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HOMŒOPATHY REASONED OUT

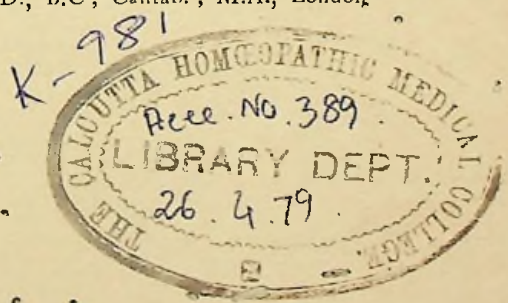
A survey of the very latest medical
and surgical methods of treatment
proving incontestably the value of
Homœopathy.

For medical men and laymen.

BY

T. MILLER NEATBY

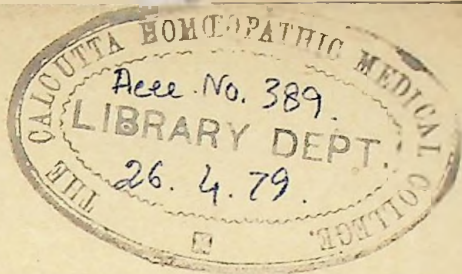
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HOMŒOPATHY REASONED OUT

If we are to consider to any profit what there is to be said for Homœopathy, it is necessary to have first of all a clear conception of what Homœopathy is. A great many more people talk of Homœopathy—or “the homœopathic,” as our out-patients and dispensary patients are so fond of calling it—than really understand it. The idea that *Homœopathy* signifies *home-treatment*, an idea based upon an erroneous etymology and confirmed by the undoubted fact that Homœopathy is the working basis of a good deal of domestic medicine, need not detain us.

A great many people think that Homœopathy is the administration of very minute or infinitesimal doses.

They are deeply imbued with the belief that the main difference between the systems of Allopathy and Homœopathy lies in the dose—the allopath gives large doses that you can taste, and that you can smell at a considerable distance if the wind is in the right quarter; whereas the homœopath gives small doses, often—perhaps usually—entirely without special taste or smell—doses that the average adult cannot believe in and the average child cannot object to. I shall have much to say before long of the small and the very small dose, but what I am concerned with just now is whether Homœopathy signifies the use of infinitesimals. Now the great law upon which Homœopathy is based says nothing about dosage. Thus, when I see an old-school practitioner

giving drop-doses of tincture of *Ipecac.* for vomiting, I say that he is practising Homœopathy, although drop-doses of a mother tincture are not at all infinitesimal.

But I meet a good many people who profess to believe in Homœopathy, whose chief idea appears to be that homœopaths do not use strong medicines as the allopaths do, but mild gentle medicines that could not say "Bo" to a goose. This idea is merely a variety of the last—the idea that the essence of the matter is in the dilution or size of the dose. But this is not so.

Some even think that Homœopathy consists in the use of a different set of remedies, and too often those who ought to know better speak of homœopathic medicines as if there were, or could be, such things. These people are sometimes astonished to learn that homœopaths use opium. "Oh, I thought opium was an allopathic medicine," they say. Or again, "I thought opium was a poison." The other day a man who came to consult me said, when I used the word "drug," "Oh, I didn't know you used drugs. I thought it was only allopaths who used drugs." Well, of course, a drug is a medicine and nothing else, and the idea that allopaths use drugs and homœopaths remedies is a pure fallacy. And the idea that there is some vital distinction between a poison and a medicine is another fallacy. Homœopathy is not the use of very small doses, or of weak medicines, or of non-poisonous substances, or of remedies as distinguished from drugs, or of medicines not used by allopaths.

Neither is it the use of so-called "specifics." There is not to each disease its own "specific" medicine. Take almost any disease you like. There are "nine and sixty ways" of treating that disease, and "every single one of them is right"—*in its place*. "In its place"—that is where the pith of the whole thing is. That is where the difficulty of writing a homœopathic prescription comes in, and that also is where the value of the prescription comes in when it is written.

And some people who profess a faith in Homœopathy are far too much on the "specific" lines. Fretfulness

in children is to be treated by *Chamomilla*; indigestion in a man by *Nux vomica*, in a woman by *Pulsatilla*: an adult with a cough must have *Bryonia*, and a child *Spongia*. Now, that sort of thing entirely ignores the true meaning of Homœopathy. I do not say that you will not often get good results by such prescriptions. You will, no doubt. But that is the mere prescribing of specifics for diseases. To prescribe homœopathically we must study the patient rather than his malady. Homœopathy does not cure diseases but diseased people.

Well, then, what after all is Homœopathy? Is it a science, or is it an art? It is both. Medicine as such is perhaps strictly an art, but it is founded (or should be founded) on science. Science knows, and art applies the knowledge. Homœopathic science says that similars are curable by similars. Homœopathic art treats sick people on the basis of that law. The great watchword and slogan of Homœopathy, invented by Hahnemann himself, is *Similia similibus curentur*, which means, and can only mean, "Let likes be treated by likes." That is the *art* of Homœopathy, the practical application of the ascertained science that likes are curable by likes. Dismiss from your minds for ever the baseless idea that Hahnemann's immortal formula can by any possibility be translated, "Likes may be treated, or may be cured, by likes," as if there were some doubt or contingency about it. Hahnemann was quite certain about his law.

Well now, what is this law? "Oh," someone says glibly, "the law of similars." What do you mean by the law of similars? "Oh, well, like cures like." Yes, and what precisely do you mean by that? "Oh, well, you take a hair of the dog that bit you." Some people think they have got down to the bed rock of the whole matter when they utter that formula, which is really a quotation from an old Greek writer of the fifth century before Christ, who himself uses it as an already current and well-known saying—"a hair of the dog that bit you." I used to say, "No, that is *isopathy*—you mean a hair of a *similar* dog." I am not sure that that is not a good instance of answering a fool according to his folly. Yet not altogether. I

think that in the old superstition that prescribed for a dog's bite a hair of the guilty dog (to be taken, I should hope, in half a wineglassful of water—nowadays it would be given in a cachet or a chocolate-coated tablet) there was a groping after the truth, a feeling after Homœopathy, if haply they might find it. The idea was certainly akin to that which underlies the vaccine treatment, which is so popular amongst the orthodox school, and which is admitted by its great pioneer to be really homœopathic. The antidote for the venom that came, or was supposed to come, from the dog is to be found in the dog himself.

