dozen cups of strong coffee is not in a condition where the vital force may react in a regular way.

One may object saying that such measure have themselves a therapeutic value and that the results will be due to such prescription. To that objection I may reply that all my chronic patients have already undergone such cures and other more studied without being cured. And as regards me I have also prescribed well studied regimen of all sorts during long years and I have found only very rarely some cures of chronic diseases such as rheumatism, eczema, neurasthania etc. . . and that experience was confirmed by more than one specialists in diatetics.

Before concluding I should say still a few words on the aggravations. Besides Phosphorus which I use only exceptionally in LM. one should be careful with Natrum Muriaticum. It is one of the remedies that has given me often some remarkable aggravations in LM. For that reason, I apply at first one or two doses of Natrum Muriaticum (Korsakow) and I prescribe the LM. only when no reaction is seen. Arsenicum should also be prescribed very

cautiously, Sepia as well. I have obtained very strong reactions with Chelidonium in 12 LM. This is impressive because one may administer this remedy in mother tincture without any reaction, while given in 12 LM. we may face reaction.

There are many things to say on this subject, because in Homœopathy there is not only *one* law, the law of similars; but there exists still other laws on which depends the good result of a cure. In order to be able to act according to these laws of nature, the doctor should always conscientiously observe and never give himself up to the routine. On this condition, he will become in time a master of the art of cure, while the routine will teach him nothing; on the contrary, giving himself up to this kind of practice he will forget very soon what he has learnt before.

I have already warned my colleagues against the aggravation by the LMs. citing numerous examples in my lectures, and I have nothing more to say but to repeat that one must be prudent and that one should not be too much active, which is worse than not to act enough.

It remains to us to elucidate a last point. I have just said that Hahnemann has insisted on the necessity of administering the remedies diluted centesimally at long intervals, specially the high dilutions. He recommends generally one dose every month or every sixth week. He has even insisted on the fact that we should never repeat a new dose so long the amelioration continues. This may cause one to shrug his shoulders, however I recommend to try it.

My personal experience has convinced me that one has generally the tendency to repeat. As long as I was not able to decide to conform myself to the prescriptions of Hahnemann, i.e. to say to give only one dose and to repeat it only when the amelioration ceases, my results were only mediocre. On the contrary since when I decided to observe strictly the advices of Hahnemann, my results were superior. Some examples will prove it :

CASE 1.

Miss B. K. . . . 60 years. Suffering since 30 years from stubborn constipation. She had the symptoms of Sulphur. I gave her Sulphur 30. In course of the following weeks all the symptoms were ameliorated considerably and the constipation was completely cured although I prescribed no more medicine.

CASE 2.

Mr. Ch. V. . . . 41 years. Suffering from diarrhoea since one and half year. Allopathic treatment could do nothing. The patient had some characteristics of Sulphur and after having a single dose of Sul. 30c, the profuse diarrhoea ceased and the stool became normal in appearance and frequency. No remedy was given and cure continued which was confirmed after six months.

It may seem bizarre to an allopath that the same remedy which cures a chronic diarrhoea may also cure a stubborn constipation. To a Homoeopath it is not astonishing, because he knows that the diarrhoea and the constipation are but symptoms having no direct relation with the morbid cause. The same cause may produce in an individual a diarrhoea and in another a constipation. That will depend upon his constitution and tendency. However as I have already described it on the chapter concerning the problem of causality, it is the totality of symptoms by which the cause is expressed and although we do not know it directly, that totality will help us to choose the causal remedy according to the law of similars. It is very often noticed that the symptom for which the patient comes to us is of no importance for the choice of the remedy. This being the case, in the above case where Sulphur was causally indicated by its characteristics has cured the contradictory troubles.

CASE 3.

