

Whenever he visited a patient and came to know that he was poor, he did never charge even his visiting fees. Sometimes he did not also charge the car-hire rather he contributed something to the patient for the purchase of articles of diet. Many times the wretched conditions of the poor patients moved him to tears.

In Dr. Verma we have lost a philanthropist and a Homœopath of high order. The only consolation to the people of Shahabad is that Dr. Verma has left behind his eldest son as the physician incharge of his well-equipped dispensary and the tradition of serving the sick selflessly.

Dr. Varma left this earthly place on April 24, 1955.

WHAT HOMŒOPATHY CAN DO FOR ANIMALS

DR. HARVEY FARRINGTON, M.D., ILLINOIS

Ever since Boenninghausen reported thirty-seven cures of animals in volume 67 of the *Allegemeine Homeopathische Zeitung*, more than one hundred years ago, homœopathic doctors have published numerous cures of horses, dogs, cats and many other members of the animal kingdom. No doubt most of you have had similar experiences. Moreover, you have no doubt discovered that the right remedy is not always easy to find; and again that this is easier than if the patient were a human being. Success, of course, depends on one's power of observation as well as on a knowledge of objective symptoms as indications for a remedy. It is like prescribing for little children or infants. Babies as well as animals never fake symptoms, so that their actions are always spontaneous and never assumed. In both instances, there is usually one leading symptom which furnishes the key with perhaps a few others that complete the objective picture.

Take, for instance, profuse salivation. In animals this stands about 95% for *Mercurius*. Many years ago, a man whom I was curing of arthritis deformans asked me to see what I could do for his eight or ten kitten rabbits. They were suffering from a contagious disease called the "slobbers" which was invariably fatal. They were weak, would not eat and had coryza, lachrymation and copious salivation. One or two had already died. A powder of *Mercurius* 30. in their drinking water cleared up the ailment in two or three days.

Here is an other case, quite different in character but having the abnormal flow of saliva. To me, it was my most interesting and at the same time most satisfying case, not only because of its peculiar nature but because it gave me the satisfaction of putting one over on my nemesis, a celebrated orthopedist in Chicago by the name of J. D. Farrington, whose mail I was continually receiving and whose patients kept coming in or calling on the phone, simply because my name preceded his in the classified telephone directory. When a girl came in with her arm and hand in a caste, a man on crutches with splints on a broken leg or little Johnny with a knee all taped up, I scarcely needed to say more than, "You are in the wrong pew!" It was easy for me to steer them to the right one, for long since I had committed to memory the doctor's telephone number and the location of his office. Once I received a check from his office for \$25 made out to his father who was a preacher on the north side of Chicago. I called up his office (without naturally having to consult the phone book), and his stenographer answered. When I explained to her what had happened, she merely said, "Mail it back," without even thanking me! I felt like saying, "Come and get it." Latter I received another check from a lawyer named McGinnis, made out in my name with the surname Harvey, not Jim or J. D., whatever those initials stand for. Of course I could have cashed it but felt sure that, in time, they would catch up with me and I might have been hauled

into court, where, incidentally I have been many times, but not for forgery or other serious misdemeanor; I was nearly always called in as an expert witness, as a witness for myself in a suit to collect from some estate and once for speeding—the only time in my forty years of driving. I was simply peeved because I never got any recognition for my care in setting things right. I met the doctor once at Ravenswood Hospital where he is the big shot. He was a tall, blue-eyed blonde, rather handsome. When I enumerated the various annoying incidents for which I intimated he was responsible, he merely grinned; at least he had the usual Farrington sense of humor. I haven't as yet told him about the dog, but certainly will if I ever meet him again.

The patient in the case was a fine little bull pup, three months old, who had distemper. His mistress, being a good homœopath, called me on the phone describing the symptoms, and I mailed her a powder or two of the nosode, which usually cures in 36 to 48 hours. But, unknown to me, she had also called an old school veterinarian. Whether his medicine or mine, cured the distemper does not matter; for after apparent recovery, the dog would not eat. When they tried to feed him forcibly, they found that his lower jaw was as limber as a piece of rubber, his gums swollen and bleeding and ropy saliva dripped from his mouth. Again the lady called the horse doctor; but he was puzzled, never having seen such a case before. He called another "vet" in consultation. Neither could make a diagnosis; so, as I learned afterwards, they consulted my nemesis, the great Dr. J. D. The case was plainly one of a localized osteomalacia. The learned doctor called it a delayed rickets, and recommended a few shots of pituitary, which, however, was never administered. I had given a single dose of *Mercurius* 1M and by this time the dog was much better and had begun to eat—a favorable sign in any animal, especially in one suffering from sore mouth. The "vets" were flabbergasted at the sudden improvement in the little

patient. They had to admit that my medicine had turned the trick and you would think that they would at least inquire as to what that medicine was. But only one of them had sufficient interest to write to me. He said: "It was pituitary extract was it not?" I answered no and gave him an outline of homœopathic principles and technique. In a second letter, he thanked me and said that he would drop in to see me sometime. But he was like his fellow practitioners of the old school, who treat human beings. He never came and that is four years ago.

