

ANGINA PECTORIS

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Aconitum 6, Actea rac. 30, Aurum 30, Cactus 6 & 30, Gelsemium 6 & 30, Ignatia 30 & 200, Kalmia 6, Lachesis 30 & 200, Lilium tig. 30, Naja 30, Spigelia 30, Tabacum 30.

The remedies for the Angina pectoris syndrome vary according to the dominant symptoms of the patient: constriction, painful radiation in the arm or a condition of anguish and anxiety.

A. FEELING OF CONSTRICTION

Cactus—The great characteristic of Cactus is the sensation of 'constriction' which may be observed not only in the region of the chest, but also in the region of the 'upper and lower limbs'. So Cactus may be a remedy not only for angina pectoris, but also for arteritis. The sensation of constriction is always accompanied by numbness with radiation in the left arm.

An objective symptom: oedema of the left hand. Whenever you find cardiac troubles which are accompanied by oedema of the left hand with a feeling of constriction and radiation in the left arm, you should immediately think of Cactus.

The pulse is rapid, tense and hard. At the time of an attack the patient has cold sweats, a great tendency to faint, sometimes he may even lose consciousness. The attack may terminate by an epistaxis, a real hæmorrhage of black blood in small clots. The cactus patient is always worse lying on the left side, and also much worse by movement; he cannot walk, for as soon as he does he suffers from this sensation that he calls a 'bar,' the feeling of constriction in his chest which suffocates him and necessitates immediate rest.

Accessory symptoms: pulsation in the region of the epigastrium, painful radiation with throbbing in the right ear.

Lilium tigrinum has the same symptoms as Cactus; the feeling of constriction, oppression, and of a bar in the chest; but while in Cactus the radiation points to the left, in Lilium it goes to the right side instead, to the upper right arm. The pulse is irregular and rapid, especially when the patient makes the least movement. The cactus patient cannot stand lying on the left side, while the lilium one is better lying on the left side, and worse lying on the right side. He is ameliorated in the fresh air and when he rubs the pre-cordial region. By this simple maneuver the painful sensation disappears. The patient has hot flashes and faints after the attacks, as well as during the daytime when he makes any movement. Women especially present the pains of Lilium tigrinum: the menses are in advance, not abundant, more

marked in the daytime. The patient suffers from heart symptoms especially during the menstrual periods.

A particular symptom: a sensation of pelvic weight as if all the organs would come out; the feeling is so disagreeable that she wears a tight bandage. Thus believing it lessens this troublesome sensation, especially at the time of the menses.

Lachesis is very much like Liliun. The patient has functional troubles which are very similar developing at the change of life. However it is not necessary that the patient be at the age of the menopause for Lachesis to be indicated. The sensation of constriction is not localized in the chest. It is around the neck, waist and abdomen. She cannot bear a tight corset, as she has the feeling of a cord pulled tightly around the abdomen, pressing especially on the liver. She has the feeling of a real pinching sensation around the heart as well as around the liver on the right side.

The attacks of angina pectoris of Lachesis occur especially during sleep. It is on awaking that the patient feels quite ill: sensation of oppression, of suffocation, to such a degree that she must get out of bed quickly, open the window to get fresh air to breathe; she believes that she will die and experiences terrible anxiety. Between the attacks, the patient complains of a very peculiar sensation: she has the feeling that the heart is not steady, an instability that she explains by an amusing expression: "My heart feels as if it were suspended by a thread." The lachesis patient presents not only a cardiac, but also a circulatory instability which is shown by waves of heat, throbbing of the arteries of the neck, the sensation of a liquid alternately hot, burning and cold, like ice in the arteries or the veins, faintness and a tendency to syncope. While the pulse is very rapid and tense in Cactus, irregular and rapid in Liliun tigrinum, it is always small and feeble in Lachesis. If the person is always aggravated by sleep—it is on awaking, in fact, that he feels worse—he is always ameliorated by a discharge of some kind, a spasmodic coryza, an epistaxis, monthly periods, or haemorrhoidal losses.

B. ANGUISH—TERRIBLE ANXIETY

Aconitum—In Aconite it is anguish which dominates the picture. One cannot say that the patient suffers from the heart, he experiences stitches and a vague sensation of pain always diffused. The pains of Aconite are not limited and they cannot be determined by the patient placing his finger on the painful part. They are accompanied by anguish, restlessness, and fear of death to such a degree that the subject hangs on desperately to his infirmity and those about him feel his suffering.

