

moved forward and stood watching how deftly he handled his little brush. The grays and browns of the cliffs, the varied shades of green of the trees and bushes that covered them here and there, the lengthening shadows and dark vistas, contrasted beautifully with the silvery lake below; but above all, the artist had captured that delicate, pleasing effect which is the dream of every landscape painter: "atmosphere." To my exclamation, "Ausgezeichnet!" he raised his smiling face and replied, "Danke schön!" and resumed his retouching.

On the way back to the hotel I said to myself: "There was a perfect illustration of the difference between the art of prescribing according to the precepts of the *Organon*, and that of the average homœopath."

—*The Layman Speaks, July 1956.*

COMPLAINTS OF PREGNANCY

DR. H. A. NEISWANDER, M.D.

Perpetuation of the human race is only through pregnancy. From the beginning there has been distress, discomfort and pain, and the annoying symptoms of the child-bearing woman.

The story of Creation in Biblical history tells us that childbirth shall be associated with pain and so down through the years, depending on the resistance, physique, anatomical formation and anatomical adjustments of the mother and her foetus, the mother has given birth to her children through discomfort and misery.

The normally robust, well developed mother during the age when she has pliable muscles with an adjustable pelvis, rarely has a great deal of difficulty, providing the foetus is normal in size and holds a normal position. But a pregnant woman must always be closely observed and checked symptomatically and physically for any deviation

from the normal; for the abnormal conditions which are many are our concern.

The discomforts and complaints may be classified as physical, neurological or pathological. After all, a normal pregnancy is only a physiological state.

1. Under the physical status we have a malposition of the uterus which may cause severe backache, headache and a marked increase in gastric distress, all of which may be completely, or at least very much, alleviated by correction of the malposition together with the indicated remedy such as *Nux vomica*, *Pulsatilla*, etc. The longer these physical conditions are permitted to continue without correction, the more prone they are to develop into a pathological state.

2. A neurological state may become a very annoying condition or situation, not only for the patient, but for the physician as well. The pregnant woman may have the idea that she does not want her babe. Then her physician will necessarily use all the psychiatric persuasion and power at his command, repeatedly, together with her indicated remedy such as *Pulsatilla* or *Ignatia* which, if properly selected, will make her accept her situation which she thought she could not endure.

Either the physical or neurological states will become pathological in the later months of the pregnant term if not corrected.

3. Pathological states may begin with an increase of blood pressure, increased pulse rate, slight albuminuria or glycosuria, or obesity. These conditions, if found and corrected in the beginning, may mean little to the patient, but if unobserved and not corrected may be very grave.

CASE 1.—Mrs. S. T., aged 27, white, had large varicosities about the vulva, cold hands, pale, metallic taste and dry mouth which indicated *Hydrocyanic acid* which relieved her condition. She was subject to colds with weakness and prostration. *Influenzin* took care of the acute condition; later the restlessness, the desire for open air and the weepy

emotional state indicated *Pulsatilla*, with the expected benefit to the patient.

CASE 2.—Mrs. S., aged 40, white, had a cholecystectomy the last of October, 1947; about 2½ mo. later aborted a 2 mo. pregnancy and about 7 mo. later became pregnant again. Previous to her pregnancy she had a 2nd degree retroversion, slight endocervicitis, and severe pain at menstruation. After pregnancy developed her complaints were pain in right upper abdomen with much gas, eats little at a time, can't eat sweets, tomatoes or cooked potatoes. Can eat sauerkraut, raw potatoes and lettuce. Has numbness of the hands, great prostration, fixed ideas. *Thuya* relieved her distress. A cold developed, was better moving about in open air, profuse yellowish-green discharges, discouraged. *Pulsatilla* cleared the obstinate cold. She became worried over a death in the family. She had a general pulsation over the body. Was better when busy with her work but impatient because she hadn't the strength to work as fast as she wished. *Iodine* relieved this type of distress and her fourth daughter arrived in due time.

CASE 3.—Mrs. G. C., aged 35, white, married about 7 years, complained of sterility. Examination revealed right ovarian cyst and moderate endocervicitis. She had frequent colds, changeable symptoms, much tiredness. *Tuberculinum* was given. The general health improved but she would get sudden violent influenzal attacks. She wanted cool surroundings, was anxious when quiet, had constant motion of eyeballs. *Iodine* gave satisfactory relief. At the end of a year she became pregnant, had a normal pregnancy and delivery and had a fine baby boy.

CASE 4.—Mrs. H. Z., aged 36, white, was the mother of twins and had had 3 other single births. Blood pressure was 170/110. Complains of headache in back of head, vertigo if hurried, bursting feeling in head, has pus cells in urine, a trace of albumin. *Vipera* in ascending potencies relieved symptoms. Later, for her nervousness, nausea

and heart-burn *Pulsatilla* was given and gave the needed relief.