Experience has shown that almost any potency, high or low, will perform miracles when given to animals. And yet, they will sometimes suffer severe aggravations, just as humans do, if they get too much medicine. Many years ago, our canary caught a cold. It couldn't sing and its breathing was quick and rapid, and most of the time the mucus rattled in its throat when it breathed. Before leaving for the office, I put a few pellets of *Hepar 30*. in its drinking cup. When I came home some 5 hours later, the bird was breathing normally and had begun to sing a little; my family told me that, not long after I had left, it fell down onto the bottom of the cage and appeared to be dying. In a few minutes, however, it sat up, made a few squeaky sounds, then flew up on its perch. Of course I removed the drinking cup at once, emptied and sterilized it. Our pet lived for several years thereafter but died from a malignant tumor on the side of its head.

One evening while visiting a mother whose small son was ill, I noticed a little black kitten walking about the room, propelling itself with its front legs; the hind legs seemed to be paralysed. When I called the lady's attention to it she remarked, "The cat has been doing this nearly all day. What do you think is the matter with it?" I replied, "It is constipated. We will give it a dose of *Nux vomica*." I gave it a single dose of the 200th and made my get-away, which was fortunate, for Mrs. B. later told me in a rather petulant voice, that, half an hour after I

had left, the kitten was walking around messing up her beautiful oriental rug!

Homœopathic medicine not only works quickly in animals, but often saves a lot of trouble. In the days when horses were used to pull heavy trucks, a patient of mine who dealt in apples by the car-load happened into the office and, during the course of our interview, told me that eleven of his thirteen horses had the pink eye and the vets were having an awful time mobilizing their heads so that the eyes could be washed out with antiseptics. I said, "That is unnecessary. Let us see what a little homœopathy will do." I filled a tall bottle with water and put into it a powder of *Euphrasia* 30. But it looked so thin and weak that I decided to color it. Not having anything else on hand, I added an ounce or two of perfectly good bourbon, which gave the solution a beautiful amber hue. Then I wrote out some elaborate directions for its administration. A cupful was to be poured into a bucket of water, stirred thoroughly and each horse was to be allowed to take a small drink from it three times a day for three days. My patient, at his next visit told me that his stable man had called up a day or two before and said, "Say boss, the booze that doc sent down must have been awful powerful, for it cured them horses clean as a whistle in three days!"

Back in 1898 and 1899, I had charge of the animals on John Pitcairn's de luxe farm in Bryn Athyn, Pa., and also had many jokes on the vets. One was the cure of a big, dappled percheron suffering with strangury. I was called in a hurry for the powerful beast was kicking his well-built stall to pieces. But the hostler told me one symptom which was all I needed to know. He said that the horse seemed to be in agony when he had to urinate, moved about in the stall, started to kick violently, but as soon as the urine began to flow, quieted down and remained quiet until the next occasion. How many times I have seen this in children. You will find the symptom on page

710 of my father's *Clinical Materia Medica*, and in Clarke, under *Petroselinum*. I cannot recall the potency I used, but it was given in about the same way as to the horses with pink-eye, with immediate results.

I have prescribed *Sepia* for animals only twice, and at a recent date; but this goes to show that, although most of their ills may be cured with a comparatively few of our polychrests, at times an unusual one is indicated.

Early in February of this year, a Mr. Brown called me up on long distance phone from Washington, D. C. and asked me what I could do for his eight year old tom cat. A brief outline of the symptoms is as follows:

Two and a half years ago, difficulty in urinating. *Sarsaparilla* had relieved; also *Rhus tox*.

The same symptoms returned in October of 1953 with greater violence. Urging to urinate; difficulty in passing and evidence of great pain.

Attacks come always in damp or wet weather; also with a snow storm.

The cat had been given several different drugs by the veterinarians and a catheter was used so often that there was bleeding from the urethra.

Sepia stands at the head of the list for ailments worse in snow air; it is also worse in wet weather. It was given in the 30x potency with considerable relief. Later in the 500x which cured completely.

Dr. W. Harvey Cowan of the animal hospital where the cat had been treated off and on several times, wrote me a letter giving the diagnosis as chronic cystic calculi in recurring attacks and stating that with each recurrence, catheterization was necessary. The medical treatment had been injections of penicillin, octin (smooth muscle relaxant) and male hormones. Oral medication had consisted of chloretamine (a urinary drug releasing hydrochloric acid to acidify the urine), vitamin A capsules and phyten (another smooth muscle relaxant). This was quite an imposing list of drugs, and all they did was to palliate or

relieve the condition until the next spell of bad weather. A few little sugar pills did all that the above drugs did not ; it cured the cystitis, acidified the urine, and now poor puss seems immune to snow storms and has had no more dysuria.

