

A
Concise Guide to
Homoeopathy

by

Dr. E. A. MAURY

Price 4s. 0d.



A Concise Guide to HOMOEOPATHY

By

Dr. E. A. Maury

463

Translated from the French by
MARK CLEMENT



HEALTH SCIENCE PRESS

Wayside,
Grayshott - Hindhead - Surrey

CONTENTS

Introduction

Homoeopathic Glossary page 11

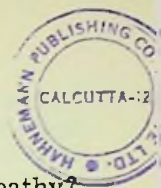
PART I

Chapter I	The Theory of Homoeopathy	„	25
„	II The Law of Similars	„	28
„	III Pathogenesis	„	32
„	IV The Homoeopathic Remedy	„	36
	Practical Considerations	„	39
	Technical Considerations	„	40

PART II

„	V The Practice of Homoeopathy	„	42
„	VI Clinical History of Two Cases	„	44
„	VII Homoeopathic Explanation of Two Cases	„	49
„	VIII The Homoeopathic Prescription	„	59
	Acute Cases and Organic Disorders	„	59
	Chronic and Functional Disorders	„	60
	Detoxication	„	61
	Medicinal Aggravation	„	61
	Conclusion	„	62

Bibliography



INTRODUCTION

Why have we written a new work on Homœopathy?

Such works are already numerous as will be seen by the bibliography given at the end of the present work.

The title we have chosen is intended to make our aim clear in writing this manual. Our main intention is simply to make Homœopathic Medicine and its jargon comprehensible to the average medical practitioner and to the general public, and to stimulate, at the same time, the scientific interest which this method of considering and treating disease is likely to arouse.

PROFESSIONAL INTEREST

Every medical practitioner, whose university education and hospital training have confined him to orthodox doctrines of diagnosis and treatment, has heard from time to time of Homœopathy in the course of his career, either from his patients or from a colleague. Having become interested and attracted, he obtains a work on the subject and proceeds to study it with a certain amount of good will. More often than not the work chosen does not answer his personal requirements, either because it is too elementary, too dogmatic or just too complex. Very soon, owing to his habitual routine and somewhat put off by the apparent difficulty in understanding Hahnemann's method and its spirit, he puts the book away, and that is the end of his attempt at mastering the subject. If, by any chance, he should meet a colleague who has had the courage to practise Homœopathy, he may ask him to reveal the secrets of it. He may listen attentively and if the explanation is sufficiently clear, his mind will be enlightened, for the alleged secrets are easy to understand, and once again he begins to study works on the subject. This time he may achieve a higher degree of understanding, but it must be admitted that very often, in

spite of good will on the part of the student knowing nothing of the subject, the study of Homœopathy, as expounded in the numerous works published, appears to be somewhat irksome, and for the second time, the seeker after knowledge, in spite of his genuine interest, is reluctantly compelled to abandon his studies. He lacks the time necessary for the purpose and concentration eludes him when engaged in such a mental pursuit. That is the first reason why we have decided to present our Concise Guide to Homœopathy which seems to us to meet all necessary requirements. Thus we hope that the medical practitioner or the interested layman, whether he is keen or sceptical, will be enabled to understand, by perusing the present work, first what Homœopathy is, and afterwards to study with profit the various works dealing with the subject.

SCIENTIFIC INTEREST

When a study of the work in progress, to which we shall refer in the theoretical part, has resulted in a clearer understanding of the reasons for the pharmaco-dynamic action of the remedies employed, homœopathic therapeutics opens up a new field of research in medicine.

The great law of similars, which will be discussed later, constitutes the basis of the method in question. It also forms the basis of other methods of treatment, habitually resorted to in orthodox medicine, such as vaccino-therapy, sero-therapy, and more recently the application of antibiotics.

In reading the theoretical part of our Concise Guide it will be easy to understand how, for example, the action of Penicillin can be accounted for. Furthermore, the pharmaco-dynamic effect of remedies in high dilution and consequently of the infinitesimal dose becomes more comprehensible since the recent discoveries in the domain of atomic physics. Without wishing to put forward a hypothesis, as yet too advanced, it is permissible to think that the homœo-

pathic remedy acts in the manner of a molecular "bombardment," localising itself especially in weak or diseased areas of the organism. This is but a tentative suggestion but it seems to us that the scientific interest in Homœopathy, though still embryonic, is destined to grow.

Owing to the trend of evolution of modern physics we are convinced that the research work undertaken to understand the action of homœopathic remedies will be of considerable importance in the near future.

Since this book was written the Boyd report has been published, which it will be remembered, has established the truth of potentisation.

SCOPE OF THE CONCISE GUIDE

It is with this dual aim in view, based on a personal experience of Homœopathic medicine in France extending over 20 years, that we feel justified in offering the present work which has been made as simple and easy to read as possible. It is not a plea in favour of the method we are using ourselves but a guide for the beginner.

When we began the study of Homœopathy in our late twenties, we had both the ardour of youth and the time necessary for a thorough understanding of the method. We also had the good fortune of being taught by excellent teachers who were kind enough, after a hard day's work, to devote their evening hours to instruct us. Foremost among these we should like to pay a particular tribute to our eminent teacher, Dr. Leon Vannier, the leading homœopathic physician on the Continent.

But with the passing of years we have noticed that time was lacking more and more for everybody, especially under the conditions of our modern life when men exert themselves much to produce but little and feel the need of acquiring knowledge in a condensed form.

We feel sure that this need is shared by our medical colleagues who are quite willing to know and to learn

provided it can be done easily and quickly. We, therefore, dedicate our work to them.

It is not intended to take the place of any work on clinical Homœopathy or Materia Medica, which are indispensable for a more thorough knowledge of Homœopathy, and of which there is a number of excellent ones whose study is essential for those wishing to practise Homœopathy. The aim of our Concise Guide is simply to enable them to acquire a thorough knowledge of such works and to have a better grasp of the spirit and letter of the method.

SCHEME OF THE CONCISE GUIDE

After a brief historical survey, mainly intended to stress the early existence of the conception of the law of similars in Medicine, a section is devoted to the theoretical part of Homœopathy defining its principles and establishing the pharmaco-dynamic basis on which the treatment rests.