But the phrase about the dog is obviously not couched in the language of scientific precision, even though it may contain enough truth to keep it alive. The law of "similars"—the scientific truth that underlies all homœopathic practice—is that, if a medicine, when administered to a healthy person, causes a certain set of symptoms, it will cure a sick person who presents similar symptoms; otherwise put, that medicines have the power of curing morbid or diseased conditions similar to those which they have the power to excite. It is not true that the *same amount* of medicine is able to cure a given condition in a diseased person as is able to cure a similar condition in a healthy person. This popular fallacy is well illustrated in the following quotation from H. G. Wells's *Tono-Bungay*—"I became an inordinate cigar smoker; it gave me moods of profound depression, but I treated these usually by the homœopathic method—by lighting another cigar." This procedure was certainly not homœopathic. In disease the body is more sensitive to the drug than in health, just as an inflamed eye cannot bear the light that a healthy eye can bear or an inflamed stomach the food that a healthy stomach can bear. The small or relatively small dose follows from the law inevitably. We may, then, deduce a small dose from the law, or we may find by practical experiment that small and perhaps progressively diminishing doses are giving better results than crude or material doses. But the law is one of similars—that the drug in action and the disease

in action produce similar effects, paint similar symptom-pictures. Thus I said a little while ago that, when I saw one of my old school friends giving drop doses of *Ipecacuanha* to check vomiting, he was (all unconsciously, no doubt) practising Homœopathy. For consider: if I were to take one of you, my well-dined audience, and give you a good jorum of *Vinum ipecac.* what would happen? I forbear to go into details. You all know that *Vinum ipecac.* in a good substantial dose is used as an emetic. that is, it *produces* vomiting. And drop-doses of tincture of *Ipecac.* are used to *check* vomiting. Very remarkable. I give it to you who are healthy and it produces vomiting. I give it in a much smaller dose to a sick man and it stops his vomiting. I remember when I was learning my *Materia Medica* at the feet of the orthodox Gamaliels, I was very much struck by this two-headed Janus of a remedy—a remedy that caused vomiting and that also checked vomiting. Again the old-school text-books tell us (and it is certainly quite true) that *Arsenic* is very valuable for certain chronic skin-diseases. Well, most of you remember how a good many years ago *Arsenic* got into the beer (so that the beer contained two poisons instead of one), with the result that it induced a chronic arsenic-poisoning in those who drank it. And you remember perhaps that one of the most marked features of that arsenical poisoning was a chronic skin-eruption? Now we see that strictly there are no such things as homœopathic medicines. "Homœopathic" is a relative term; it denotes a relation to a particular disease or rather to a particular set of disease-symptoms. A medicine is homœopathic if it is used homœopathically. Thus *Mercury* is homœopathic if it is used, say, to cure a man with dysentery, because *Mercury* administered to a man in health will cause symptoms resembling dysentery, whereas if it is used in the form of *Calomel* to remedy a man's constipation it is being used allopathically. *Arsenic* and *Mercury*, then, are homœopathic, if homœopathically used, even without the *-um* and *-us* at the end; for *arsenicum* and *mercurius* are only *Arsenic* and *Mercury* with their college caps on.

Well now, what are the advantages of this law of similars? The first advantage of all is that it is a law. A law is, in its own sphere, of universal application. A law is like a round of beef—it is cut and come again. A mere instance of cure—some empirical formula, such as “drop doses of *Ipecac.* are good for vomiting,” or “*Salicylates* are good for rheumatism,” lighted upon by accident, but unilluminated by law, is sterile, it “abides alone”—but a law of cure is fruitful. Thus, if a man understands *why* drop doses of *Ipecac.* are good for vomiting, he has got hold of a *law* that will help him to cure other things.

The law, then, is that, if you wish to cure a disease, you must select the remedy which, when given to a healthy man, will produce a similar disease. But how, more particularly, is this law to be applied? What is a disease? A disease is a collection of symptoms, that is, all the manifestations, outward and inward, of which we can take any cognizance. We sometimes call this a symptom-complex. Very well, then; if you wish to cure a disease presenting a certain collection of symptoms or symptom-complex, you must select a remedy which has the power of producing a similar symptom-complex in a healthy person. Now homœopaths have a large assortment of remedies with whose effects upon the healthy (thanks largely to Hahnemann and his helpers) they are thoroughly familiar,—in other words, a good *materia medica*, from which to select. The principle of selection, then, is clear. The symptom-complex of the disease to be treated is on one side; the symptom-complexes producible on the healthy are on the other side. Fit the remedy to the disease. Let me here anticipate a possible objection. When I talk of similarity, I do not mean an absolute similarity—such could probably never be obtained—but a general similarity. But the closer the resemblance, the better the chance of cure. There are several books on Homœopathic *Materia Medica*, which can be obtained from the Homœopathic Publishing Company (12a, Warwick Lane, E.C.). More generally useful for the laity who wish to know how to treat slight ailments in their

own families, and more particularly for those—and there are many—who live out of convenient reach of a homœopathic physician, is a book like the well-known Ruddock's *Vade Mecum*, which to a description of the general features of the various diseases adds a list of the remedies most often found useful, with the distinguishing characteristics upon which their selection must depend. Although so many remedies figure in homœopathic materia medicas and, indeed, are used from time to time by homœopathic physicians, the drugs that are in everyday use are probably less than forty in number, and from this number those who have no time to go deeply into the problems of materia medica will be able to treat quite nineteen out of twenty of those cases of simple indisposition for which few but the wealthiest or fussiest ever consult a doctor. A great deal of useful and efficient home-treatment in these simple maladies is based upon a *Vade Mecum* and a little chest of the more common and important remedies. ✓

It has been objected that Homœopathy is an upstart, and some even allege that it is disfigured by the objectionable characteristics of the *parvenu*. A therapeutic law is a law of Nature, and would it have been left for someone at the beginning of the nineteenth century to discover so tremendous a law? Well, there were undoubtedly from the time of Hippocrates, the "father of medicine," downwards, fleeting glimpses and vague foreshadowings of the great law. Hahnemann himself said of the truth of Homœopathy that "it was to be expected that, though it was never acknowledged for thousands of years, yet traces of it should be found in all ages." But it was re-discovered by Hahnemann entirely *de novo*; for whatever homœopathic ideas may have lurked in the medical traditions of the ages were as effectually buried under cartloads of ridiculous and often disgusting rubbish as seeds of corn, thousands of years old, have been hidden from the light in the swathings of Egyptian mummies, to revive and germinate in these latter days. Not only did Hahnemann re-discover the law, but by patient and prolonged experiment he placed it upon a secure basis.