Mr. St. P. . . Doctor-dentist, 43 years. Suffering since his young age from a marked tendency to diarrhoea which

has aggravated since ten years in an unbearable manner. Since a few years the diarrhoea is so violent that he is obliged to get up 5 to 6 times at night while the evacuations during the day numbered 8 to 9 times i.e. total evacuations during 24 hours are 15 times. The stool is watery and bloody, very often the patient evacuates some water with blood. He had torturing tenasmus. He was habituated to take Bismuth and *Enterovioform* several times a day and since six months he could not even stop the medicines even for a single day because as soon as he stops the medicine he has violent diarrhoea. Notwithstanding this palliative treatment the diarrhoea continued and he became very weak. The condition of the patient was lamentable. He is completely broken down. As he presented the symptoms of Arsenicum (Leanness, weakness, burning gastralgia, chilliness, nightly aggravations, amelioration by heat), I prescribed him on the 20th October 1950, a dose of Arsenicum 30 and advised him to stop all other medicines. After some days the patient telephoned me that he has become constipated from the next day during two days, then the stools were quite normal. The cure continued up to the month of December without the application of any other medicine, neither the repetition of Arsenicum. Then I wished to ameliorate the condition of my patient who was suffering easily from indigestion after fatty dishes. After a dose of Pulsatilla, his stool became more liquid, which decided me to apply one more dose of Arsenicum 200c, with a definite result. I had the clear impression that the dose of Pulsatilla hindered the action of Arsenic. Whatever it may be, the patient was cured from a very troublesome disease, which he had since his infancy; by two doses of Arsenic and he has affirmed that he has become quite a different man.

Similar results are not rare. I could have enumerated a number of such cases, and almost all homœopaths have

seen some similar resurrection. Nevertheless, in certain cases the effect of doses given at such long intervals is not sufficient, specially in cases where the disease has already caused deep lesions of the tissues. In these cases, one single dose is not very often sufficient to excite the vital energy and to make it act for a long period in a constant way in order to cure the loss of equilibrium and to repair the damage caused by its action resulting out of the loss of balance, on the physical body. It is then necessary to repeat the dose more frequently. Sometimes this is possible but very often this process is prejudicial to the patient being given that the more frequent administration of high dilutions causes some discordant reactions which are badly tolerated by the patient. Hahnemann arrived at that experience after more than 30 years' of experience and expresses himself thus under Ch. 274 (6th ed. of Organon)—“It is not admitted to apply to the same patient many remedies successively in high dilutions of the same degree, being given that it provokes some pathogenesis instead of cures. Because *the vital force of our organism does not accept twice an identical dynamisation.*”

It is for that reason Hahnemann first tries to face the danger by diluting more (in the scale of 50,000) and as it is not still enough to avoid the dangerous reactions, he dilutes one granule of these dilutions in the scale of LM. in alcohol 25%. While giving the phial to the patient he instructs him to jerk the phial 10 times before each dose. By this process Hahnemann obtained a changing dynamisation of which the power increases from one dose to the other by ten jerkings. This process allows the administration of the remedy more frequently and during long period.

The essential point of this new process contains in the following facts: Increase of therapeutic energy, possibility of therapeutic energy, possibility of frequent administration for long duration, liquid dynamisation of which the dynamic strength changes from one dose to another.

Hahnemann believed thus to obtain an action more profound than by dynamisation in the scale of centesimal, administered in granules which he applied up till then. For reasons which I have already mentioned it is not possible to repeat the dynamisation in granules except the lower dilutions. However, by the application of the lower dilutions only a superficial action is obtained which is limited only on the physical body and on the functional sphere. By the application of high Hahnemannian or Korsakovian dilutions prepared centesimally, we may get deeper effects which reach the vital centres it is true, but the last mentioned dilution cannot be repeated frequently. In this way, the remedy cannot always display as constant action as when it is given more frequently. It is this experience which has goaded Hahnemann to invent the process of dilution by 50,000.

The experience of Dr. Voisin is not however without value, because in giving the LM. in granules he has not changed the power from one administration to another and consequently it is logical that he obtained some "some numerous reactions..." which recall to me my own experiences during my first years of Homœopathic practice, when I knew not exactly how to manipulate the remedies and the dilutions. That avowal confirms not only the theory hereabove mentioned, but also the experiences of the author of this article to such an extent that he feels himself obliged to give thanks to his colleague for the proof that he has brought to the theory on LM.