In the practical section, examples of clinical cases taken from professional practice, are given with the object of making them clearly understood from a homœopathic point of view. At the same time, the reasons for prescribing certain remedies are discussed.

The pathogenetic account of some remedies taken from the Homœopathic Materia Medica will serve as an introduction to the study of the works dealing with this subject which can be profitably consulted whenever the question of treatment arises.

Finally, and here we think we have introduced a novelty, a homœopathic glossary at the beginning of the work is given, defining and explaining the terms commonly met with in text books and publications which are apt to puzzle the uninitiated. We have always held the view that a well-understood terminology is half the battle in the labour of learning.

And now, at the conclusion of this short introduction, it only remains for us to hope that the reader

will not feel inclined to close the book after having read but a few pages, which would indicate that it has not fulfilled its purpose. Let us hope rather that the reader's interest will be stimulated in the study and application of what, according to the expression of Dr. Vannier, constitutes, above all, a "Human Medicine," which is Homœopathy.

HOMŒOPATHIC GLOSSARY

GENERAL CONSIDERATIONS

As mentioned in the Introduction, we are giving below a short Glossary with a view to facilitating the understanding of terms most commonly employed in Homœopathy.

In order not to overload the present work unnecessarily and enable the reader to acquire, within the compass of a small volume, the greatest amount of knowledge indispensable for proceeding further, the terms defined in this Glossary include not only definitions but also commentaries supplemented by clinical examples in many cases. Thus the reader will be able to understand more clearly the following pages by referring to the Glossary, whenever necessary, and also to approach the study of more complete works dealing with Homœopathy with fuller understanding.

Homœopathy, being a branch of Medicine, has, like any other science, its own language or terminology which must be mastered by the uninitiated. This is really a simple task which, once accomplished, will enable the new recruit or convert to Homœopathy to read works and publications on the subject with ease and complete understanding.

At first sight, some of the terms used by homœopaths may appear to be somewhat long and strange, if not baffling, but it must be borne in mind that technical terms in any science seem invariably long and strange to novices for they often express in one word what may take a whole sentence to explain in simple language. For instance, it is easier to refer to "detoxication" than to say that the system must be got rid of various poisons derived from drugging or wrong feeding. Familiarity with such terms will greatly help the beginner in his future studies and gain him admission into the ever-increasing ranks of adepts and practitioners of the art of Homœopathy.

AGGRAVATION (Worsening of Symptoms)

Conditions of general or local character, unfavourable or harmful to the development of the disease to be treated or requiring the application of an appropriate remedy to achieve the desired effect through its modalities.

MEDICINAL AGGRAVATION

In the course of treatment it may happen that the morbid symptoms presented by the patient assume a more acute character and the clinical signs, instead of showing an amelioration of the disease condition, tend to become intensified which, however, is a passing phase.

This organic reaction which is due to a particular remedy prescribed may be regarded as favourable as far as the general prognosis of the affection to be treated is concerned.

This medicinal aggravation may be likened to the thermal crisis well known in crenotherapy. (Treatment with water from mineral springs.)

AMELIORATION (Improvement of Symptoms)

Conditions of a general or local character favourable or beneficial to the development of the disease to be treated and requiring the application of an appropriate remedy to achieve the desired effect through its modalities.

CENTESIMAL (See DILUTION)

CLINICAL INDICATIONS

The homœopathic remedy is not specific for a given affection but may be administered equally well in various other disease conditions. This accounts for the fact that the same remedy may be prescribed for affections which apparently are very different. Its indication rests on a totality of symptoms caused by the

affection rather than on the character of the affection itself.

The clinical indication for the same remedy in affections apparently dissimilar as far as their pathological manifestations are concerned, raises the question of selective action of a remedy on a certain organ showing a particular sensibility in a given case.

Example: *Bryonia* is indicated in articular rheumatism as well as in pleurisy with effusion for this remedy acts directly on the mucous membrane.

COMPLEMENTARY

A homœopathic remedy is said to be complementary to another when their administration, simultaneous or successive, according to the case, is capable of reinforcing their reciprocal action.

Example: *Silica* is said to be complementary to *Thuja*, that is to say if the symptoms observed in a patient call for prescribing *Thuja*. The action of the latter remedy will be reinforced if *Silica* is also prescribed either at the onset of the affection or subsequently.

DECIMAL (See DILUTION)

DETOXICATION

Therapeutic action complementary to basic homœopathic treatment and consisting in concomitant prescription of low potency remedies (3x to 6x), to be taken daily in order to enable the secretory and excretory organs to perform their functions of elimination in relation to the degree of toxic impregnation of the organism.

Example: In a case of renal insufficiency, it is advisable to prescribe a daily dose of *Solidago virga* in low potency to ensure the normal functions of the kidneys. This is in addition to the basic treatment.

DILUTION (POTENCY)

Liquid form of a homœopathic remedy obtained from the mother tincture and natural substances, animal, vegetable or mineral.

From a practical point of view, the first decimal dilution or potency (1x) is prepared by mixing one drop of the active substance with 9 drops of alcohol, which means that the first decimal dilution contains one-tenth of a drop of the mother tincture. One drop of this mixture put into a vessel containing 9 drops of alcohol constitutes the second decimal dilution or potency (2x), and so on.

To prepare a centesimal dilution, one drop of the active substance is added to a vessel containing 99 drops of alcohol (1c), consequently one drop of the first centesimal dilution contains one-hundredth of a drop of the mother tincture. One drop of this mixture added to another 99 drops of alcohol in another vessel constitutes the second centesimal dilution or potency (2c), and so on.

The potency of any given product acts not only on the quantity of the active substance employed for its preparation by diminishing it progressively, according to the basic technique just described, but also on the character of its toxicity by modifying it.

DOSE

This term means a determined quantity of the remedy to be prescribed. As a rule, the remedy is administered in the form of a powder, or very small granules or pilules, which the patient takes in one dose.

The frequency of prescribing the dose may be daily but, generally speaking, it is preferable to give only one dose of the same remedy once or twice a week, especially in the case of high potency remedies (200 and over).

DYNAMISATION

This term signifies all the combined processes of dilution, succession or trituration, which reduce the remedy from a ponderable to an infinitesimal dose.