The eagerness with which many of our old school brethren, who have been sincere if somewhat prejudiced and misguided seekers after truth, hailed the vaccine-treatment of diseases is easily understood and at the same time a little pathetic. At last they had found a law of cure, a law that appeared to be applicable to all microbic diseases. They had never had a law before—no wonder they were enthusiastic. True, the law was substantial Homœopathy, as I shall show later—a Homœopathy restricted to a certain large but limited class of diseases. But what I want you here especially to note is that this enthusiasm of the old school, an enthusiasm which they have never shown for anything else, is an enthusiasm for *law*. We see law everywhere in nature. We live under a "reign of law." To me at least it is inconceivable that, while there is what the apostle calls a "law of sin and death"—I use theological terms, but we all admit the existence of a law of disease and decay—it is, I say, inconceivable to me that there should not also be, if we will only seek for it, a law of healing and repair.

How different a law of cure is from the idea of specific remedies! And how superior a law of cure is! And how piercing the insight that discovered the law under the so-called "specific"! For that was what actually happened. One of the few specifics that the old school has ever claimed to possess is *Quinine*. *Quinine* is a specific for malaria, they said long ago. They said it in Hahnemann's day. But they did not know why it acted favourably on malarial patients. It is well-known that Hahnemann was translating Cullen's *Materia Medica* when, being struck by the unsatisfactory character of Cullen's explanation of the cure of ague by *Cinchona bark*, he suddenly conceived the idea of testing the effect of the bark upon a healthy individual. He accordingly took twice a day for several days a four-drachm dose of *Cinchona*, and was struck to find that he reproduced in himself an astonishingly accurate picture of the symptoms of malaria. By an elaborate series of experiments upon himself and other healthy persons with various other drugs, he showed that the case of *Quinine* was no "erratic

block" in the world of therapeutics, but was merely one illustration of a great far-reaching law.

One great advantage of this law is that a homœopath, when confronted by some disease or form of illness which has not been described, or which for some reason or other he is not able accurately to diagnose, need never say, "I am unable to prescribe a medicine for this disease; I do not know what it is." The homœopathic physician should always do his very best to get to the bottom, the pathologic and pathogenetic bottom, of every case of disease that he treats. The pathology of a case will often immensely assist him; it may even be essential to correct treatment. Therefore, he must by no means neglect the resources of careful methods of physical examination and the resources of pathological and bacteriological laboratories. I will give you an instance. A man was suffering from sciatica. Several remedies in succession were given on the basis of the symptoms complained of, without any result. Then another physician came along, examined the rectum, found a large accumulation of constipated motions and ordered some copious rectal injections. The bowel was emptied and the sciatica was cured. The sciatica in this case was not a disease, but simply a mechanical result of accumulated feces pressing on the sciatic nerve. But sometimes even with the conscientious use of every ancillary method that is at our disposal we are not able to diagnose the condition. Nevertheless we may be able to cure it. Such a case is analogous to the situation in which Hahnemann found himself in reference to cholera when that disease was raging in the East, and was approaching Europe. Hearing by report what the symptoms of this strange epidemic were, he predicted the success of *Camphor* in its treatment, a prediction that was abundantly fulfilled. The success of Homœopathy in its application to cholera is worth recalling at this juncture. During the last epidemic of cholera in London, that is, in 1853, a medical committee of the Board of Health was appointed in connection with the epidemic, and also a medical inspector of those hospitals that received cases of cholera. The statistics

of the results of treatment were so extraordinarily favourable to Homœopathy that they were at first suppressed by the medical board, but the government of the day required that they should be made public. They showed that under homœopathic treatment more than two-thirds of the victims of cholera recovered, whereas in allopathic hospitals more than two-thirds died. The medical inspector himself, Dr. McCloughlin, who was not himself "either by education, by practice, or by principle a homœopathist," said of the cases treated in the homœopathic hospitals, "All I saw were true cases of Asiatic cholera, in the various stages of the disease, and I saw several cases that did well under the homœopathic treatment which, I have no hesitation in saying, would have sunk under the other." He added, "Were it the will of Providence to afflict me with cholera, and to deprive me of the power of prescribing for myself, I would rather be in the hands of a homœopathic than an allopathic adviser." The case of cholera shows that Homœopathy was prepared for the treatment of an unfamiliar disease.

I do not want anyone to suppose for a moment that I under-value the importance of thorough and accurate diagnosis. Homœopaths have from time to time erred in this respect. Their well-grounded confidence in the great homœopathic law and their eagerness to apply it have sometimes led them to a fatal disregard of diagnosis, and to a prolonged inmedical treatment of cases that required surgical interference. The great homœopathic law is probably the only *law* of curative drug-action known to men (I lay emphasis on the word *law*), but it is not the only principle of treatment. Thus we may upon occasion require to summon the surgeon's aid, as for instance to treat a fracture, to remove a stone from a bladder or kidney, to open an abscess, or to excise a tumour.

Now this brings me to the consideration of another of the advantages of treatment according to the law of similars. Why do a great many people come to our Homœopathic Hospital? A great many come in order to escape opération. They think that Homœopathy

supersedes the dreaded knife. Well now, this is partly true and partly untrue. A good many operations undertaken at the present day are not necessary if a man has an understanding grasp of homœopathic principles. Now that may come about in two ways. Thus, a child with enlarged tonsils may come to a non-homœopathic doctor, and he may say, "Oh, these must come out; there is nothing else for it." That means that he does not know of anything else. But very often by means of remedies homœopathically used these tonsils may be so much reduced in size that there is no longer any question of removing them. It is the same oftentimes with enlarged lymphatic glands in the neck or elsewhere. Another way in which Homœopathy may preclude operation is this. Take nasal polypi for instance. It may be desirable to remove such polypi if they are of any size and are obstructing the free passage of air through the nose. But the question arises, ought these polypi ever to have come? They are the result of a chronic nasal or naso-pharyngeal catarrh. If the catarrh were systematically treated from the outset according to our principles, it would, I am convinced, never reach the stage in which polypi are formed. Much the same is true of adenoidal growths. They ought never to come. I may interject here, as a "tip" of some practical value, that there are, briefly, three ways of preventing adenoids and the nasal catarrh and ill-shaped jaws that so often accompany adenoids:—correcting the earliest tendency to breathe through the mouth and insisting on regular nose-breathing; supplying the child from the beginning of dentition with some hard food, such as a crust or an apple, to gnaw at, and at a later stage drastically restricting soft and pappy food; and lastly, supplying the child with a due measure of those accessory food factors called "vitamins," and especially that vitamin which is found in almost any animal fat, such as (real) butter, dripping, and cod liver oil. I may say here that the true homœopath is never so absorbed in the search for the "similar" remedy as to neglect the more humdrum but most important details of diet and general hygiene. Indeed,

the early triumphs of homœopaths were often attributed by the orthodox to their sedulous attention to such details.