CASE 5.—Mrs. C. C., aged 35, white, 1 child. Seemed headed for a rapid breakdown. Well selected remedies did not hold. *Tuberculinum* was prescribed with benefit. She became pregnant and threatened abortion at 3 months. *Lycopodium* was indicated. She recovered from the attack of cramps and later *Tuberculinum* was administered. The last month of pregnancy the patient was restless and uncomfortable. *Uric acid* was given and patient said she felt better than at any time during pregnancy. She had a fine boy and made a good recovery.

CASE 6.—Mrs. B. P., aged 30, had had one normal delivery and three miscarriages. Except for colds and a slight ante flexion of uterus the patient seemed to be in good health. There were few symptoms on which to prescribe. At the time of her miscarriages she would complain of a cramp-like pain when she would rise from sitting, which would extend into the hypogastrium. While sitting she would have pain like a pressure and contraction. *Thuja* was prescribed and she again became pregnant. She had a normal pregnancy. For the colds she developed during this period, *Thuja* would be indicated. She would be worse at night, from the warmth of the bed and from cold, damp air. For the headaches and backaches she acquired when she went shopping *Bryonia* would be clearly indicated and quickly relieved her. She went to full term and had a normal delivery. Mother and babe are in good health.

With the exception of an occasionally added deficient hormone, in my judgment the homoeopathic remedies will do more for the complaints of pregnancy than anything else that can be given.

DISCUSSION

Dr. Elizabeth Wright Hubbard (New York City) : May I just ask one question of Dr. Neiswander? In his cases that tend to have frequent miscarriages, does he ever try

a dose of *Syphilinum* between pregnancies? I find it does wonders.

Dr. A. H. Grimmer (Chicago, Illinois) : This is a very nice paper and it is wonderful what the homoeopathic remedy will do for the pregnant woman. And for those who either fail to become pregnant, sterility, the homoeopathic treatment also certainly brings a large majority of them around to respond.

There is one troublesome thing, though, that sometimes is very hard to master even with a homoeopathic remedy—the persistent nausea that some of them will have in spite of very good prescribing. If you get a case where every thing seems to center in the nausea alone of a more or less nervous type, you would be surprised what *Symphoricarpus* will do for those cases.

Dr. F. K. Bellokossy (Denver, Colorado) : I have come to the conclusion that in every case after the delivery, absolutely in every case, I have to give a dose of *Arnica*. I had a case a year or so ago where I didn't give *Arnica* because I thought other medicines were better indicated and the placenta did not come out. It just would *not* come out.

I waited for two hours and then, in desperation, I called the surgeon, the obstetrical surgeon, but before I took the patient to the hospital, I gave a dose of *Arnica* though I had no hope that *Arnica* would help then; and when we came to the hospital and she was on the operating table, the surgeon only touched her stomach outside and the placenta was out.

In other cases, before, I have never had the slightest trouble because I always gave *Arnica* and in abortions—after the abortion always *Arnica*, and there is always something more to come, and it comes out easily and everything is safe and absolutely no lesion.

Arnica worked in this case. Undoubtedly she had such a soreness of the uterus. The uterus was contracted and kept contracted so the placenta couldn't come out. As soon

as *Arnica* was given, the soreness was gone and the placenta came out. I think this is important; that is why I got up to tell it.

Dr. Allan D. Sutherland (Brattleboro, Vermont): Mr. Chairman, I believe that to give *Arnica* in all cases verges on empiricism. There are many other remedies which are just as useful following delivery, especially for retained placenta. One of the greatest remedies in retained placenta is time. Even more than two hours. If the patient is in good shape, leave her alone and she will come along.

Another remedy in that condition which is extremely useful is *Pulsatilla* and another is *Sepia*. It depends on the symptoms of the patient and not on any preconceived ideas as to a remedy.

Dr. Bellokossy: I had a case of pregnancy nausea. I gave all kinds of remedies and they would not help. I gave *Sepia* as Dr. Sutherland says. It did not faze her at all. I studied more and found her similimum, and her similimum was *Veratrum viride*, and it worked wonderfully.

Dr. Hubbard: You mean the constitutional similimum or the remedy?

Dr. Bellokossy: The whole system. You have to study the whole system.

Chairman Smith: I think we are all willing to accept that. (Laughter) It has to fit the case or it won't do any good.

Dr. Neiswander (closing): I want to thank you for your discussion, and for what Dr. Wright Hubbard has said regarding the use of *Syphilinum*. I use it in cases where it is indicated that it is needed, and it is very effective. I also use the combination where I think it is indicated—combined *Tuberculinum* and *Syphilinum*. Probably a 50M or a CM potency. It depends on the case. I thank you again.

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