This attenuation of matter constitutes one of the factors of activity characteristic of the homœopathic remedy.

EXPERIMENTATION

The Homœopathic Materia Medica is based entirely on experimental tests or "provings," as they are called, carried out on the healthy subject by giving him gradually increasing doses of an active principle whose effects are carefully studied. The observation of the reaction signs exhibited or felt by the subject constitutes homœopathic experimentation, enabling one to establish the value and the sphere of action of any given remedy.

HOMŒOPATHY

This branch of medicine is the art of treating disease by means of remedies which, when given experimentally to the healthy subject in full doses, cause symptoms similar to those observed in the sick subject whose affection calls for treatment.

We shall be giving a few examples of the practical application of this principle in the theoretical part of our Guide.

INCOMPATIBILITY

A homœopathic remedy is said to be "incompatible" with another if the therapeutic action of one is destroyed by the administration of another. The incompatibility is due to the different modalities of the remedy prescribed. Example: The administration of *Zincum* is incompatible with that of *Nux vomica*; the effects

of the latter remedy, given in accordance with the symptoms observed, will be nil or even harmful, if it is administered at the same time as the first remedy.

INFINITESIMAL (DOSE)

It is practically impossible to give an exact definition of this term. But one may describe the infinitesimal dose as an attenuation of the solid or liquid product, obtained by gradually increasing division of its active principle in an inert vehicle. The infinitesimal dose may also be described as an imponderable quantity of active substance included in a ponderable quantity of inert substance such as alcohol or lactose. By way of example, the third centesimal dilution ($1/1,000,000$) requires for its preparation 1 gram. of active substance in 1,000 litres of water.

In the definition of this term we meet the principal objection to the therapeutic value of a homœopathic remedy, for beyond a certain degree of dilution it is generally believed that an active principle is devoid of action. But pharmaco-dynamic experiments tend to prove that a very small quantity of an active principle has a certain physiological action. For instance, Adrenalin in a concentration of $1/1,000$ stimulates the activity of the isolated intestine whereas a stronger concentration inhibits it.

INDIVIDUALISATION

Proper character of a homœopathic remedy for its individual application to the patient.

ISOPATHY

The treatment of disease by the administration of the causative agent or its products.

LATERALITY

Homœopathic medicine takes into account, in the observation of the patient, the morbid localisations corresponding to selective locali-

sations in the symptoms of experimental intoxication, in order to establish pathogenesis. It has been observed by experimenters that certain products taken in toxic doses give rise to a greater variety of reactive symptoms on one side of the body rather than on the other. Consequently when the practitioner is confronted with a patient whose main symptoms are localised with a marked preference on one side of the organism he should prescribe the corresponding remedy possessing either a right or left laterality.

Example: *Lachesis* (Snake venom) presents a left laterality, that is to say the symptoms observed as a result of snake bite as well as those which call for "similarity" treatment in the patient, manifest a localisation with a left predominance.

Lycopodium. Often presents indications when the patient requiring it manifests a symptomatic laterality on the right side, that is to say when the major part of the clinical signs presented affect the right side of the body, the liver, for example, for which *Lycopodium* is the homœopathic remedy second to none.

LAW OF SIMILARS

This law, which constitutes the fundamental basis of Homœopathy, was discovered by Hahnemann in 1790. He found that a drug which when administered in large quantities to a healthy subject produced certain symptoms, was capable, when given in minute doses, of curing similar symptoms in a sick subject. Prolonged observation and experiment led him to the conclusion that this law governed the action of all drugs, and he accordingly formulated the law of similar, expressed as "*Similia similibus curentur*," which means, "Let likes be treated by likes."

MATERIA MEDICA

This consists of all the remedies employed in homœopathic pharmacology together with a description of their symptoms. In order to have a sound knowledge and understanding of the Materia Medica it must be borne in mind that it represents an account of the physio-pathological signs caused in a healthy organ by the absorption of gradually increasing ponderable doses of an experimental product and ultimately administered to a patient who presents the morbid signs corresponding to those brought about by experiment.

The Homœopathic Materia Medica may be compared to a summary of experiments made by a great number of observers for over a century, the first of whom being Hahnemann, the originator of the method.

MENTALITY

The Homœopathic Materia Medica, in its pathogenesis, attaches a great deal of importance to the mental reactions of a subject as a result of the experimental administration of gradually increasing doses of an active principle. The organism reacts, in effect, on all planes, physical as well as psychological.

The signs manifested in the mental sphere assume, in the eyes of the homœopathic physician, a very great importance for establishing a medicinal diagnosis. They will often show an indication for a "similar" remedy if they manifest themselves in the patient whose sickness calls for treatment, especially in cases where the physical symptoms are not of such significance that they can be relied upon solely for determining the "similimum."

MODALITY

In pathogenesis one takes into account the factors influencing favourably or otherwise the

symptoms observed, and covering, under the general term of modalities, either the aggravation or amelioration of the signs observed by experimentation.

MOTHER TINCTURE

Product of maceration of the fresh plant in alcohol from which the remedy is prepared.

NOSODES

This term designates the remedies prepared from cultures of microbes, viruses or pathological excretions or secretions, which are to be administered to the patient after having been through the processes (pharmaco-dynamic) usually employed in Homœopathy.

Example: *Tuberculin*, prepared from the pus of a tuberculous abscess.

NOSOLOGY

Branch of medical science dealing with classification of diseases.

PATHOGENESIS

The sum total of symptoms observed in a healthy subject as a result of experimental administration of a product in ponderable (having appreciable weight) and gradually increasing doses constitutes its pathogenesis. In this connection one should not confound pathogenesis and toxicology, the latter being concerned with lesions and morbid localisations brought about by massive absorption of a toxic product. Contrary to what takes place in homœopathic experiments, intoxication by a given substance suppresses the appearance of functional and psychological symptoms. Moreover, it is worth noting that a patient, intoxicated by a given substance, must be treated by the administration of another remedy than that which caused the intoxication, generally its

Example: The pathogenesis of *Arsenicum* complementary.

album has been established from the sum total of the clinical signs observed in subjects having absorbed arsenic, either accidentally or experimentally.

All indications for homœopathic remedies rest on a thorough knowledge of their respective pathogeneses for the prescription of the remedy is established on the principle of "similarity" with the clinical symptoms presented by the patient.