But though a correct hygiene will prevent "tonsils and adenoids" and homœopathic treatment will probably often effectually reduce them in an early stage, nevertheless I feel sure that it is possible to allow a child with "tonsils and adenoids" to go on too long without operation. If the tonsils do not diminish in size under treatment and the patient still suffers a degree of nasal obstruction that makes proper nose-breathing difficult or impossible, it is wise to excise them by the time he is seven years old, remembering the dangers of a deafness that may be permanent (and will certainly be a handicap to a child at school) and of a retardation of mental and physical development due to protracted mouth-breathing. Some have urged that as Nature must have put the tonsils there for a definite purpose, it is unwise to remove them. This argument is sound only for healthy tonsils, which are doing the work that Nature intended them to do. Unhealthy tonsils not only fail to serve this purpose, but play the mischievous rôle of breeding grounds for harmful germs.

On the subject of tonsils I speak feelingly. As a boy I suffered very much from greatly enlarged tonsils—doubtless also from adenoids, but not much was known about adenoids in those days. Well, whenever I caught cold, which was fairly frequently, these enlarged tonsils became severely inflamed and swallowing became acutely painful. Now I was placed under the care of a very enthusiastic homœopath, who had a profound faith in Homœopathy and a heart-hatred for operation. I was under him for many years. Now my case, I consider, admirably illustrated the strong points of Homœopathy, and also the weak points, I will not say of Homœopathy as a system, but of Homœopathy as some have practised it. On the one hand I was immensely benefited in my general health. From being a rather delicate child I became robust, I regained to a considerable extent the power of nose-breathing, I completely lost the deafness

from which I had been a chronic sufferer, and the earaches to which I had been a martyr. On the other hand the tonsils still remained very large, and they seemed to catch every mischievous microbe that was about. If they had killed him when they caught him, I should not have minded. Perhaps I ought to say that the microbes caught the tonsils. Any way, I continued to be subject to recurring attacks of follicular tonsillitis. I was of age before I decided—upon my own initiative—to go to a relative near by, who wielded a dexterous guillotine, and have those tonsils out. Well, I had them out and I never regretted it. But I am sure that it would have been very much better for me if I had had them removed many years earlier. The fact was that they had become so chronically inflamed and fibrotically enlarged that they were practically as much “foreign bodies” as a stone in each kidney would have been. Now Homœopathy does not profess to remove foreign bodies; it declares—Hahnemann declared—that foreign bodies must be removed by surgery.

Now while I am on this subject of surgery, I wish to say a word about tumours properly so-called. Some tumours are benign or innocent, and if not growing rapidly may be safely left to the slow working of remedies homœopathically chosen, and indeed often yield to them or remain as they are without increasing in size. But even benign growths as they are called may by pressing on important organs cause serious symptoms. It is a little difficult to give advice sufficiently guarded on every side. The best that I can think of is this. Never allow a tumour, whether called innocent or malignant (it is not always easy to distinguish them), in the abdomen or in the breast, to be treated on the law of similars without getting a second, and perhaps a third opinion. We have happily surgeons and gynæcologists amongst us who are fully conversant with the benefits and powers of Homœopathy and are not likely to recommend unnecessary operations. I am quite convinced that many women who die of cancer of the breast might have been saved by early operation. I do not deny that remedies

homœopathically chosen may at times have a remarkable effect on cancer. It is also true that some cancers left to themselves, without any treatment at all, have mysteriously disappeared. But it is perilous to trust either to unaided nature or to our present knowledge about the influence of drugs on cancer.

There is another abdominal condition concerning which I ought at this point to interject a word of warning, and that is appendicitis. Having seen appendicitis over a number of years both from the medical and the surgical angles, and I may add the pathological angle, at the London Homœopathic Hospital, I have come to the deliberate conclusion, shared by my colleagues at that institution, that our allopathic brethren are right when they say that no case of appendicitis is safe until it has been operated upon.

I have spoken of Homœopathy preventing disease from getting into a stage in which operation might be required. Homœopathy, I think, often has an *aborting* effect, that is, aborts or cuts short disease in an early stage. This is very remarkably seen in erysipelas and scarlet fever. The remedy which provides the most perfect *simile* for the majority of cases of erysipelas and scarlatina is *Belladonna*. Long ago Liston, one of the most famous surgeons of the day, who was not himself a homœopath, was induced by Dr. Quin, the founder of our Hospital, to try *Belladonna* for erysipelas in the wards of University College Hospital. Liston was struck with the vast superiority of the treatment of erysipelas by *Belladonna* over all the methods of the old school. He stated in *The Lancet* in 1836 that *Belladonna* seemed almost to act like magic. I remember seeing a housemaid in Ipswich some years ago, who had a typical facial erysipelas with a temperature of 103. I gave her *Belladonna* at once, and the result was truly wonderful. She was much better the next day, and in a few days' time the erysipelas had entirely disappeared. Certainly I never saw anything of the sort under old-school treatment. The gentleman in whose house this patient was serving was himself a very enthusiastic believer in

Homœopathy, but even he was surprised at the rapidity of the cure. The disease was in fact aborted. What a picture of *Belladonna* is a typical scarlatina attack, with its scarlet rash, its dry mouth, thirst, fever, hot skin, and inflamed throat! A homœopathic practitioner told me, some years ago when I first began to practise Homœopathy, that homœopaths hardly ever saw a really severe case of scarlet fever if they saw the patient from the outset. Many a case that has already become severe has been saved by Homœopathy, but my point is that if seen and treated homœopathically from the outset the disease never or seldom gets into those serious anginose and malignant conditions that constitute the chief danger of scarlet fever.

