

## **A PROGRAM FOR THE USE OF HOMOEOPATHY WITH EMOTIONALLY DISTURBED**

GARRY A. WHITE, D.P.M., N.D., San Diego

Gentlemen:

My subject is: The Use of Homoeopathy in Psychiatry. But as homoeopaths I'm sure you know a great deal more about the use of the 'mentals' than I. However I hope that I can bring you a cohesive picture of what lies back of neurosis and psychosis as well as personality problems that you may be better able to use the knowledge you already have and also that you may be better able to counsel those patients, those inevitable patients, who rely on you for such counseling even though it is not your speciality.

Over the many years of my practice and hundreds of patients, I have become even more thoroughly convinced of that tenet of our practice: 'treat the whole person.' If this seems rather self-evident, (for how else would a psychoanalyst treat his patient?) I hasten to add that I am concerned not only about how my patients feel—what their emotional climate is—but what they eat, what drugs they take, their total physical condition, and their relations with family, friends, neighbors, fellow workers, and bosses.

Pretty much we are talking about the blood stream, what we put into it through the mouth, and what the emotional state forces the endocrines to put into; further of course we must never forget that subtle kettle we can throw so many unexplained things into which is labeled 'allergy.'

All of you have undoubtedly faced, from time to time, the jibes of your allopathic colleagues whose skepticism of Homoeopathy is largely based on their inability to understand how the minute doses can have any effect on the physiological functions. Ask them if they have ever seen a person react to an invisible pollen, ask them to measure the dose of pollen that brings so violent a reaction. But this bit of propaganda digresses. My point of course about the condition of the blood stream is that as it bathes and nourishes the brain, it cannot help but have a major influence on its functioning.

Of all the miracles of the human body the brain stands alone in its importance and complexity. Its potential is not remotely understood. It is estimated that the average person uses only 10% of his brain potential. What our capabilities might be if we were able to use even 25% is beyond our imagining.

For our purposes today let us divide the brain into four parts: the conscious mind and three subdivisions of the unconscious or, if you wish, the new brain and three subdivisions of the old. The first of these subdivisions of course is the autonomic nervous system, our life-support system. The second is comprised of those structures which provide us with our genetic behavioral patterns, both psychological and physiological—those patterns which differentiate us from all other species, and finally the subconscious. If we were to

think of the brain as a computer, which it is—an immeasurably complicated one—we have to conclude that the autonomic nervous system and the genetic behavioral patterns part of the brain were programmed before birth. But the subconscious would be represented as having completely blank tapes which are to be filled in by conscious experiences.

The subconscious portion of the unconscious mind is the memory bank. It is the repository of every thing that happens to us from the moment of birth, and without doubt for a considerable period before as well. No matter how unimportant the event it will make some impression on some neuron, no matter how slight. Much of what happens to us and is deposited in the memory bank sinks below what might be termed the recovery line and cannot be brought back to conscious remembrance without special aid, but, and this is a very big 'but,' the influence of the event is still there. You don't remember when you learned that it is wise to test the bath water before stepping in, but the influence of that knowledge remains with you and has now become its own neurological habit pattern. Exactly the same thing is true of our acquired physiological habit pattern. You do not remember when you learned to tie your shoe laces but your fingers remember and the neural pathway guides them to perform this rather intricate digital exercise as soon as stimulated by feeling the laces in your fingers. This brings us to the commonplace but rarely mentioned truth: that all skills are a matter of memory—that we never function in the present—let me repeat, we **never** function in the present. To understand this fact and the associated significance, it helps to ask ourselves, 'what is the present'? Is it one second? Or is it 100th of a second, or if that is possible, why not one millionth of a second? The life of certain nuclear particles is now measured in trillionths of seconds—is that the present? We can pursue this to ridiculous lengths. My point is that the present has no significance except as measured by consciousness. And no matter what is being recorded as if in the present, it takes a measurable length of time for the impulses to travel our nervous system from the point of stimulus to the brain and to be referred back to the point of origin. Therefore everything that we are conscious of has happened in the past, no matter how short a time. This is very fortunate for it means that whatever is happening can be judged and reacted to in terms of what the bio-computer has stored in prior experience. And so while this new experience is being stored in the subconscious memory bank a comparative action is going on which then is projected out of the memory bank into the conscious for us to take action upon, having had the benefit of previous similar experience, if any.

What is the significance of all this theory to the subject we are considering? Well, there are two areas we need to be conscious of and to guard against: the first is prior experiences which are no longer applicable, and the second is 'computer' error due to toxemia.