POLYCHREST

This term is used for those homœopathic remedies which, in accordance with their proper symptoms, give the greatest number of clinical indications, for the signs they present are met with in the majority of diseases.

Example: *Nux vomica* is one of the best known polychrests in Homœopathy for its proper symptoms, that is to say those constituting its pathogenesis, are common to a great variety of affections and functional troubles.

REACTION (MEDICINAL)

The homœopath often notices, especially if a remedy is particularly well chosen, in accordance with the principle of similarity to the symptoms of the affection to be treated, that an aggravation, transient in character, may occur in the pathological condition of the patient. This medicinal reaction, in general, may be regarded as favourable to the evolution of the affection towards cure. But when the medicinal reaction exceeds in intensity that of the symptoms to be treated or gives rise to malaise, it is time to administer the antidote of the remedy prescribed which is given in all works on Homœopathic *Materia Medica*.

RELATIONSHIP

Most remedies possess the property of being comparable with one another owing to the symptoms they have in common or to the fact that some of them are complementary to others. Example: *Aconitum* may be compared with *Sulphur* for their respective pathogeneses have many similar or common signs. *Psorinum* is complementary to *Sulphur* for the action of the first remedy is often reinforced by the successive administration of the second provided the symptoms presented by the subject justify its administration.

REMEDY

A homœopathic remedy may be defined as a medicament whose basic product has gone through the classical processes of dilution and dynamisation. The remedy has thus been "potentised." It is prescribed in infinitesimal doses in accordance with the law of similars. It is given in the form of granules of sugar or lactose impregnated by the active substance as indicated above, or in the form of colourless liquid.

We shall discuss homœopathic remedies more fully in the theoretical part of the Guide.

SIGNS

Any animal, vegetable or mineral product absorbed in gradually increasing doses gives rise to the appearance of well determined symptoms. When these same symptoms are found in a patient they are designated under the name of "signs."

Example: The gastric malaise occurring in a subject towards 11 o'clock in the morning is one of the signs of *Sulphur*, that is to say in such a patient it is advisable to prescribe this remedy "signed" by this symptom, for it is found in the pathogenesis of *sulphur*.

SIMILIMUM

This is said of a remedy which, in its proper signs and modalities, most nearly resembles those which characterise the affection to be treated.

SUCCUSSION

Process consisting in vigorous shaking of the dilution with a view to effecting dynamisation of the remedy.

TRITURATION

Medicinal products in solid form are triturated with a mortar and pestle. They are given in the form of powder whose dosage of the active principle is determined in the same proportions, decimal or centesimal, as that of dilutions.

TYPE

This term is used to designate a patient who, in his bio-pathological manifestations, presents a sum total of symptoms comparable to the greatest number of signs belonging to a given remedy, not only on the physical and functional planes but also on the mental and psychological ones.

Example: A *Nux vomica* type is a subject whose functional and organic manifestations taken as a whole call for the administration of this remedy because one finds in him the greatest number of symptoms equally typical of the pathogenesis of *Nux vomica*.

VALUATION (OF SYMPTOMS)

Any pathogenetic experiment on a healthy subject gives rise to a reactive appearance of symptoms of a functional nature but their clinical value is unequal, either in the order of frequency of appearance or in the importance of the manifestations themselves. Each

symptom, therefore, is said to be "valued" or "assessed" in relation to another symptom according as it assumes a character of greater or lesser intensity.

N.B.—We have given above the essential points of the terminology indispensable for proceeding further in the study of works dealing with Homœopathy.

We are quite aware that this short glossary could have been more extensive but as our chief aim is a simplification of the subject matter we have thought it advisable to confine ourselves to a definition of the terms most commonly used.

PART I

THE THEORY OF HOMŒOPATHY

CHAPTER I

WHAT IS HOMŒOPATHY?

We may say, at the outset of this chapter, that Homœopathy constitutes a science resting essentially on the meticulous observation of symptoms noticed in the healthy subject.

Homœopathy is derived from two Greek words, "homoios" (like) and "patheia" (suffering), which have been interpreted in an erroneous and inadequate manner by translating them by such an expression, commonly used in France, as "The cure of ills by ills."

It is equally inaccurate to state that Homœopathy is a therapeutic method consisting in treating patients' ailments with remedies which, in toxic doses, give rise to similar lesions. One should rather say that a disease is treated with a remedy which produces similar reactions on the part of the organism, which is not exactly the same thing.

The development of this branch of human knowledge had its starting point in the study made by Hahnemann of Cullen's *Materia Medica*. He was struck by the observation that workers handling *Cinchona* bark manifested feverish symptoms similar to those of tertian ague (malarial fever). He then established the fact that the intoxication produced by *Cinchona* bark, which gave rise to a definite affection, was amenable to the therapeutic action of Quinine.

To return to the question of terminology, it is difficult to give a strict definition of the method. We have given one in our glossary which seems to us to sum up in a few words the very principle underlying this branch of medicine. We may recall with interest the definition of Homœopathy given by Dr. Vannier: "Therapeutic method consisting in giving a patient small doses of a substance which, when given

to a healthy subject, reproduces the symptoms observed."

This definition constitutes what is known as the "law of similars," to which we shall refer again.

This therapeutic method is due to the genius of Samuel Hahnemann, who was born at Meissen (Saxony) in 1755 and died in Paris in 1843, where he had established his abode during the last years of a life devoted to research.

After reading Cullen's *Materia Medica*, which incidentally he translated, he experimented on himself with *Cinchona* bark, of which he took gradually increasing doses, and he observed the appearance of symptoms of intolerance and intoxication which became attenuated and disappeared when taking the same substance in infinitely reduced doses.

"I have already pointed out," wrote Hahnemann, in one of his works, "that *Cinchona* bark gives rise in a sensitive but healthy subject, to an actual febrile crisis bearing a marked resemblance to intermittent fever. Probably, for this reason, it will follow its own course and cure it. Now, I must add that, after a ripe experience, it cures it, not probably, but surely."