In this connection, I may relate the following anecdote for the truth of which I can vouch. A gentleman being taken ill with some disturbance of the liver sent for the doctor, one of the old school. The doctor came and saw him and said, "Well, Mr. X., you will be in bed for three weeks, and I am afraid you will have to be worse before you are better." The doctor came each day, and at the end of *one* week Mr. X. was so well that he went back to business, having entirely escaped the "negative phase" that his doctor had promised him. The doctor was astonished at the rapidity of the cure, and not unnaturally claimed the credit for his physic. His patient, however took him aside, opened the door of a cupboard, and showed him a goodly array of bottles. "These are your bottles of physic, doctor. I haven't touched any of it." The gentleman, a believer in Homœopathy and the possessor of a little chest of remedies, had treated himself according to his symptoms, and had got well quickly, safely and pleasantly.

It is something to be able to get well pleasantly. Sixty odd years ago my father delivered a public lecture in the Myddelton Hall, Islington, on the "Social Importance of Homœopathy." On reading that lecture afresh, I have been struck with one advantage that he had over me and one advantage that I have over him. He was able to make a great appeal to his audience on the ground of the

pleasantness and simplicity of the new system as compared with the old. It was then a day of bleeding and of salivating, a day of drastic and of nauseous remedies, a day of exorcising disease by draining the patient of his vitality, a day of pouring a whole chemist's shop *holus bolus* into long-suffering, much-enduring stomachs. Homœopathy came at an opportune time—what a journalist, I suppose, would call a psychological moment—and scored tremendously in consequence. The great Lord Brougham, who suffered with the gout, once received some samples of wine from a firm of wine-merchants who said the wine was good for gout. Lord Brougham replied tersely that he had tried the wine and preferred the gout. Now, to have medicine that was not worse than the disease (for that small blessing at least Homœopathy offered) was a great thing. To have medicine that was pleasant to take, or at least not unpleasant, was no small boon. To have medicine the taking of which was not followed by unpleasant effects was a very great thing. The days of nauseous medicine and unblushing poly-pharmacy were not past when my father lectured in Islington. The light was beginning to shine and the clouds were beginning to break, it is true, but when he dwelt upon this contrast of unpleasant and pleasant physicking he touched a responsive chord. What can I say now? Well, the contrast is far less marked. *Our* medicines are what they were then—pleasant to take, often quite without taste, readily taken by children. Old-school practice, on the other hand, is far pleasanter and less drastic and less debilitating than of old. Indeed their pharmacy is often quite æsthetic, with its sugar-coated pills and its chocolate-coated tablets and castor-oil that is flavoured to taste of something else, and cachets that are swallowed entire and taste of nothing; and as for licentious bleeding, and unbridled salivation, these things have practically disappeared. Even now, though, in out-patient and cheap-class practice the pleasantly-disguised medicines are too expensive to use and patients have to swallow many unpleasant things. Only two days ago a child was brought to me whose stomach was

in so irritable a condition that it could not take the nasty stuff that had been prescribed for it at a well-known children's hospital. I say, in spite of all this, the change that has come over old-school treatment is enormous; it has become civilised. Now, what from one point of view is my disadvantage is in another respect my advantage. I cannot say in respect of pleasantness and unpleasantness—at least I cannot say with the emphasis with which it was said of old, by my father for instance—“See how much better we are than they!” On the other hand I *can* say, “See how much better we have made them!” The early results of Homœopathy were so evidently superior (and vastly superior) to those of ~~non-homœopathic~~ treatment, as e.g., in pneumonia and cholera, that they could not be gainsaid. What was the result? The old school began to set their house in order. They could not believe that the small doses used by homœopaths could possibly produce any effect. The merits of Homœopathy must, therefore, be that she “gave Nature a chance.” They themselves had placed obstacles in the way of Nature and so had courted disaster. Allow the *vis medicatrix Naturæ* to operate as homœopaths do, and the majority of patients will get well quickly, easily, and without injurious sequels. Do not bleed, do not salivate, do not give a lot of drugs, but just stand by and let Nature cure. That has been the attitude in the main of the orthodox professors for quite a long time—sceptical about drugs and unwilling to stand in Nature's light. Well, that has been an enormous gain to the old school and an enormous gain to society. Sir Lauder Brunton, sceptical about the homœopathic law, admitted, not grudgingly, that this is the debt of the profession to Homœopathy. Oliver Wendell Holmes admitted it also, but grudgingly. Speaking of the general practitioners who lived by selling pills and mixtures, and of their drug-consuming customers, the Professor at the Breakfast Table says they “had to recognise that people could get well unpoisoned.” He adds, rather acidly, “These dumb cattle would not learn it of themselves, and so the murrain of Homœopathy fell on them.” Well,

if the murrain of Homœopathy, merely taught the old-school and their charges not to poison themselves, it was not a bad sort of murrain after all! But the shrewd mother-wit of the Professor at the Breakfast Table was sometimes at fault. He prophesied, a long time back now, that in forty years time Homœopathy would be dead in America. As he lived to a good old age, the Professor and Autocrat lived long enough to realise that prophesying is risky work, and long enough to see thousands of qualified medical men spreading the murrain, and hundreds of thousands of the laity receiving the murrain with open arms, and colleges devoted to the dissemination of the murrain dotted all over the United States! Professors and Autocrats in all ages have ~~said~~ to truth, "Hitherto shalt thou come, and no further." But the waves of truth have an inconvenient way of advancing, in spite of professorial decrees, and even of undermining professorial chairs! What would Wendell Holmes have thought if he could have foreseen the pundits of our profession hot on the scent of vaccines, homœopathic in all but name?

But this is a digression. My contention is that Allopathy has been civilised by Homœopathy—I might almost say civilised in spite of herself. It is one of the signal triumphs of Christianity that she has succeeded in imposing her exalted ethics—as a standard if not always as a habitual practice—upon great masses of men who do not appear to have absorbed her transcendental faith, who perhaps reject her supernatural claims; in other words, that she has civilised even where she has not Christianised. In like manner we homœopaths may say that we have civilised our allopathic friends even when we have not succeeded in bringing them within the covenant of homœopathic grace.