However I do not believe that we may judge definitely the value of LM. Some stupefying cures are unquestionable, but have we not seen also some such cures with Hahnemannian or Korsakovian dilutions if the symptoms allow to find a similimum?

In spite of the support of Dr. Voisin, I remain on the reserve and I prefer for the moment not to make myself "Apostle" of 50,000, but to consider that method like one

among others, which sometimes gives good results where other medicines are deceiving.

I have published a series of good results obtained by LM. it is true but it is not to attribute to them the titles of panacea. My intention was rather to show that the Homœopathic remedy is energy by nature and not of the substantial nature. That discovery and the precision of a process which allows to prepare similar remedies seem to be some inventions, the greatest in the 19th century of which the importance for the understanding of the phenomenon of the disease and for the therapeutics is of a decisive value and at least useful for the law of similars.

If we think a bit we will see that it is self-evident. Let us take two seeds of poplar, of which one is boiled, and put them into the ground. Although the two seeds are materially identical and cannot be distinguished from one another, neither chemically nor morphologically the one has the power to germinate while the other has not. This power therefore does not reside in the matter but it must be of different category. It is a potential energy which cannot be explained by all the means of investigation. Similar is the case with the human life, only it is more complicated. And the disease is the product of that disturbed life. It is useless to analyse it under microscope.

It is Hahnemann who has discovered the nature of the disease energy and who has elaborated the process of the preparation of remedies possessing energy. The very moment a doctor has understood these two principles he begins to see the phenomena of the disease with completely different eyes. At first he is hesitant and undecided, he acquires as time goes on an orientation more and more sure in this new world and finally he can no more understand how he was so long satisfied with so many gross explanations of the materialistic medicine which are regularly contradicted by the observed facts. If one once understands that fact the patients will present themselves under infinitely more satisfactory perspective and the play of the

vital energy, completely neglected and ignored by the officials, will begin to unveil itself with a surprising clearness. Thus this dry subject—the medicine—which is called scientific will take life and reveal to us every day some miracles. And what is most beautiful, it is the fact, proved by experience, that that conception confirms itself every day and by the help of it one can really cure.

CONCLUSION

The question of the priority does not really exist for the lower or the higher dilutions. A Homœopath who depends upon the experience uses the whole gammut of dilutions, from the mother tincture up to the 50,000.

There are many cases where lower dilutions are enough, specially in acute cases where the vital disequilibrium is superficial and where the organism alone has a marked tendency to re-establish it. In such condition the doctor has not the necessity to take recourse to the dynamisations which penetrates up to the finer centres of the human organism. A few drops of *Euphrasia* 6x cures in one or two days the cold, if the remedy is homœopathically selected and we need not take recourse to infinitesimal dilutions in similar cases. Under certain conditions, there is also the necessity of stimulating the emonctories in order to help them eliminate the toxic products. In such cases we are obliged to use even the Mother tincture, because all concentrated medicines have marked organotropic action. It is the only effect which the official school knows. We do not hesitate to make use of such medicines if such a necessity arises. Dr. Leon Vannier has cleared this problem of drainage in his different works, which are known to us, and that that method may unquestionably render us good service.

However we must not forget, that by using the substantial medicines we come nearer to allopathy, nevertheless a good Homœopath must not be a fanatic and must not disdain Allopathic methods if they are indicated, neither

the surgery, nor any other process which contribute to the cure of the patient.

Experience shows however that an experienced Homœopath has the need of similar methods only very exceptionally. In the majority of cases he can cure thanks to the Hahnemannian method in a physiologic and durable way.