With regard to Arsenic whose pathogenesis is given further on, Hahnemann wrote: "I have learned by personal experiments that it is capable of giving rise to that special kind of cramp in the blood vessels as well as to nervous shock belonging to a set of phenomena known under the name of febrile shivers. If it is given in appreciable doses of one-sixth to one-fifth of a gram. for an adult, this shivering will become exteriorised. This tendency indicates it therefore as a very powerful remedy acting as a similitum in intermittent fever inasmuch as it possesses the property which I had already observed of causing a paroxysm which is repeated daily, though in decreasing intensity, if its daily use is continued."

After these first observations Hahnemann then undertook a series of experiments with other pharmacological substances to which he applied the principle of attenuation of dosage with the purpose of obtaining

a curative effect. The founder of Homœopathy was thus re-discovering the old law of similars which had already been formulated since the earliest times of classical medicine.

CHAPTER II

THE LAW OF SIMILARS

The observations reported above lead us to repeat the statement that Homœopathy is a therapeutic technique based on experimentation and consequently satisfying in every respect modern scientific requirements.

If we wish to establish its connection with the past, the following words of Hippocrates are of particular significance: "Disease is produced by influences similar to the effects of remedies, and disease is eliminated by remedies which determine the appearance of the same symptoms . . ." And further on, by way of commentary on his previous statement, he adds: "Strangury may be caused and eliminated by the same remedy; thus by means of the same remedy it is possible to cause or eliminate strangury."

As a result of his numerous experiments, Hahnemann was able to establish the principle based on the law enunciated by Hippocrates, to the effect that any substance, animal, vegetable or mineral, taken in ponderable and gradually increasing doses, up to the threshold of toxicity, gives rise to certain symptoms of a functional nature in a subject generally healthy and previously free from such symptoms. If these same signs are found in a sick subject suffering from a certain affection, they should be treated by the administration of these same substances but in infinitesimal doses.

Let us now give a few examples to illustrate what has been described above in connection with the application of the law of similars, the basis of the homœopathic method.

Everybody knows the purgative properties of Calomel. It is known that if a dose of one gram. of Calomel is taken it causes diarrhœa which may last several hours, and the last stools contain only mucus whose evacuation is painful. The subject who has taken this dose of Calomel has the impression that his

intestinal reaction is never coming to an end. Thus we observe a series of symptoms, determined by the absorption of a ponderable dose of this salt of mercury, whose sum total represents what homœopaths define by the term of pathogenesis. As a corollary, if one has to treat a patient suffering from diarrhœa and if this affection is characterised by the same symptoms as those determined by Calomel (in dysentery, for example) the same remedy, provided the same modalities are found (in the present case, the sensation of endless evacuation), must be prescribed, but in infinitesimal doses, in order to obtain the required therapeutic effect.

All the products employed in Homœopathy are designated by their Latin names according to the current classification used in botany, zoology and chemistry. In the case mentioned above, the salt of mercury in question is designated under the name of *Mercurius dulcis*, followed in the prescription by the figure of the appropriate potency. We shall discuss in a subsequent chapter the nosological factors involved in determining the choice of a potency.

Another example of the application of a remedy may be given. It is known that Ipecac, taken in doses varying from 15 to 30 centigrams, causes vomiting. The subject who has absorbed such a dose experiences nausea, vertigo and vomits abundantly although his tongue remains clean. This latter characteristic thus represents one of the modalities of Ipecac. Therefore, when the practitioner is called upon to treat a patient suffering from nausea and vomiting but whose tongue remains clean, he must prescribe *Ipecac*, in homœopathic doses in order to obtain a curative result.

A last example will serve to make things still clearer. Black coffee, taken in excess, causes symptoms of intolerance which are well known, such as restlessness, nervous irritation, excessive mental activity and insomnia. Therefore, in order to do away with these symptoms in a patient, the practitioner will be well advised to prescribe a homœopathic dose of coffee or *Coffea*.

We must again stress the fact that it is essential to give the remedy which produces reactions *similar* to those of the pathological condition to be treated. Referring to the last example given, that of *Coffea*, its indication is not strictly confined to coffee drinkers, upset by this beverage, but may be extended to any subject whose general state of nervous and restless agitation presents a picture *similar* to that observed in patients intoxicated with caffeine. And this holds good for the prescription of all other remedies.

In short, homœopathic experiments consist in inducing artificially in the organism a medicinal illness whose symptoms may be compared to those of a given clinical affection, but proper to the patient, in regard to its nosological characteristics.

The three examples we have given here, intended to give a clear idea of the wider application of the law of similars between the symptoms observed in the patient and their correspondence with the pathogenesis of the remedy to be prescribed, are receiving a certain degree of confirmation in the classical methods of vaccinotherapy and serotherapy.

Without leaving the sphere of general considerations we may say that the technique of vaccination is nothing but the application of this same law, for to cure hydrophobia with an attenuation of the virus of rabies is a striking example of curing a disease by the same principle as that which caused it originally.

In considering the mode of action of vaccinotherapy, it is a fact that the introduction of a foreign protein into the organism, specific to the affection whose prophylaxis must be ensured, gives rise in some measure to a medicinal illness which enables the subject to fight effectively against the infectious disease attacking him. This artificial infection is "similar" to that produced by an injected vaccine. This is therefore a strict application of the law of similars with the difference that instead of aiming at the patient, vaccinotherapy aims at the germ itself.

Furthermore, among the numerous examples that could be given, such as *Digitalis*, it is worth noting

that the latter is, at the same time, the cause and the remedy of the condition known as asystole, according to the dose employed.

Similarly, in the administration of antibiotics now in vogue, we find the application of the same principle in the case of Penicillin, a fungus growing in moulds, being used with success in the treatment of infections in all their forms with the reservation that its action has a maximum efficacy in pathological cases showing the greatest degree of "similarity" to the conditions under which this parasite develops.

We have purposely given these three examples of treatment, taken from orthodox medicine, in order to make it clear that the principle of similarity constitutes the basis of many remedies prescribed in current medical practice, and that it is not only restricted to the homœopathic conception of treatment. Only the question of medicinal dosage and, perhaps, in a certain measure, the conditions of action of the remedy, separate one therapeutic technique from the other, but the gap is not so wide as is commonly believed.

With the progress of atomic physics it is being realised more and more that the infinitely small contains in its nucleus a quantity of energy, already appreciated by physicists, whose power far exceeds anything that could have been imagined but a short while ago. We shall refer to this question again in the section on the homœopathic remedy and its mode of action.