No one is the same person today that he was yesterday. The experiences he had yesterday have modified him and his reactions and his judgment, no

matter how slight. Let us consider how much we have changed in our ideas and judgments since we were little children. There has been dramatic change of course. But believe it or not, we are all acting to a greater or lesser extent on the basis of psychological habit patterns which were set up during the first six years of our life. It is axiomatic that our emotional 'life style' is set by the first six, or at the most, eight years. This life-style colors our actions and judgments for the rest of our life. Of course, we don't continue to act as a child, for even our life-style is modified by all of our maturing experiences. Nevertheless, if we are not compelled into childlike reactions, the tendency still colors our actions and dislikes, our goals and aspirations, and, most especially, the way we react to certain people. I am sure you know how many marital cases I have dealt with where the presenting problem was the cruel way the husband was treating his wife. And of course in many of these cases at least part of the problem was the man's need to get even with his mother, his wife was a convenient surrogate. But significantly, in all of these cases the man was completely unaware of the influence his life-style was having on his behavior and so on the failure of his marriage.

I am not here suggesting that you endeavor to treat patients whose subconscious habit patterns are responsible for aberrant behavior. This is touchy ground and takes much more time in investigating the past both consciously and subconsciously under hypnotism than you have time for. I emphasize it here that you may again be made aware of its importance and refer those patients to appropriate therapists.

It is the second of these guarded areas that is particularly applicable to homoeopathic general practitioners: toxemia. This term in my opinion is used in much too narrow a manner for I feel that anything that modifies the blood stream in a harmful manner creates toxemia. There are many things which are in general use that fall into this category. The outstanding one of course is cigarettes. Many consider that meat is a toxic substance. Then we have to take into consideration not only the things that are toxic to us generically but individually. Some food, some pollens, and other substances are toxic to some people and not to others. Some food items are severely toxic to some people, such as egg, milk, and wheat. I believe we must suspect many so-called 'innocent' substances in our search for the causes of resistant diseases. As an example, I recently eliminated all wheat from a patient's dietary. She was suffering from dangerous hypertension and was concurrently under the care of a general practice M.D. and was receiving the usual antihypertensive drugs, not homoeopathic. I suspected that gluten might be the villain. In four days her pressure dropped from 220/110 to 165/90.

Now if such a common food as wheat could have this effect on this woman, there is no reason to doubt that other substances, both toxic and nontoxic might be having a subtle but serious effect on other centers of the brain which control emotional responses. It has now been proved that many of the food additives cause hyperactivity in children. Many of these bio-chemi-

cal actions are not diagnosable by the use of the supposed offender in injection form for the toxic substance is manufactured by the body during its catabolism. For example, you will not get a toxic reaction by injecting intradermally alcohol into an alcoholic; but the aldehyde product of alcohol taken by mouth will certainly be toxic to him during its arrested catabolism.

Then of course the other most common cause of toxemia besides infection which I naturally assume would be your first intervention, is drugs. We are in an historical phase of the therapeutic arts in which the dominant practitioners have been convinced there is a pill for every symptom. Now while this is true of Homoeopathy, we know that many, many cases have been complicated by the reaction of the patient to medication given for primary symptoms, and the case is further snarled by the additional drugs given for the succeeding reactions to the previously administered drugs. Especially in the field of emotional diagnosis are drugs to be suspected. I have no suggestions for the detective work needed in such cases. Each patient must be treated according to his or her needs and susceptibilities, for abruptly terminating some drugs can of course be dangerous. The important objective is to get the patient off the toxic allopathic drugs and on to homoeopathic medications. But you may find that in removing the allopathic drugs some of the symptoms caused by the drugs will disappear.

What other procedures might be helpful in treating emotional problems? There are two and these are probably the most helpful of all for the general practitioner. They are those wonderful free and efficient, basic therapies: fasting and exercise.

Let us first say something about exercise. I don't really trust those patients who, when you suggest exercise tell you how much walking, or golf or tennis they play. It may be true that they occasionally do these things. But my experience has been that they honestly fool themselves as to how much and how often they get exercise. I suggest to all of them, regardless of what other exercise they get, a twenty minute program of jogging. Also regardless of what fine condition they may represent themselves to be in I start them all out the same way, and this applies to heart and hypertension cases as well. It is a graduated program designed to keep the patient from **never** experiencing any physical distress.