But, it may be urged, Wendell Holmes and Lauder Brunton are fairly ancient history now. How does Homœopathy stand to-day? Have the great advances of the last twenty or thirty years in medical discovery left Homœopathy high and dry on some "raised beach" or "river-terrace" from which the tide of knowledge and

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enlightenment has for ever receded? Far, from it. Medical discovery confirms Hahnemann all along the line. The proof of this statement reads almost like a romance.

To begin with, in the early part of this century the allopaths themselves re-discovered Homœopathy; only they called it vaccine-therapy and mostly (though not exclusively) administered their "vaccines" by injection or inoculation. It is a minor point *how* you administer your remedy; the important thing is how you select your remedy and what relation that remedy bears to the disease you want to treat. Well now, what is a "vaccine"? It is so-called, not because it has anything to do with a cow (*vacca*), but because it recalls the ancient practice of vaccination, which was, if not a homœo-pathic, a homœo-prophylactic, inoculation of lymph from a calf suffering from cow-pox or varioloid, intended to protect from small-pox or variola. (It is rather odd, by the way, that allopaths, greater sticklers for vaccination than many homœopaths are, should not have perceived the homœopathic nature of the proceeding. For whether cow-pox is a distinct disease or only a modified form of small-pox it may fairly be called a "similar.") But what is a vaccine "within the meaning of the act"? It is the virus or poison of a disease isolated and then modified (so that it is no longer quite the same thing but only a similar) by a series of complicated processes in a bacteriological laboratory and afterwards applied to the treatment of that same disease. What then is vaccine-therapy but substantial Homœopathy? Indeed, in the early days of this therapy travellers for the large pharmaceutical firms found in what I may call the outlying districts, somewhat removed from the heart of things medical, a good deal of instinctive antagonism to these preparations. "But this is Homœopathy," exclaimed these doctors in tones of remonstrance, and the travellers in vaccines had to explain that it was the very newest thing and emanated from that fountain of orthodoxy, St. Mary's Hospital. And yet Sir Almroth Wright, the high priest of St. Mary's laboratory, has admitted that vaccines are homœopathic.

Von Behring, one of the most distinguished of European physicians and the discoverer of the famous diphtheria antitoxin, said of a vaccine, "By what technical term could we more appropriately speak of this influence excited by a similar virus than by Hahnemann's word 'Homœopathy'?" Of a tuberculin, that is, a tuberculous vaccine made from the tubercle bacillus for the cure of tuberculous conditions, von Behring said that its therapeutical usefulness "must be traced in origin to a principle which cannot be better characterised than by Hahnemann's word, 'Homœopathic.'" In 1906, Dr. Cabot, an orthodox teacher in an orthodox university, read a paper (New England Medical Gazette, December, 1906) in which he said, "The use of *tuberculin* is a form of vaccination which illustrates better than any example known to me the approval of homœopathic principles in our School. . . . The poison of tuberculosis which can produce some of the symptoms of tuberculosis is here applied in small doses for the cure of tuberculosis through the production of immunity or resisting power in the tissues. Surely this is a case of *Similia Similibus Curentur*, as homœopathic writers have pointed out. The use of bacterial vaccines in infectious diseases recently produced by A. E. Wright [now Sir Almroth Wright] is distinctly homœopathic."

Now is Homœopathy up to date? The answer is plainly that Homœopathy is "before date," a hundred years before date. But Homœopathy has not only anticipated by a hundred years the general principle, but by a good many years has anticipated the idea of taking the virus of a microbic disease (called a "nosode") and applying it to the cure of that disease. Compton Burnett, a very well-known homœopath, was using his nosode, made from tuberculous sputum, away back in the 'seventies, years before the German Koch discovered the tubercle bacillus. Now when at last the allopaths began to practise Homœopathy and were not only giving a single medicine but giving a medicine plainly homœopathic to the disease that they were treating, another wonderful thing happened. They found themselves "up

against" the small dose. Lower and lower they reduced the dose of their vaccines till we find Sir Almroth Wright recommending a dose of one ten thousandth of a milligram, equivalent to our seventh decimal dilution (7x). Prof. Denys, of Belgium, recommended doses of his own tuberculin of one millionth of a milligram, the ninth decimal dilution (9x). To deride the tiny or infinitesimal dose is now to proclaim oneself worthy of derision.

In connection with this vaccine-therapy it is interesting to note that Sir Almroth Wright devised a method of estimating the power of the vaccine in any given dose. Long ago, as is well-known, great interest was excited in the lay and popular press by the discovery of the Russian physiologist, Metchnikoff, that certain of the white corpuscles of the blood, being of an active and aggressive nature, pounce upon invading microbes and eat them and are hence called *phagocytes* (Greek "*phagein*," to eat). Now Sir A. E. Wright discovered that the natural resistance of the human blood to disease was not quite such a simple thing as Metchnikoff's account seemed to suggest. He discovered in the blood certain substances to which the name *opsonins* was given—substances in the absence of which the phagocytic white corpuscles will not swallow the invading germ; substances which have been likened to a sauce which must be sprinkled upon the microbe to render it palatable to this epicurean white corpuscle. Hence, in the war against disease opsonins quickly took front rank, and a man's resisting capacity came to be estimated by the amount of opsonin in his blood. This resisting capacity was called his "opsonic index," and in the early days of vaccine-therapy, at any rate in tuberculin vaccine-therapy, it soon became customary to estimate the efficiency and the required dose of the vaccine by the opsonic index. The aim was always to raise the opsonic index, and the vaccine treatment was held to justify itself if it raised the patient's opsonic index. Now the essential Homœopathy of vaccine-therapy had struck the leaders of our school so strongly that it occurred to them both here and in America to test some of those drugs

which the homœopath has found by experience to be especially useful in certain bacterial diseases, in order to see whether these remedies raised the patient's opsonic resistance to the bacteria causing those diseases.* Only a few drugs were tried—*phosphorus* as an anti-tubercular remedy, *veratrum viride* as an anti-pneumonia remedy, and *hepar sulphuris* and *ecchinacea* as anti-suppurative remedies. In all these cases it was found that the opsonic index of the blood was raised. That is to say, drugs chosen and used for a long time past on strictly homœopathic grounds as more or less specific to the ravages of certain disease-germs were found to answer to the highest test of efficiency then known to the medical world—they raised the opsonic index. This showed that amongst his other incomparable titles to the respect and admiration of mankind Hahnemann had anticipated by a hundred years that sound doctrine of cure now extensively prevailing amongst all medical creeds, according to which medicines act not in any direct surgical or antiseptic way upon the germs of disease, but only indirectly by reinforcing and stimulating the defensive elements of the body-fluids—tersely put, that medicines cure the body only by helping the body to cure itself. Antiseptic drugs strong enough to kill the germ directly are strong enough also to injure seriously the body tissues; and the killing of the germ is a very poor compensation for the killing of the patient.