From a practical point of view, and to sum up in a few words the foregoing account, let us say that the homœopathic prescription rests on the law of similars and therefore necessitates a thorough knowledge of the pathogenesis of the remedies to be employed.

CHAPTER III

PATHOGENESIS

Any product, animal, vegetable or mineral, taken in ponderable and gradually increasing doses or introduced into the organism in massive form, gives rise to reactive symptoms whose characteristics vary according to the nature of the absorbed or injected product.

It is evident, to mention but one example, that the clinical picture presented by a subject who has been bitten by a venomous snake differs in many respects from that of a person suffering from the effects of arsenical intoxication.

Hahnemann and his successors undertook the task, by means of experimentation, on the healthy subject, of observing the signs determined by the absorption of the most varied substances so that they might be able to collect them in so many pathogeneses.

One example will serve to make our explanation clear.

Let us take the case of the experiment with Arsenic whose signs, observed and collected, enable us to establish the pathogenesis of the remedy.

Arsenious acid, taken in increasing doses, either accidentally or intentionally for experimental purposes, is a substance acting deeply on every organ and tissue. In the mental sphere, its abnormal presence in the human organism gives rise to a state of great anxiety and restlessness; the intoxicated subject feels the need of continually going from place to place; he is afraid of death and fears to remain alone. This feeling of fear is accompanied by cold sweats; he is desperate and contemplates committing suicide. In still stronger doses, Arsenious acid may even cause the appearance of olfactory and visual hallucinations and simulate a crisis of delirium tremens. The brain reacts by the presence of headaches of a burning character and accompanied by restlessness, which in spite of their nature are ameliorated by heat and hot applications. The scalp is sensitive and is itching

intolerably. The eyes are burning and watery, the eyelids red and ulcerated, and photophobia is intense. All these symptoms are equally ameliorated by heat. The nasal secretions are thick and irritating and assume the same burning characteristic, and sneezing brings no relief. The face is swollen, pale, sub-icteric and sometimes cachectic and expresses suffering. The lips have the same look of whiteness but may sometimes be blackish. In the mouth, there is a hæmorrhagic tendency of the gums with ulceration of the mucous membrane; the tongue is dry, clean and red, sometimes burning in cases of excoriation; the saliva is blood-stained.

The most important symptoms are found in the digestive system. The subject suffering from Arsenious acid intoxication cannot bear the sight or smell of food; he is very thirsty and drinks a great deal but only small quantities at a time; his stomach is burning; he vomits blood, bile or black mucus; burning pains are also pronounced in the intestines. The liver and spleen are painful and hypertrophied. There is also some rectal tenesmus and burning anal pains. The stools are black, malodorous and accompanied by prostration, they are more abundant at night or after eating and drinking.

The urinary system is also affected by arsenical impregnation and the urine is scanty, burning and containing albumen, epithelial cells, blood or pus.

In women, the genital organs are involved in the form of premature periods which are abundant and accompanied by burning pains in the ovarian region. Leucorrhœa is acid, burning, malodorous and appears with the least fatigue.

In the respiratory system, the subject experiences a distressing sensation of suffocation, especially after midnight, making it impossible to remain lying down. He is obliged to get up to breathe some fresh air. If there is any cough, it will also appear after midnight and expectoration is viscous. The chest is burning and breathing is wheezy.

As for the heart, the subject has palpitations and

the pulse is more rapid in the morning. The cardiac muscle is dilated and there may be anginal pains in the chest with irradiation in the neck and a sensation of burning between the shoulder blades in the back. The extremities are affected by trembling, heaviness, spasms, and the feet are burning and swollen.

The skin of an intoxicated subject with Arsenious acid is cold, pruriginous, dry, coarse and burning, with ulceration and malodorous secretion.

Sleep is bad and characterised by restlessness. The subject must be propped up with the head high to avoid fits of suffocation. Dreams leave an impression of fear.

The temperature is high and of periodic and intermittent character, accompanied by cold sweats and marked fatigue. When delirium occurs, it appears after midnight.

Lastly, there is a fall in the refractometric index of the blood serum and some anaemia.

To complete the pathogenesis of Arsenious acid and give its individual characteristics, which will enable one to prescribe the appropriate homœopathic remedy, it remains to say a few words about the modalities proper to this substance.

The symptoms described above show an aggravation after midnight following taking food and through cold in all its forms. Amelioration, on the other hand occurs through heat, hot drinks and in keeping the subject with the head propped up.

The laterality of the remedy is predominantly on the right side, that is to say most of the symptoms are more marked on the right side of the affected organism.

We have given here only a short account of the pathogenesis proper to Arsenious acid for the sum total of the reactive signs observed in the course of successive experiments made by different observers constitutes an important matter which is fully discussed in works on Homœopathic Materia Medica.

These signs are, of course, of unequal value in relation to one another, and the order of appearance

of some of them is inconstant. Those we have retained in the example given are just the signs which have been assessed and for which, consequently, the practitioner must be particularly on the look-out in the patient in view of the possible prescription of:

ARSENICUM ALBUM

Owing to the wide variety of symptoms observed and collected in the course of pathogenetic experiments, the clinical indications for this remedy are extremely extensive. It is the reason for which its prescription is the rule in a great number of affections presenting in their characteristics and evolutionary form the symptoms which are also typical of this substance. Thus *Arsenicum album* finds its indications in grave alimentary intoxication, advanced anaemia, asthma, typhoid, malaria, anthrax, ulcers and cancer, provided, let us repeat, that one finds in the patient to be treated the symptoms *similar* to those manifesting themselves in the course of arsenical intoxication experimentally carried out.

As we have had occasion to point out several times, a knowledge of the Homœopathic Materia Medica, entailing a full understanding of the different pathogeneses, is indispensable for the correct application of the technique. It is hardly necessary to stress the great interest inherent in this method which enables the practitioner to exercise his natural gift of observation on the patient while giving him at the same time a deep satisfaction in discovering the "similar" remedy culminating in the cure, or at least, the prompt amelioration of the patient's symptoms.