They start out jogging twenty-five double steps and then walking twenty-five double steps. They can do this as deliberately as they wish, but they do it for 20 minutes. The next day they increase the jogging to 30 double steps but keep the walking the same 25 double steps. And they progress this way always cutting back to the previous day's schedule if they experience any distress. This latter precaution not only makes good physical sense but also psychological. Enthusiasm wanes rapidly in terms of self-discipline when the discipline is unpleasant but rapidly becomes a constructive habit when the patient experiences consistent pleasant success. Gradually but usually quite rapidly our jogger lengthens the jogging to 50 then 75 then 100 and even more steps,

keeping the walking at 25. Finally in most cases he or she finds it possible to jog for 9 or 10 minutes, walk for a minute and jog back to the starting place. I have found nothing as efficient in the relief of depression as this regular and progressive system of exercise. I recommend it to all of you, not only for your patients but for you personally.

The second procedure for helping in the treatment of emotional problems is fasting. I am sure you know as much about this cure-all as I do. But for those who may not have used it either personally or with patients I offer a few pointers. First, fasting is not just for overweight people. Fasting is certainly the best way to take off weight. But it is also the best way to detoxify the body and the results of fasting with emotionally disturbed patients have been amazing. There seems to be a general feeling that only a few carefully selected cases are appropriate for fasting. This I believe is not so. The person who should not fast is rare indeed. However, I do recommend a preparation for the fast. For about 3 weeks the patient should begin to emphasize fresh fruits and vegetables and minimize the eating of meat. A week to ten days before the fast begins he should eat only one full meal a day and should drink juice during the day. The juice I recommend for this purpose is carrot, celery, and apple in proportions of 3, 2, 3 respectively. The fast should be monitored by you and should be gauged in respect to its length according to the patient's relative toxicity, the more toxic the shorter but more frequent the fast. A three day fast is probably the shortest for any therapeutic results and a three week fast usually is as long as is necessary for the average purpose. Once a patient has been on a fast it is usually not too difficult to persuade him to fast 24 hours once a week. To do this he simply skips lunch and breakfast, drinking juice instead. The only other suggestions are to have the faster take enough juice to avoid ketosis and I also recommend an enema once a day during fasting.

I'm sure you are wondering when we are going to get to the subject of this talk: The Use of Homoeopathy in Psychiatry. But we have been talking Homoeopathy in the general sense for it is the non-toxic approach to disease. What we have been doing is preparing for the introduction of homoeopathic remedies making sure other important aspects of the patient's needs were considered. So before we close with my suggestions regarding appropriate remedies let us make a short summary.

I am sure it is agreed that psychotic patients belong in the hands of specialists. But you do and will continue to have many patients whose symptoms have emotional overtones and whose problems may even have an emotional genesis. You may wish to refer some of these, especially those with paranoid overtones. But even those you refer, you may continue to see as their family physician and you will want to treat them in conjunction with the psychotherapist as efficiently as possible. Then there are many who you will not need to refer but whose emotional problems you will want to relieve.

You will first want to investigate the possibility of toxemia being the

presenting cause and you will begin your detective work to find the offending substances be they foods, drugs, or allergens, or chronic infections. You will not forget that most aberrant behavior has its roots in behavioral patterns set up in the past for what was then good reason. But these patterns have become anachronistic and are no longer either necessary nor applicable to the patient's present circumstances. If you have the time, you may want to let him talk, and guide him to unload those hidden feelings, the suppression of which is causing him so much physical and emotional difficulty. You will certainly want to get him on a regular exercise program and eventually you may get him to go on a fast.

In the meantime you will have been taking him off of allopathic drugs when safe and introduce the homoeopathic remedies. These remedies may be largely determined by the physical symptoms; but where there is a choice I urge you to consider those remedies which have proved efficacious for mental-emotional problems. I include with this paper a list of the more common problems and some selected remedies. I feel sure that with the foregoing suggestions and the use of the appropriate remedies, usually in the higher potencies, you will have more success with the average neurotic patient than you ever thought possible.

#### PROBLEMS:

(1) Brain Fag, (2) Dementia, (3) Senility, (4) Fright, (5) Fears loss of reason, (6) Fear of people, (7) Fear of being alone, (8) Hypochondria, (9) Hysteria, (10) Dual personality, (11) Paranoia, (12) Imagines being under super-human, control, (13) Mania, (14) Melancholia, (15) Inability to fix attention, (16) Anxiety, (17) Timid, bashful, (18) Hopeless despair, (19) Contempt for self, (20) Changeable, vacillatory, (21) Abulia, (22) Apprehensive depression, (23) Nervous, fidgety, (24) Restless, (25) Suicidal, (26) Talks in rhymes, repeats phrases, (27) Aimless, compulsive activity, (28) Lying, (29) Tendency to over-work, (30) Enuresis.