The history in this connection of the well-known anti-syphilitic drug, Ehrlich's 606, is very interesting. It is illustrative in many ways of old school methods. In the first place 606 contains as its principal element *arsenic*, which is undoubtedly homœopathic to many severe cases of syphilis. Having unconsciously got hold of a "similar" remedy, they mix it with other things and make a compound with a name as long as your arm (it had to be shortened to "salvarsan"). Then they adopt an intricate and dangerous method of administration—they inject it straight into a vein, with the idea of bringing it in a more or less intact state into rapid contact with the spirochaete or germ which it is intended directly to attack

and destroy. 606 burst upon the medical world with a great fanfare of trumpets as the long-sought specific and infallible cure of syphilis. Every sufferer from syphilis must have his jorum of 606 injected into a vein and all would be well. Well, there were undoubtedly many cures—or apparent cures. But after a little while voices began to be heard in criticism. Some patients were not cured, and some unfortunately were not able to survive their cure. Some seemed at the time to be cured, only to develop later on a particularly serious form of the same disease—syphilis of the central nervous system, a result that seemed to indicate that the “salvarsan” had not succeeded in overtaking the spirochaete but had only chased it into the recesses of the nervous system. It is very remarkable that the original 606 has had to be largely superseded by similar preparations decidedly less strong, preparations which, as a recent writer on the subject has said, “whilst being more kindly to the patient than was the first compound issued by Ehrlich, are undoubtedly more kindly to the parasite.” That means that when the stuff is strong enough to do direct damage to the parasite it is also strong enough to so injure the tissues and fluids of the body that they cannot form those “anti-bodies” by which they repel the assaults of disease. At the same time our old-school friends have come to the conclusion that, when certain considerable bodies of cases have been carefully excluded, salvarsan or its substitute should be used in the remainder of syphilitic cases, but that mercury, the old-fashioned remedy for this scourge (and a truly homœopathic remedy at that, as its “provings” and poisonings well show) must always be given at the same time, whether as an injection of grey oil or an inunction of blue ointment or in some other form. Advertisements for lost or missing articles often state that they are of no use to any but the right owner. We are reminded of this saying very often when we observe the fate of the remedies that our old school friends borrow from Homœopathy—of no use to any but the right owner, that is, to him who understands the principle of their use. This is by the way. Arsenic and Mercury are homœopathic

to syphilis, but they must be rightly used. The attempted practice of direct sterilisation (that is, killing of the germ) leads to no satisfactory result. The similar drug, whether it be a vaccine or something else, acts upon disease-germs by increasing the powers of the self-protecting mechanism of the body.

I have spoken of opsonins. They are not the only army corps that the blood raises in its defensive warfare. There has, for instance, now for many years been a laboratory test for diagnosing typhoid fever, called the Widal test, which depends upon the very interesting fact that when fighting the typhoid bacillus the blood of the patient develops a particular substance called an *agglutinin*, which causes the bacilli to stick together in clumps. A similar thing happens in Malta fever. Now the blood does not elaborate these sticky things merely in order to help the doctor, with the pathologist's aid, to diagnose the disease. Nature is more concerned with cure than with diagnosis. These agglutinins by clumping their enemies together in a sticky mass help to render them harmless and put them *hors de combat*. Now for years past it has been found by homœopaths prescribing according to their law that *baptisia* is a drug that benefits a large number of cases of typhoid fever. Many would think of *baptisia* in a case of typhoid before they thought of anything else. Well, it has occurred to some homœopaths in recent years to administer *baptisia* to the healthy and see what effect it has on the blood; and it has been found that it actually develops this agglutinin in the blood.

Even the developments of biology remarkably confirm the homœopathic law. The researches of Rudolf Arndt, crystallised in Arndt's law, show that the Hahnemannian law is but part and parcel of a larger law of life. The basis of life, as every layman knows nowadays, is protoplasm, and the simplest life-unit, from which the complex body of man has been built up, is the single protoplasmic cell. The reactions of protoplasm to various stimuli, such as heat, electricity, etc., have been carefully studied in the case of the simplest one-celled organism, the *amœba*,

which is the type of the primitive body-cell. Arndt's now famous law is that a *small* dose of a stimulus (whether it be a heat-stimulus or an electrical or a chemical stimulus) *encourages* protoplasmic activity, a *larger* dose *hinders* it, and a *still larger* dose *destroys* it. Yeast is a one-celled organism which by being grown in a solution of sugar is able by a process of fermentation to break the sugar up into carbonic acid gas and alcohol. This indeed is how alcohol is often obtained. Well, now, it has been found that if to that sugary solution in which yeast is living you add *arsenic* in a strength of 1 in 1,000, you stop fermentation, that is, the yeast's life-activity, altogether; but if you reduce the strength of the *arsenic* to 1 in 3,000 or 5,000, it only hinders fermentation without stopping it. If you reduce the *arsenic* to a very small dose, from 1 in 10,000 onwards, it is found that you actually encourage fermentation. Otherwise put, a large dose of poison destroys life-activity and a very small dose stimulates it. This is obviously a scientific illustration and confirmation of the homœopathic law of similars, and reveals the homœopathic law as an expression of the universal reaction of living cells to stimulating agents.