All points of view of an extremist is the sigh of a circumscribed mind. Thus he who sticks to one method is always wrong and often misses the best occasion to cure. Although we have no objection to make against the application of lower dilutions we think that he who limits himself to the lower dilutions alone, abandons precisely one of the most important discoveries of Hahnemann which has enriched the art of cure in an unbelievable way. Depriving oneself from the best arms that Hahnemann has forged against the disease, exclusively lower dilutionists will remain always a Homœopath with a limit and the idea of some partisans of that method of being better able to convert the officials limiting themselves to the substantial Homœopathic remedies is an error of great import in the history of Homœopathy because it is neither the cure by means of a very weak dose of medicine, nor by the law of similars which impresses the allopath; the fact which shakes him mightly is the power to cure cases which are stubborn and considered incurable by allopathic treatment even done in the University clinics which are cured by means of dynamised remedies.

In the fight for truth and for propagation of Homœopathy, I consider that the dynamisations in 50,000 have a particular value and I am convinced that they will render us the most precious services. Because if these dynamisations produce some reactions as we have experienced and which can be schematically reproduced, *the proof of the energetic nature of the disease is established.*

As for that proof, I am convinced to possess it, being given that I can furnish about 500 examples where 50,000s

alone were administered. Most of these cases were primarily treated for a long time, sometimes even for ten years, by numerous doctors, specialist and professors but they were not cured, while the high dynamisations in 50,000s cured 90% of these cases and ameliorated much the rest.

In the cases mentioned above, there are all sorts of diseases : Neurovegetative troubles, hypertension, diseases of the heart, ulcers of the stomach and of duodenum, varicose ulcers, lithiasis, renal lithiasis, pulmonary tuberculosis, dental granulomatas, eczema, cases of asthma and arthritis of all kinds. In some of these cases, it was the question of a child who have suffered during six months of a nephrosis and who was at first treated in a regional clinic and then in the university clinics, where his condition progressively increased notwithstanding all treatments. The professors said that there was no hope. When the little patient was brought to me he had some œdema of the eyelids and he could not even open the eyes, ascites, and the legs were very much swollen. His urine contained 250|00 albumin and one could say without exaggeration that the boy was moribund. After six months of Homœopathic treatment done exclusively with 50,000s the œdema disappeared, and after 27 days the urine contained no more albumin. The patient is now mervellously well and no one will even understand now that he was seriously ill.

What is particularly interesting in these cases, is not the fact that they were treated according to the law of similars, nor by small doses, the essential point is that they have been cured without any drug and without any molecule of a substance ; they were cured by that specific energy discovered by Hahnemann. It is there lies the importance of the treatment and not in the small doses, nor in the similitude.

There are some homœopaths who think that the "humility passes everywhere" and who always try to excuse themselves by saying that they are nothing but Homœopaths. They believe that they do well by affirming

that they always use some substantial doses and they are consequently "scientific" or in other words: They are docile student of the Allopathic pharmacology, of which they borrow the principles of therapeutics. Thus they hope, from time to time to be gratified by a compassionate smile from the other side of the barrier. However I do not envy them and I do not regret for not being able to be one of them.

Scientific is that which is confirmed by experience, however inexplicable it may be and non-scientific is everything that is based on the theory of *a priori* deduction. But this is a speculative theory reduced to absurdity even to mechanical by the discovery of magnetism, of electricity and of radiophonic waves. As magnetism may arise out of the rubbing of the iron, which itself is not the iron, the homœopathic energy may be produced by succussion of a substance without being identical with the substance itself. The electrical energy also requires a wire to conduct the electricity to the place where it acts, just like Homœopathic energy which requires a substratum for being administered. It is the globules or the solvant. Last of all the electrical energy has also the need of an apparatus for being produced as for example a motor, a radiophonic apparatus. In a similar way the Homœopathic energy can manifest itself on the diseased body of the patient only on the condition that its administration is indicated.

Scientifically then, a doctor is he who examines the action of the Homœopathic energy after having carefully been sure that the above conditions are rigorously fulfilled, while a doctor who applies a rule deduced from a phenomenon which seemed to be of the same category, but not of the same category in reality, cannot be considered as scientist while acting in this way. Because science is characterised by the investigation without presumption,

while the *a priori* judgement, based on some hypothesis, is contrary to science.

