

future Homœopaths! But the sacred principles of Homœopathy must not compromise with the fallacies of modern science. In any case, to drag Homœopathy down to the level of an experimental science should be scrupulously guarded against for reasons self-evident.

In fact no institution can make the student learn his vast *Materia-Medica* by rote or arm him with a mode of specific treatment of disease as in Allopathy. The technique of Homœopathy is right about the other way.

Even for reasons of politics, especially in the present world of hurry and materialistic thinking, if the Homœopathic institutions should make the course of studies for as many years as in M.B.B.Ss. course, it may just be a problem to find parents who would send their wards to learn Homœopathy in our institutions.

There should, therefore, be a short course of about two years' duration during which period *Materia-Medica*, *Organon*, Philosophy, Case-taking and Repertorization may be taught in right earnest and the student left to his ability to grow into a giant Homœopath, according as he can and shall make the knowledge so imparted his own!

HYDRASTIS CANADENSIS IN MAMMARY CANCER

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Pathological diagnosis is very interesting, especially when it is completed with a homœopathic prescription—*Royal E. S. Hayes, M.D.*

Mammary cancer in woman is that form of cancer which in the order of its frequency and malignity takes third place as a cause of death in statistics throughout the world, the first place belonging to cancer of the womb and the second place to cutaneous cancer.

the beginning and the only thing that the sick woman and the physician can appreciate is a mobile nodule or induration lightly fixed to the pectoral muscles, with imprecise borders and irregular edges ; in advanced cases there exists a firmness of the tumor, alterations of the skin, taking on the aspect of orange peel due to the adherence of the tumor to the periphery, the nipple of the breast is retracted and changes position.

The most frequent place of this tumor belongs to the supra-external quadrant of the mammary region, and the zone which follows in frequency is that placed behind the nipple of the breast region. In advanced cases there is no possible localization because the tumor has invaded all the tissues.

The evolutive period is slow, but the march is progressive and of great propagation, especially in the axillary, intercostal, paraexternal and supraclavicular ganglia.
• This symptom is one of the most serious, because it reveals intrathoracic propagation.

The prognosis of this disease is serious, the average of life to these patients is from 2 to 3 years (Wakeley, Pfahler, Parry, etc.), notwithstanding one can find cases of low evolution whose period is of several years. This prognosis is based upon the sick woman's age, race, as well as the size, localization and variety of the tumor, pregnancy influence, lactation, etc.

From the point of view of prognosis and treatment, the Traditional School only employs the early axilla-mammary surgical intervention, X-Rays, radium and hormonotherapy.

As a prophylactic measure, castration by Roentgen rays of those women predisposed to cancer is proposed and feeding by a wet-nurse or artificial preparations in order to avoid the possible factor of cancerism in mother's milk when any cases of cancer in any of its clinical forms have been registered in the line of ancestors. (Bittner). In the same way radical mastectomy is proposed even in benign tumors of the breast. (Reed).

and in this class of patients the catarrh injures the middle and external ear. In catarrhal cases of the eyes, ears, nasopharynx, uterus or vagina, it is producing thick, tenacious, yellow-greenish and filamentous secretions.

It is very frequent that among these patients with mammary cancer, with characteristics indicating *Hydrastis canadensis* as remedy, are associated indurated tumors of intense and burning pains and the contracted nipple of a breast; fissures and excoriation of the nipple of a breast (Paget's cancer); uterine troubles with congestive phenomena manifested by abundant, viscous, excoriating, sour and filamentous leucorrhoea; pruritus vulvae; ulcerous and fungous cervicitis; precancerous ulceration of the cervix uteri; menorrhagia; hepatic insufficiency phenomena which are manifested by vesicular pains; dyspepsias of a hyperacid type and gastroduodenal catarrh.

• Intestinal troubles in the form of mucomembranous colitis are found, where the main symptom is constipation and rectocolitis of a hemorrhoidal type.

For the most precise indication of *Hydrastis canadensis*, for mammary cancer, besides finding the specified characteristics, I must insist that its prescription belongs to the precancerous phase and nodular cancer type, when neoplasia has not yet reached its phase of visceral or osseous invasion.

The diverse provings performed from the Hahnemannian point of view with *Hydrastis canadensis* started in 1856. The first one was carried out in that year by Dr. Hastings; later on Drs. Hering, Allen, Burt, Whiteside, Hale, Vayes, Clifton, Clark, Cowperthwaite, Boericke, Vannier, Charette, etc., etc., gave us the following characteristics for its indication in mammary cancer:

- I—General exhaustion, sensation of weakness, profound asthenia and cachectic condition.
- II—Depression and melancholia with loss of appetite.
- III—Cancer and cancerous state, before ulceration, when pain is principal symptom.

IV—Straw-colored skin. Sallow complexion.

V—Constant pains of a burning type at the level of the mammary glands which become worse at night. (Neatby).

VI—Hard and painful, irregular enlargement of breast with nipple retracted and enlargement of axillary ganglia.

ANTIDOTE—Sulphur.

DOSE—Tincture, 3x, 6x, and 30x.

CONCLUSIONS

- 1st—Mammary cancer of simple carcinoma type, on account of its frequency, demands an early diagnosis.
- 2nd—Clinical cases prove that it is possible not to employ Roentgen-therapy and radical mastectomy if one can carry out THE OPPORTUNE PRESCRIPTION OF THE RIGHT HOMOEOPATHIC REMEDY and
- 3rd—WHEN *Hydrastis canadensis* COVERS THE TOTALITY OF THE SYMPTOMS IN A FEMALE PATIENT OF SIMPLE CARCINOMA OF THE BREAST, ONE CAN BE ASSURED THAT SHE WILL RECOVER HER HEALTH IN A PROMPT, SMOOTH AND LASTING WAY, ACCORDING TO THE IMMUTABLE LAW OF SIMILIA SIMILIBUS CURENTUR.

—*The Homœopathic Recorder, March, 1954.*

GAMMA GLOBULIN DISAPPOINTS

A committee of twenty experts was requested by the United States Public Health Service to evaluate the results of the mass inoculations with gamma globulin last year. The twenty experts were appointed in collaboration with the Association of State and Territorial Health Officers, the American Physical Therapy Association, and the D. T.