Three cases may be presented: a true angina pectoris when you will prescribe Aconitum 3. The older homoeopaths were wise when they generally gave it in trituration, having discovered that the remedy had a much better action given in this way. Or perhaps you are called to see a cardiac patient

after a fright, then give *Aconitum* 30. Again you may see a case which is purely psychic: give to this patient *Aconitum* 200., especially if you observe that he has agoraphobia (a nervous dread of open spaces), or claustrophobia (a morbid dread of confined places)—characteristic of the remedy. Psychic disturbances always dominate cardiac phenomena in *Aconite* and one should remember that anginal phenomena are generally developed after a fright or an emotion.

Aurum—In *Aurum* you will observe a different anxiety. The patient has fear of death, but it is especially fear of continued suffering, for he really suffers from his heart. While the *aconite* patient is especially full of anguish and anxiety, *aurum* suffers. He has visible beating of the heart reflected in the arteries and especially in the temporal arteries. He cannot rest lying down for he suffers more at night and it is at night especially that the attacks of precordial pain appear. He is always better sitting up and bent forward, like *Kali carb.*, but while the latter corresponds to an oppression of respiratory origin, *Aurum* corresponds always to a suffocation of cardiac origin. The patient has very violent palpitations which occur in a special way: the patient has the feeling that the heart stops beating, then suddenly he experiences violent beating in the chest. The beating is so violent that he experiences a sensation of faintness, as if he was dying. These attacks occur at night, they are accompanied by a fear of death and it is just for escaping this fear of death that the patient has an idea that takes possession of him: the desire to commit suicide.

It may be added that everytime you find the indication for *Aurum* in a patient, you will only be able to prevent a recurrence of the attacks by prescribing *Luesinum*.

Naja—*Naja* has the same tendency to suicide as *Aurum*, but *Naja* has also very acute pain localized in a limited region, in the aortic region; the patient experiences at the same time the sensation of imminent death with cold sweats. These troubles appear especially during sleep like *Lachesis*. The *naja* patient has a special characteristic: he always thinks of death. He not only dreams of death like *Lachesis* who assists at his own burial or with those persons who are near and dear, but during the day this idea pursues him. Two other symptoms: aortic cough, the patient cannot speak or make any effort without coughing (dilatation of the aorta); the tendency to haemorrhages. The monthly periods of *naja* patients are abundant, prolonged, the blood is black. Besides, you will observe a slight affection of the liver which is shown by a subicteric colour of the skin or conjunctivae. Lastly, *Naja* has oedema of the extremities, upper or lower.

These are the principal remedies that may be indicated and come to our mind when anguish dominates the person. If anguish exists only in *Aconite* with a diffuse pain, in *Aurum* it is accompanied by functional cardiac troubles particularly with a sensation of bounding in the chest and violent beating of the heart, in *Naja*, there is intense pain which is located especially

in the region of the aorta, and further, the patient often has a dilatation of the aorta.

C. PAINFUL RADIATION

Kalmia latifolia—The anginal attacks which occur under the form of oppression and constriction of the chest, are accompanied by numbness in the left arm in the *kalmia* patient, and other painful radiations may be present, in the back for example. They take the form of neuralgic pains, extremely rapid, nearly fulgurant (lightning-like), following the nervous tracts from the vertebral column to their termination. The patient experiences considerable oppression, a pulse which is very slow, feeble, irregular, sometimes scarcely perceptible, however what dominates the picture is the feeling of numbness in the left arm and palpitation always more marked lying on the left side and bending forward. You will often find evidence of a myocarditis or a valvular affection.

Spigelia—The heart is often irregular, the beating is perceptible not only to view since one can see the heart beating through the night clothes, but perceptible to hearing by the patient himself; when lying down, he hears his heart beating, he cannot lie on his left side, he must rest on his right side. He perceives synchronous beating with the cardiac movements in his fingers, ears, abdomen, epigastrium; at the same time he complains of an extremely sharp pain like the thrust of a dagger in the precordial region. The dominant characteristic of *Spigelia* is palpitation which is visible and audible, since it is heard and felt by the patient himself.