This leads us on to talk of one of the most popular remedies of the day, a remedy which has most powerfully seized the popular imagination—I mean the application of the X-rays. In the early days of their use the attention of doctors and scientific men was arrested by striking cures of certain diseases, especially of the skin. A little later there was consternation, because it was found that excessive dosage of X-rays or their prolonged use did itself produce disease, and even death. And then a wonderful thing happened—it was observed that the evil and destructive effects of the large doses bore a remarkable resemblance to the conditions that the small doses relieved and cured. X-rays in small doses were praised as a cure for dermatitis (inflammation of the skin) and even for cancer. Large doses undoubtedly produced dermatitis and cancer and many pioneers in the use of X-rays have, alas, already thus lost their lives in the service of science and humanity. Well, this is pure Homœopathy. The

same is true of radium, and at the same time the marvellous effects of radium in incredibly minute doses make mincemeat of all the old gibes at the infinitesimals. The *Lancet* a few years ago made this very remarkable statement:—"The mystery surrounding the fact that X-rays and other emanations can set up an ugly pathological process, while at the same time they are employed, presumably on scientific grounds, to stop the progress of such a process, is in urgent need of study." But the so-called "mystery" is merely an illustration of Arndt's basic law—the small stimulus encourages, the big stimulus depresses and destroys, protoplasmic life. Has it ever occurred to the *Lancet* that there is a similar "mystery" surrounding the fact that a stiff dose of ipecacuanha wine can set up, if not an ugly, at least a very uncomfortable pathological process, while at the same time small doses of that same drug are employed "presumably on scientific grounds," to stop the process of vomiting? Has the same thought occurred in connection with the fact that tubercle germs and their poisons can set up an "ugly pathological process," while at the same time under the name of tuberculins and bacillary emulsions they are employed "presumably on scientific grounds" to stop the progress of the tuberculous process?

Few things in the practice of Homœopathy were more mercilessly ridiculed than the practice, originated by Hahnemann himself, of triturating (i.e. grinding up in a mortar with sugar of milk) an insoluble substance, like gold or flint, and when the trituration had reached what we call the third centesimal attenuation, i.e., when the original substance constituted a millionth part of the whole, dissolving it in rectified spirits and making this solution the basis for the still higher dilutions. Hahnemann maintained that by his laborious process of trituration he greatly increased the drug-energy of the original substance—and even gave a drug-energy to substances which in their natural condition were wholly without medicinal action. The theory and the practice based upon it were regarded as the supreme evidence of the quackery of Homœopathy. But after all, was Hahnemann really

that cross between a fool and a knave that we call a charlatan? Let us see. The whirligig of time brings some strange revenges with it. Whereas the famous chemist Graham in the 'sixties sharply divided solutions into crystalloids, of which common salt was the type, and colloids, of which gum arabic was the type, chemists and physicists in these later days have discovered that practically all substances can be made to assume the "colloidal" state; and as they have also made the interesting discovery that all the fluids and secretions of the body are themselves in the "colloidal" state, it has occurred to them that substances of medicinal reputation, and even other substances also, might by being reduced to the colloidal state be brought into closer relation with the colloidal fluids and tissues of the body and thus being more readily and completely assimilated, have a greatly heightened therapeutic energy. Within recent years the late Henry Crookes, son of the famous scientist, the late Sir William Crookes, invented a chemical process (commercially exploited by the Crookes Laboratories in Chenies Street, Tottenham Court Road) for presenting a number of substances like gold, silver, copper, iron, etc., in the form of a colloidal solution to be used for medicinal purposes. These "solutions" are called "collosols." Now we have orthodox physicians using for medicinal purposes such substances as silver and gold. Gold, indeed, we are told, is much in vogue on the Continent as a remedy for tuberculosis. Doctors have always found a use for silver and gold, but (with the exception of the despised homœopath) not for medicinal purposes. But now—*nous avons changé tout cela*. It is interesting, too, that neither the researches into colloids nor the manufacture of collosols owed anything to homœopathic inspiration. This confirmation of Homœopathy is quite an independent witness.

But, it may be reasonably asked, is it a confirmation of Homœopathy? Is there any relation between Hahnemann's methods and the modern processes of colloidal chemistry? Let us see. In the first place, what precisely is this colloid state? A substance is in the colloid state

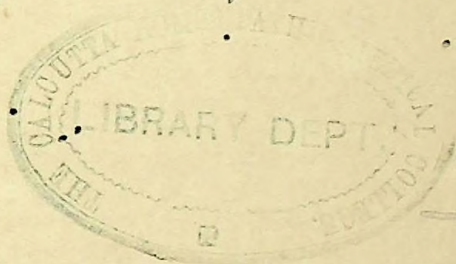
when it exists in the form of excessively minute particles (less than one ten thousandth of a millimeter in diameter, or one two hundred and fiftieth of the size of an average bacterium, which is itself visible only under the microscope) more or less evenly dispersed or suspended in a medium in which they oscillate with inconceivable rapidity.

These oscillations are beautifully seen under the ultra-microscope; they cannot be seen with the ordinary microscope. "One drop," said Sir J. J. Thomson at the Royal Institute a few years ago, "of a metallic collosol contains more than a billion particles of metal which cannot be detected by ordinary means and pass readily through the pores of a filter." Now a remarkable thing has happened. Dr. Judd Lewis, not a homœopathic doctor but a doctor of science and a chemist of distinction, who has made a special study of the colloids, has carefully examined the homœopathic triturations of metals and says that in his belief they are colloids. The size of their particles approximates to colloid dimensions, and on solution they exhibit, as may be seen with the ultra microscope, that inconceivably rapid oscillation of their constituent particles which characterises the colloids. That is to say, sixty years before Graham distinguished crystalloids from colloids, and a hundred years before the modern discoveries of Crookes and others Hahnemann was reducing inert insoluble substances to the colloidal state and using them as remedies for disease.

Judged as to what it *is* by the latest tests of science, judged as to what it *does* by the practical and searching tests of everyday experience, Homœopathy stands amid the uncharted seas of empiricism as an impregnable rock. Why does not everyone then fly to that rock? There is nothing wrong with Homœopathy. The fault must be in those who profess it. Let them be up and doing. Let them spread the good news of a system of medicine that is not only "up to date" but can cure.

Many, to change the figure, are perishing for lack of knowledge—hungering and thirsting in the midst of plenty. Let me conclude with a homely apologue. A ship was approaching the shores of South America. Its

crew had been without water for three days and were suffering the agonies of thirst. In their desperate extremity they sighted a passing vessel and hailed it. "For God's sake, give us water. We have had no water for three days!" The answer was a long, loud laugh. "Dip it up, dip it up!" they cried, "it is all around you." The ship had reached that point at which the river Amazon pours its mighty volume of fresh water far out into the Atlantic. Many of the old school, thirsting for a law of cure and only mocked by the fitful cures of an elusive empiricism, are praying for water in God's name. To such our friendly cry across the waters is "Dip it up, dip it up—it is all around you, the flowing tide of Homœopathy."



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