My last case is that of a parakeet. It was eating well, seemed normal in every respect, was active and its feathers were well groomed. But suddenly it developed spells of thrusting the head forward and backward. Here there was but one symptom to prescribe for : It was not "nodding" but more jerking. Under this symptom Kent has (page 129), *Ars.*, *Nux-m.*, *Sep.*, and *Strych.*, all in small type. It was not difficult to choose *Sepia* as the drug most likely to fit the case. It was given first in the 30., with some relief, and later in the 200., with perfect cure.

DISCUSSION

DR. WILBUR K. BOND (Greens Fork, Ind.): I should like to add a few points to Dr. Farrington's cures for animals.

We had a cow in our barn that had just delivered a calf, and evidently had milk fever. The veterinary could not get any bowel passage through for days, and the cow was given up to die, so I couldn't resist the temptation. I went down to the stables that night, knowing that probably another veterinary would be called in the following day and add further insult to injury, so I pulled back the cow's lips and dropped in a dose of *Colocynth* in her mouth. The only symptom I had was an objective symptom to go by, and that was that the cow lay on her stomach. That is all I had to go by. She was evidently in terrible pain, writhing and twisting, and throwing her head back. It seems as though the essential thing is to get the dose in contact with mucous membrane, so if it gets inside the lips, it will do the rest.

I forgot the case and went on home. Next morning I went down, as I always do, to check on the old folks.

I said, "How is the cow?"

My father said, "By gosh, that cow is up and walking around."

I never told him what I had done.

DR. SUTHERLAND: In this case there was a "Bond" between life and death.

DR. BOND: I had a nice cat at home that had a prolapsed rectum, and diarrhea, with the rectum hanging out about two inches. We had taken that cat several times to the veterinary to have it put back, and the last time he said, "I will fix it this time," and he put a stitch in the rectum. He properly sacked the cat up to keep it from scratching us to pieces, and I held the cat and he stitched the rectum. That held long enough for the stitch to dissolve out, and out came the rectum.

My mother got tired of cleaning up after the cat, so I gave the cat

Podophyllum, the 1M potency, and it was almost like magic to see the rectum sucked back into the abdominal cavity in a few hours' time, and it never had another recurrence.

DR. ELIZABETH WRIGHT HUBBARD (New York, N. Y.): May I mention a case of tumors? One of my patients had a pet dog, a little Schnauzer. She called on the telephone from Waterbury. She said, "My Schnauzer has a tumor of her breast, and it is about as big as a walnut, and it is growing fast. Can you do anything about it?"

We sent her a dose of *Conium* in the 10M, because it had no symptoms whatever that she could give. The tumor went down and went away, and that was months ago and the dog is fine.

The other day the telephone rang and someone said, "I am a friend of the lady whose Schnauzer's tumor you cured, and I have a Boxer bitch and she has three tumors on her nipples. Will you please send us some of whatever cured the Schnauzer?"

I said, "Well, Mrs. So-and-So, I would rather you told me some symptoms of the Boxer, because, unfortunately, what will cure one animal will not always cure another animal, in Homœopathy. Please tell me some symptoms."

There was a dreadful pause over the 'phone. The Schnauzer's lump, by the way, had been a hard lump. She could not think of anything to tell me. I said, "What does it feel like when you touch a lump? Does the dog jump? Is it sensitive? Does it feel hard? Does it feel as if it were full of fluid?"

She said, "It feels as though it were a lump of fat."

Then I said, "Now think about something else about your Boxer."

"Well," she said, "she is getting fat. She used to be a lovely slim creature. She is getting fat."

I said, "That is only two legs to the stool. Drum up something else."

After a long time she said, "Well, there are the funniest little things around that poor dog's ears. They don't itch, but they bother her."

"What do you mean, 'funny things'?"

She said, "I don't know what you would call them, but if a human being had them, I would say they were warts."

I said, "Warts! Coming up with a special!"

So we sent the Boxer bitch a dose of *Thuja* 10m, and the lady called up again in two weeks and she said, "The warts are gone. Two of the three (what I told her were lipomas) are gone, and the third one is much smaller. Please send me some more."

One dose of Allan's favorite remedy, placebo!

The third case is my own cat, who is sixteen years old. My youngest child, who is seventeen, cannot remember life without this cat. She is an ancient, fat, good old girl, and she suddenly developed a lump as big as a walnut on her haunch, and no symptoms of any kind except the lump wasn't tender when pressed, definitely not a cyst, and not a lipoma. It wasn't hard particularly, but it was firm. It was a fibrous tumor of some kind.