The patient selects a special position for relief: he is always obliged to lie out flat while the *Aurum* patient sits up bent forward, placing his elbows on his knees and holding his head with both hands, like the *kali carb.* patient. The *spigelia* patient prefers being extended lying on his right side with his head high always with two or three pillows. Note that the patient often has a left suborbital neuralgia, while *Kalmia* cases have a right suborbital neuralgia.

Tabacum—The abuse of tobacco is conducive to the development of angina pectoris, so it is not surprising that the remedy is found indicated in its treatment. The painful radiation can be felt in the arm: *Kalmia*; in the back: *Spigelia*. If it is produced in the chest, it is then a symptom of *Tabacum*. The pains are accompanied by faintness and nausea, a syncopal condition with cold extremities. The patient is always better in the open air. He is pale covered with cold sweat, with a feeling of faintness, and as soon as one unfastens his clothes and exposes him to the open air he is relieved. He cannot lie on his left side, but better lying on his right side. Remember the great modality that dominates all his symptoms is amelioration in the fresh air. *Tabacum* has always a nauseous condition which recalls that of *Cocculus*. Pains, nauseous condition and the syncopal state are always immediately relieved in the open air.

FALSE ANGINA PECTORIS

There are, lastly, attacks which are not true angina pectoris and never terminate in death, these are false angina pectoris attacks. The two principal remedies are: Ignatia and Actea racemosa.

The ignatia patient always experiences a feeling of thoracic constriction with constriction of the throat. The patient cannot bear a tight collar, and his throat seems contracted. The pharyngeal constriction appears after a great emotion, as grief, sorrow. The patient has intense suffocation but has no abnormality on the side of the heart, and his life is not in any danger, though he shows very alarming and dramatic symptoms. Do not forget the paradoxical appearance of the symptoms of Ignatia. A patient has suddenly a sensation of smothering or suffocation and says that he cannot walk, and five minutes later, if one proposes an amusement or some entertainment, he recovers immediately.

Gelsemium—This remedy suits persons extremely emotional who, from the least pleasure or slightest trouble, have a real functional cardiac condition. It seems to them that the heart will stop beating, the patient has a feeling that he will faint, he is obliged to get up and move about as if he wished to keep his heart going by moving about; as soon as his condition becomes normal, the sensation passes away as well as the pain. Palpitation after bad news with extreme feebleness of the limbs and trembling. The pulse is slow when quiet and increases in rate after movement. The patient is always obliged to move about to lessen his cardiac troubles.

Actea racemosa is especially indicated for women who are approaching the menopause. The heart does not show any modification; the pulse shows nothing abnormal, it is not even accelerated. The patient always complains of a pain under the left breast with radiation of the pain to the left arm and in the back of the left side. *These pains are due especially to a neuritis of the brachial plexus and are accompanied by pains in the muscles of the neck, with stiffness and spasmodic contractures.*

A particular symptom: the three first dorsal vertebrae are sensitive to touch and pressure is painful and may even provoke vomiting.

The actea racemosa troubles are always more marked during the menses, and the more abundant the menstruation the more violent are the pains (the opposite of Lachesis). Lachesis patients are relieved of pain as soon as the menstruation appears, and the more profuse the flow the more relieved they become.

[Dr. Vannier in a recent book *Les Remedies Homoeopathiques des Etats Aigus* states the following: *Tobacco has a very injurious action on the heart.* Experiments have been made by homoeopaths, notably by Gelsowsky, in 1908. He made intravenous injections with tobacco smoke in rabbits which caused aortic lesions with dilatation of the aorta and thick foci appeared on the walls of the aorta which formed distinct aortic plaques. He also made similar experiments by having certain animals inhale tobacco smoke. Not

only did he obtain the same results in the aorta, but a constant state of anorexia and considerable emaciation and changes in the nervous ganglionic centers of the heart.

These experiments were confirmed a year later by Boveri, who administered infusions of tobacco to rabbits].

To sum up, experimentally, tobacco causes cardiac vascular lesions; clinically: palpitation, vertigo, and syncopal states related to cardiac changes. You will see from these observations the possibility of the therapeutic indication of Tabacum for aortitis and angina pectoris. However, Tabacum is rarely indicated for very often aortitis follows tobacco poisoning.

—*Journal of the American Institute of Homoeopathy*, May 1947