CHAPTER IV

THE HOMŒOPATHIC REMEDY

THEORETICAL CONSIDERATIONS

A great deal of discussion has taken place for over a century about the mode of action of the homœopathic remedy. While the disciples of Hahnemann have an implicit faith in it, fully justified by the results obtained, the adherents of orthodox medicine can only see in its action merely a result of suggestion.

We have had the occasion ourselves several times of treating domestic animals as well as young children in the course of our practice. In both cases, the homœopathic remedy, correctly applied, has given us positive results. One cannot say that a young child, and still less an animal, however intelligent it may be, is amenable to suggestion. On the other hand, in many patients who consult a homœopathic physician in a sceptical frame of mind, it has been observed that if the remedy prescribed is well indicated the result is invariably a marked amelioration of the symptoms presented. The clinical and therapeutic facts having been recorded, it is permissible to raise the question whether the homœopathic remedy, after having gone through the various processes of its preparation, still contains a detectable trace of active substance. In other words, is the infinitesimal dose a mental attitude or does it represent a reality?

Without going into details of numerous laboratory experiments made in this connection, we may just recall the experiments of Wurmser and de Loch, who have been able to determine, thanks to their microlyometer, the presence of an active substance up to the seventh decimal dilution; and those of Robillart who, taking up the physical study of dilutions by applying to these researches the method of artificial radio-active bodies, has been able to detect elements in Potassium bromide thus treated up to the 10th-15th potency.

These two experimental examples mentioned here enable us to give a positive answer to the question of the reality of infinitesimal dilution. But how does it act? Such is the second question which comes to mind. The mode of action of the homœopathic remedy presents on the one hand, the problem of the conception held of the disease, and on the other, that of the pharmaco-dynamic effect of the remedy.

In the present work, which is essentially practical and concise, we do not wish to discuss at length the accounts of laboratory experiments conducted in the strictest scientific spirit by Miss Wurmser on the mode of action of the homœopathic remedy. (Publisher's Note:—Accounts of Miss Wurmser's work are not available in English.)

First of all, with regard to the conception held of the morbid affection, if the latter is regarded as an expression of disturbance of the physiological equilibrium of organs and systems, there can be no doubt that by using a "medicinal potential," according to Hahnemann's expression, of an infinitesimal degree and chosen in accordance with the law of similars, one obtains, in place of the original disequilibrium, an equilibrium not only similar to that which existed previously but even more stable.

Again, when the question of the pharmaco-dynamic effects of the remedy is considered, the term "medicinal potential," employed to designate the rôle of the therapeutic activity of the active principle of any given substance, leaves the mind free to conceive a wide variety of hypotheses.

Recent investigations to which we have already referred lead one to think that the action of the infinitesimal dose increases the biological defensive tendency, naturally existing, against disease, thanks to the production of antibodies, for example, or even to the action of conditional reflexes through the nervous network of the mucous membranes.

With regard to the nature of the biological reaction brought about by the remedy prescribed on the similarity principle, it depends essentially on the value

of the dose employed.

A few examples will make it possible to understand the mode of action of the homœopathic remedy.

ACONITUM. In weak doses, it gives rise to acceleration of respiration with increase of amplitude; in strong doses, it is conducive to a progressive slowing down of the pulmonary rhythm, onset of dyspnoea and death by respiratory collapse.

DIGITALIS. The example of *Digitalis* is no less striking and illustrates in a particularly convincing manner the law of similars constituting the basis of Homœopathy in its entirety. The effects of this principle are known as manifested in the course of three phases typical of intoxication by *Digitalis*, (1) Period of latency, (2) period of therapeutic action, (3) period of intoxication. In the symptoms presented in the course of this last phase (cardiac acceleration, tachy-arrhythmia, extra systoles, etc.) we find the therapeutic indications for this remedy. At all events, and whatever the operative mechanism may be, the homœopathic remedy, in its action, seems to obey Arndt's law, which states that any stimulus of weak intensity increases the functional activity of an organ whereas a strong stimulus paralyzes it, and a still stronger stimulus abolishes it altogether.

Thus a weak dose of a diluted and dynamised product acts in the manner of a specific stimulus of weak intensity and results in an increase of functional activity in the deficient or affected organ. The action of the homœopathic remedy having been established, the question then arises as to the duration of this action.

Taking the laws of general chemistry into account, it follows that the duration of action of a given remedy depends on the concentration of the toxic substance employed in its preparation, and that it is inversely proportional, from a homœopathic point of view, to this concentration. The remedy of low potency (1x, 3x, 6x) acts rapidly but its action is fugitive, and it is necessary either to repeat the dose or give another

remedy indicated by the sum total of the new clinical signs presented. The remedy of high potency (30-100) acts all the longer as its potency is raised.

In conclusion, we may say that we are still restricted in formulating certain hypotheses to account for the mode of action of the homœopathic remedy. The future and, above all, in our opinion, the investigations more and more advanced on the part of physicists in the domain of atomic physics, will lead to an ultimate solution. Thus Homœopathy, originating like all branches of human knowledge from an empirical approach will then reach a really scientific phase.

PRACTICAL CONSIDERATIONS

The major part of the remedies constituting the homœopathic therapeutic armamentarium is derived (apart from nosodes) from natural substances belonging to the animal, vegetable and mineral kingdoms.

Vegetable substances are extracted either from the whole plant or part of a plant, juices or essences. The plants utilised are gathered in the wild state in their natural habitat and at a given season of the year. The plants, either whole or parts of them, are macerated in alcohol and this first process constitutes the mother tincture from which the remedy is prepared.

Animal substances. These may consist of whole animals or organic products derived from the organs of animals, such as snake venom or bee venom. In this connection it is worth noting that allopathic medicine has borrowed from Homœopathy some of its medicinal elements.

Mineral substances and chemical products. Mother tinctures of these are not prepared but only dilutions from which the remedy is derived and potentised as required.

The Homœopathic Pharmacopœia has also been enriched by the application of glandular extracts which are utilised in organotherapeutic treatment whose action may be substitutive, stimulative or inhibitory. It comprises also the use of Nosodes which

are homœopathic vaccines prepared from pathological or toxic products of various origins, such as Tuberculin, Cancerin, Luesin, etc.

