

(3) In this series of cases, the epileptic fits were associated and coincident with infection in the nasal sinuses and nose.

(4) Relief from epileptic fits was obtained in these 13 cases when the nasal sinus infection diminished or cleared.

(5) In the single case who showed no strong evidence of nasal sinus infection the fits were associated with gastric derangement. This derangement may have been in the nature of an "aura", or else evidence of catarrhal condition similar to nasal sinus infection in the other 13 cases.

(6) Finally, in these 14 cases described, I found that the absence or reduction in the number of epileptic fits coincided with improvement in the general health of the patients and also diminished severity of nasal sinus infection or complete absence of this infection.

—*The British Homoeopathic Journal*, March, 1946.

HOW CAN WE BEST PROMOTE HOMOEOPATHY IN THE UNITED STATES?

HOWARD M. ENGLE, M.D., SAN FRANCISCO, CALIF.

Dear Doctor Morgan :

Your kind invitation to write an open letter to the Congress of States is indeed appreciated. The subject you chose for me to write on, is a challenge

to all of us—"How can we best promote Homœopathy in the United States?"

If I were to be pedantically academic and pretended to be erudite, I could perhaps write page after page of suggestions on this matter. We all have read and heard numerous suggestions as to how we might promote Homœopathy. Many of these scholarly-written suggestions still remain suggestions. They have not advanced from that stage because of their impracticability.

I could also write a few pages telling you that we should have more homœopathic colleges. Perhaps I could even give an elaborate outline as to how this should be done. This might be a good suggestion. But can it be done now, or can it be achieved even in the near future under our present set-up?

This would be like making a resolution, though meritorious and just, that all officers of the American Institute of Homœopathy be paid salaries so that they may devote adequate time to the performances of their duties. It would be well and good to pass such a resolution. Our officers would deserve such recognition for their sacrifices. But can the Institute pay such salaries? Have we enough money to pay out for salaries for our sacrificing officers? We "must temper the wind to the shorn lamb."

So, we see that a resolution is one thing; carrying it out is another thing. A suggestion is one thing, to follow it or the ability to follow it, is another thing.

You and I know that, at present, at least, the excellent idea of establishing Homœopathic colleges,

though a rapid way to promote Homœopathy, cannot be achieved.

To promote Homœopathy, perhaps I should suggest, that all present Homœopathic graduates should prescribe nothing but Homœopathic remedies, reminding them of the merits of our remedies when properly selected. I might also suggest that all Homœopathic physicians openly admit to the public that they are Homœopaths. I might also suggest that, to our patients, we might imply that whatever good we do for them is due to the merits of well-selected Homœopathic remedies.

We all know that Homœopathy thrived in the past. We are conscious now that Homœopathy, not its principle, but its promotion needs to be "vitaminized." It can be "vitaminized" through the courage of those who chose to practise this form of medicine.

How can we promote Homœopathy in the United States, you ask?

Perhaps it would be better before facing this problem, if it is a problem, to ask ourselves, why has not Homœopathy progressed in the United States in keeping with its merits?

We Homœopaths, at least, are irrevocably convinced that our doctrine and its practice is equal to, if not superior to the practice of any current doctrinal medicine. Yet for over a hundred years of its tenure here in the United States, Homœopathy has not enjoyed the wide acclaim that it merits. Why?

Can it be that we do not talk enough about it?
Can it be that we are ashamed to mention Homœo-

pathy before colleagues of other schools? Can it be that when some of our patients, who unwittingly fell into our practice, finally discover that we are Homœopaths, we defensively and apologetically admit that we are, and hasten to correct the "impression" by saying, "Oh, I practise other kinds of medicine also"? Let us think back for a moment.

Perhaps when some of our patients observe "miraculous" help from our little pills, we fail to say: "that is Homœopathy".

If we are to promote or "sell" Homœopathy, we must watch for and exploit every opportunity which may present itself. We must educate the public. We must educate and tell the public about Homœopathy. We doctors, ourselves, by acts and words bring Homœopathy before the eyes of the public. In telling the public of our chosen doctrine, there should not be any tone of apology, there should be a tone of conviction in our argument—there should be a ring of our just pride.

We must constantly call to our patients' attention that it is Homœopathy that is helping them. Through our patients, thusly indoctrinated, they themselves, without promptings, will argue with their neighbours about the merits of Homœopathy. But, if we doctors ourselves are, somehow or other, ashamed that we have been trained as Homœopaths, then our patients can hardly be expected to give us support, in the promotion of our tenet.

We must bring, ever and anon, before those within the sphere of our influence, the doctrine of

Homœopathy. We must repeat the word to them—Homœopathy; Homœopathy. If we thus bring Homœopathy before the public's eyes we create a demand for Homœopathy. We promote Homœopathy.

Medical ethics precludes us from employing the usual medium of promotion—the newspapers and the radio. But there is no harm in talking about the merits of something of which we are thoroughly convinced. Furthermore, it is loyalty to our chosen profession to spread the knowledge of Homœopathy. That is the reason, and the sole reason, that we should talk about Homœopathy. It is our chosen doctrine of medicine, the practice of which we should be openly proud.

How often have we heard, and thus it was forcibly brought to the attention of the people of the United States and elsewhere, the oft-repeated letters—“L S/M F T, LS/ MFT—so fine, so firm, so fully packed, so free and easy on the draw.”

Although other cigarettes are reputedly as fine, admittedly as firm, and draw just as well, yet “LS/ MFT” is brought before the public's attention. The demand for it is undoubtedly created “LS/MFT”. is promoted! Those connected with this product never lose an opportunity to mention “LS/MFT”. They say it unashamed, unafraid and undaunted. In that program, they say “LS/MFT” with conviction and with pride. It is thus promoted.

So, Mr. President, to the subject—How can we best promote Homœopathy in the United States—let us, for the moment, forget all those high-brow schemes

of the past ; let us for the moment forget those outlines about promoting Homœopathy. Those outlines are still outlines through all these years.

Rather, let us talk of Homœopathy, with those with whom we, our selves, come in contact ; let us own up with pride that we are Homœopaths, no matter in whose company we find ourselves ; let us not be apologetic that we are Homœopaths ; let us all be self-appointed promoters of our own chosen doctrinal medicine—HOMŒOPATHY.

And above all, let us practise Homœopathy courageously, with dignity and wisdom ; practise Homœopathy in such a way that our doctrine suffers not by comparison.

—*Journal of the American Institute of Homœopathy, April, 1946.*

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