It is generally the case for Allopathy and the lower dilutionists who act in this way, because they make only some conjectures on the high dilutions. They do not wish to believe that they act "for the good reason" and "because" etc . . . of what use are all these. Let them make experiments, and if they then formulate their objections we will hear them attentively. However, the chance is so very great that they are obliged to recognise the exactitude of our observations.

In the age of Hahnemann, his discovery must have appeared absolutely absurd to most of his contemporaries. However since when the radiophonic waves have been discovered, since when one is able to split the atoms and thus develop some energies which no human being could have imagined even in his dreams, it should no more be so difficult to familiarise oneself with the ideas of Hahnemann. Physics has already abandoned its principles of mechanics and it has now become a science of "energy". Sooner or later the moment will come when medicine also should revise its principles and abandon the mechanical conceptions in favour of the conceptions of energy. Then we will see that the old conception of some officials according to whom "Homœopathy is only a phantasy being given that one cannot explain the action of the infinitesimal remedies", will become null for the good reason that one will understand that the scientific materialism of the past century was but an illusion.

From the experience of Homœopathy results a conception of the morbid phenomenon so different that a Homœopath who has reached that level of knowledge renounces for ever the idea to win sympathisers by making concessions. G. H. Jahr one of the most eminent disciples of Hahnemann has already said in 1843.

"It is certain that those among us who wish to propa-

gate Homœopathy, should insist more on the qualification of the converted doctors than on their numbers. Because every one understands easily that we are not well served by those who come to us because they do not see any great difference between the Official school and that of ours or who are too much imbued with prejudices or their intelligence is very narrow for being elevated to a new conception in full liberty putting themselves above their dogmas learnt laboriously by heart. Such kind of proselytes change nothing by conversion but their names and destroy everything where they fix themselves and they are infinitely more useless than they are useful. Even if we have attracted towards us some honest and intelligent men by sacrificing some of our principles and adapting our method to the official method, then the manner with which we have gained over them would become later on an almost unsurmountable difficulty for the convert. Because thus preventing them to catch the *genius* of our science there is the risk of pushing them from the very beginning on a false path" (H. G. Jahr : Symptomenkodex der homœopatischen Arzneimittellehre, Vorwort. Dusseldorf 1843, ed. Schaub.)

In these words of a contemporary of Hahnemann lies the summary of the whole problem of the propagation of homœopathy. We see that there has existed from the beginning of the discovery of Hahnemann this problem and it still continues to exist.

It is, however, interesting that a therapeutic and instructive method of the value of homœopathy had had so many difficulties to become universally known. The reasons of this paradoxal fact are many. First of all the primary currents of the preceding era pushed the humanity to make researches specially on a material plan. It was necessary, because one should first of all build a foundation and develop the methods of science. However, there is a general law according to which a marked tendency in the human history necessarily tends towards unilaterality. The

children of that era neglect the other aspects of the problem and limit themselves too much to the current conceptions. The intelligent persons on the contrary precedes in general their contemporaries by several centuries and consequently cannot be understood by them. It is a general fact that the truth should first of all be crucified up to the moment when general people had arrived at the degree of intelligence which helps him to understand. Then the light breaks out. I think that moment is not far for homœopathy.

Meanwhile we should all work for the propagation of the truth. One may think me too much enthusiastic; I ask his pardon. It is not with the intention of making me a champion of a new method that I have given two lectures in the National congress in 1950, but only to serve our common ideal, homœopathy. Let us all be animated by that ardour and let us all be absolutely firm in that fight for the truth. Only then it will be probably possible for us to accomplish which the past generation could not have realised.

Let us prepare the day when a really humane and harmonious medicine, a medicine really scientific will triumph.

THE CENTRAL HEALTH COUNCILS RESOLUTIONS REGARDING HOMŒOPATHY

(Rajkote, 8th to 11th February 1954.)

Regarding Homœopathy the Council recommended that there should, in future, be only one course of training, namely, the degree course of four and a half years with six months training thereafter. Admission to this course should be restricted to those who have passed the Intermediate Examination with Science subjects. To provide adequate