#### REMEDIES

Aconitum napellus 4, 5, 6, 13, 14, 16, 18, 20, 22, 23, 24	Arsenicum album 8, 14, 18, 22, 23, 24, 25
Aesculus hippocatanum 22	Asafoetida 9, 20
Aethusa cynapium 1, 15, 16, 29	Asarum europum 23
Agaricus muscarius-amanita 2, 26	Aurum iodatum 3
Agnus castus 14, 15, 16, 18, 19, 22	Aurum metallicum, 6, 16, 18, 22, 25
Alumina 20, 22	Aurum mur 8, 14, 19
Ambra grisea 9, 17, 20, 23	Baptisia 10
Anacardium 1, 2, 8, 10, 11, 12, 13, 14, 15, 18, 22, 23	Barosma crenata 3, 6, 17, 21
Antimonium crudum 25, 26	Belladonna 2, 13, 23, 30
Argentum nitricum 1, 5, 8, 23, 27	Benzoicum acidum 30
	Bismuthum 7, 16, 24

- Borax 23  
 Calcarea carbonica 1, 5, 8, 16  
 Calcarea phosphorica 1  
 Calcarea silicate 21  
 Camphora mono-bromata 23  
 Cannabis indica 10, 13  
 Cantharis 13  
 Causticum 30  
 Chamomilla 23, 24  
 Cimicifuga racemosa 5, 8, 9, 13, 14, 20, 22  
 Cinchona officinalis 22  
 Cocaina 11, 29  
 Cocculus 1, 9  
 Coffea cruda 23, 24  
 Conium 8, 14, 15, 22  
 Crocus sativa 9, 20  
 Crotalus cascavella 13  
 Cyclamen 14, 22  
 Digitalis 16  
 Equisetum 30  
 Eucalyptus globulus 29  
 Eupatorium aromaticum 9  
 Gelsemium 1, 4, 9, 23  
 Graphites 21, 22  
 Helonias 14, 22, 29  
 Hydrastis 22  
 Hyoscyamus 2, 7, 11, 13, 24  
 Hyoscyamus hydrobromide 23  
 Ignatia 8, 9, 14, 16, 17, 18, 20, 21, 22, 23, 24, 25  
 Indigo 22  
 Kali bromatum 24  
 Kali carbonicum 7, 16  
 Kali phosphoricum 1, 8, 9  
 Lacertus 29  
 Lachesis 11, 12, 13, 16, 26  
 Lilium tigrinum 2, 5, 14, 16, 22, 27  
 Lupulus humulus 30  
 Lycopodium 7, 8, 22  
 Mancinella 5  
 Morphinum 24, 28  
 Moschus 9, 20  
 Naja tripudians 25  
 Natrum muraticum 8, 9, 14  
 Natrum salicylicum 2  
 Nux moschata 15, 20  
 Nux vomica 8, 14, 15, 16, 22, 23, 25  
 Opium 4, 13  
 Phosphorus 1, 2, 3, 7, 9, 15, 16, 22, 23  
 Phosphoricum acidum 1, 2, 8, 14, 15, 18, 22  
 Physalis 30  
 Picricum acidum 2, 15  
 Platina 9, 13, 14, 16, 20, 22  
 Plumbum 22  
 Pulsatilla 9, 14, 16, 17, 18, 20, 21, 22  
 Pyrogenium 24  
 Rhus aromatica 30  
 Rhus toxicodendron 24  
 Sepia 14, 16, 18, 23  
 Solanum nigrum 13  
 Stannum 22  
 Staphysagria 6, 8, 17, 22  
 Stramonium 7, 10, 13, 23, 24, 26  
 Strychnia phosphorica 1  
 Sulfonal 8  
 Sulphur 30  
 Sumbul 9, 20, 23  
 Tarentula hispania 9, 24  
 Tuberculinum 22  
 Uranium nitricum 30  
 Valeriana 9, 20, 23  
 Veratrum album 2, 8, 13, 14, 16  
 Verbascum 30  
 Zincum 15  
 Zincum valerianum 9, 20  
 Zincum phosphoricum 1  
 Zincum picricum 1