I couldn't find a symptom on her, so I gave her a dose of *Thuja*, but only in the 200th, because I wasn't so sure, and in about ten days her lump was gone, and she is as cheerful as a cricket, so maybe animals are more psychotic than we imagine.

DR. ALLAN D. SUTHERLAND (Brattleboro, Vt.): Well, I have two cases that I can recall that were very interesting.

The first one occurred when I was between my junior and senior year in medical school, at which time I felt I knew quite a lot about Homœopathy. My Boston terrier developed—on what would have been his chin

if he were a human—a great big cauliflower growth about as big as a small walnut. I started reading Boericke's *Manual*, and the first thing I tried was *Phaseolus*. My father had beans growing and I crushed the leaves. I couldn't get enough juice out of them. Then I went to *Thuja* and sent to B. & T. in Philadelphia for some tincture and gave him a drop or two or three of the tincture on corn bread. He loved corn bread so well that he would take the *Thuja* with it, and at the same time, while he was interested in the corn bread, I would drop a drop or two of the tincture right on that growth.

It was quite interesting. The growth broke down and necrosed, and in six weeks there wasn't anything there, just a little tiny scar where it had been, and that is all that happened.

While this was going on, I developed a very bad diarrhea which ran for about forty-eight hours, and mother finally called the local doctor, much against my wishes. I knew what remedy to use, but I didn't have it—I figured I would get well by *thinking* of the remedy.

He saw the dog and said, "Bring him down to the office and I will take that off. That is the only way the dog will get over it."

I said, "We are treating it now."

"What are you doing?"

"I am treating it homœopathically."

He said, "I thought that part of medicine was dead."

I said, "No."

"Well, when it doesn't work, bring him down."

He never saw the dog again because I, unfortunately, got well under his treatment and so I thought, why stir up a row.

The second case was another dog which I owned some years ago. Its mother was a so-called Spitz, and his father was a German Shepherd. This was a beautiful dog, believe me. It is a wonderful combination. He developed a distemper for which we had taken him to the veterinary, and the dog disliked the veterinary's medicine so he would almost take my hand off every time I tried to give it—which I thought showed pretty good sense.

I decided I would have to do something about it. The symptoms were a marked discharge from the eye, of a sort of yellowish green, but when we tried to clean it out, it would string out like that; and he had a discharge from the nose, also, which would harden like a crust, a very black, hard crust on the outside of the nose, which prevented his breathing. Another symptom that was outstanding was that in the morning the dog would go out as soon as we were up, and he would seek the corner of the house opposite, where there was an "ell" which faced the sun, and where there was an accumulation of dead leaves. He would bury himself in the leaves and lie facing the sun with his eyes open. It was a very interesting symptom.

The remedy which I felt was needed was *Kali bichromicum*, in the 30 X, which was all I had, and in three days all the symptoms were gone. What was the significance of this desire for sunlight in relation to *Kali bichromicum*, I do not know, but "the proof of the pudding is in the eating," and the doog got well.

DR. BOND (Greens Fork, Ind.): I should like to ask Dr. Farrington if he has a good suggestion on a tough case I have. The cow had a fistulous opening in the side of her teat, so every time you seized it to perform, you got a nice shot in the lap or in the face, as well as what went in the pail. I have been trying to think of a remedy. I tried *Silicea*, but it did not have a successful result.

DR. FARRINGTON : I don't know, Doctor, offhand.

DR. JOHNSON : *Calcareo sulph.*

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HAHNEMANN'S DOCTRINE OF PSORA AND THE HOMOEOPATHIC TREATMENT OF SKIN DISEASES

DR. JOHN PATERSON, M.B., Ch.B., D.P.H.

(Continued from page No. 360)

If you are looking for modern scientific data to support the practice of homœopathy, and the soundness of the Hahnemannian teachings, I suggest that you read up any modern text book on the subject of "Immunity".

Meantime we have noted that, in acute exanthematous disease—there is a vital force which comes into action and, as a defensive measure, the skin has to play an important role. As a result of this skin disturbance, the disease is eliminated and health restored in a comparatively short period of time. Also, let us keep in mind, that there is a latent period from the time of infection until the evidence of the full defensive action on the skin—the incubation period.

It is clear from his writings, that Hahnemann did foresee the contagious nature of certain diseases, Small-pox and Malaria, and had in mind infection of the body by "parasitic living animalcule" but the terms of his day are capable of different interpretation today as a result of the work of Pasteur and his disciples. Today the word "parasite" simply implies a living plant or animal living in the tissues of another living plant or animal—it is not necessarily associated with disease, it may be symbiotic: for example, the *B. Coli* of the intestinal canal, may even be beneficial to the host.