All these substances of which we have given a short account are incorporated either into a powder consisting of lactose, or into granules or globules of sugar of milk, by different processes which we shall mention very briefly.

The basic product which may be either the substance itself or the mother tincture is first attenuated by division in an inert vehicle to obtain it in a solid or liquid form. In the first case the active substance represents a dilution whose usual vehicle is alcohol of varying strength; in the second case, the process involved is trituration and the vehicle used is lactose.

According to the nature of the product employed the active substances are attenuated by dilution and subjected to a series of vigorous shakings constituting the process of succussion, or they are triturated in a mortar. The sum total of these processes constitutes the dynamisation of the remedy which will allow it to be potentised to the required value, expressed in the decimal or centesimal scale.

The correspondence between the decimal and centesimal values is as follows:—

A second decimal (2x) corresponds to a first centesimal (1c)

A fourth decimal (4x) corresponds to a second centesimal (2c)

and so on.

It may therefore be said that any centesimal potency corresponds to a decimal potency whose figure is obtained by multiplying by two. The figure of the centesimal potency (3c), for example, corresponds to (6x), the sixth decimal potency.

TECHNICAL CONSIDERATIONS

In order to obtain homœopathic potencies, there are three different methods available:—

1. Hahnemann's Method. The oldest in order of time, which is called "Method of separate flagons.

It consists in putting one drop of mother tincture into a flagon containing 99 drops of alcohol which is then vigorously shaken. Thus the first centesimal potency is obtained (1c). Then one drop of this dilution is added to a second flagon containing also 99 drops of alcohol which is subjected to the same process of succussion and the second centesimal potency is obtained (2c), and so on up to the potency required.

2. Korsakow's Method. This is based on the principle that after a flagon filled with mother tincture has been emptied there remains, by adherence, on the walls of the flagon, one drop of mother tincture. A determined quantity of diluent is then added (99 drops of alcohol or water) and thus the first potency is obtained. The flagon is then emptied and the same process is repeated with more diluent (99 drops), thus giving the second potency; and so on until the required potency is produced. This process is carried out by means of an apparatus called a dynamiser.

3. Method of continuous fluxion. With this method the substance to be diluted is subjected to a continuous current of liquid vehicle.

From a practical point of view, the first method is the only one which really gives the exact value of the potency required.

We shall not dwell any longer on these technical processes concerning the preparation of remedies as our aim is essentially practical and addressed to the clinician rather than to the chemist. The reader interested in this subject will find more information in special publications.

PART II

THE PRACTICE OF HOMŒOPATHY

CHAPTER V

Having briefly summarised the essential things that one must know and understand in order to approach the study of the technique of homœopathic therapeutics in the right way, it seemed to us it would be instructive to supplement our theoretical exposition by two concrete examples taken from professional practice so as to give the clinician the opportunity of considering these clinical observations, made from a homœopathic point of view, and of understanding the reactions of the homœopathic physician when confronted by the cases whose nosological history we are giving below.

We have purposely chosen two observations, out of a great number, one reported by Dr. Barlee, of Tunbridge Wells, and the other by ourselves. We may describe them as "simple," not as regards the affections considered, for the first case is concerned with a grave streptococcal infection, and the other case is one of epileptic fits in a young patient, but because the manner in which the application of the treatment indicated by the signs observed and presented was carried out seemed to us best adapted to give a good understanding of the basic principles involved in prescribing correctly, and in accordance with the law of similars, the homœopathic remedies required in the case under consideration. Furthermore, these two cases represent an acute and a chronic affection respectively.

The first case was chosen to illustrate the rapidity of action of a homœopathic remedy and the necessity of knowing its timely replacement by another as soon as the clinical signs presented by the patient were modified under the influence of medication previously prescribed.

The second gives a good idea of therapeutic efficacy

in a refractory case, often achieved with a single remedy, provided it is clearly indicated by the majority of clinical symptoms.

When these observations, concisely summarised, and their therapeutic corollaries have been fully grasped, the allopathic practitioner will be in a position to undertake more profitably the study of the numerous clinical reports appearing in publications devoted to Homœopathic Medicine.

We would ask him to put himself, so to speak, "into the skin" of his colleague accustomed to homœopathic discipline, and to consider the patient to be treated within the framework of this therapeutic method.

Lastly, our clinical reports are completed by the suitability of the remedies prescribed in accordance with the principles already enunciated.

In order to learn, one must first understand, and to understand one must analyse. We shall now proceed accordingly.

CHAPTER VI

CLINICAL HISTORY OF TWO CASES

(N.B.—We have purposely printed in italics the signs showing the indications for the remedies prescribed.)

CASE 1. DR. BARLEE'S REPORT

ACUTE CASE

The patient was a boy, aged 12, who was seen on 14th June, 1937. He complained of an acute pain in the throat (tonsils) accompanied by a high temperature. . . . His parents called in a doctor whose report was as follows: On examination there was a *marked swelling of the uvula* which was *very oedematous*, *the tonsils were red and congested*, *the neck was swollen* on the left side. The patient made great efforts to breathe and spoke with difficulty. The presence of *peri-glottic oedema* was obvious.

Heart and lungs—Normal.

A microbic culture revealed the presence of streptococci. Prescription: *Apis 6x*, 2 granules to be taken every hour. The patient was seen again on the 15th June. He had had a bad night. Same temperature and constant delirium. Breathing was calmer. The same remedy was repeated.

The boy was seen again the same evening. Breathing was much easier and less wheezing. The same remedy was continued with the same dosage. In the afternoon the temperature rose above 102. The patient then showed obvious signs of the onset of pneumonia. The cheeks were vivid red and the eyes shining, while breathing became more rapid. Nevertheless auscultation revealed no suspicious signs either in the heart or lungs. On palpation of the *right iliac fossa* there was some *resistance to percussion* and on examination of *the tongue*, which was *very white*, there was *a triangular exfoliation at the tip of it*. Prescrip

tion: *Rhus Tox.* 6x—2 granules every hour.

On seeing the patient the same evening, the temperature had begun to fall towards 6 o'clock, when it registered 98 towards 9 o'clock. The tongue was now normal and the pulse good.

On the 16th June the temperature was a little below normal. The patient was much better but *the throat was dark red* and the *uvula had a spot on the left side*. Consequently, *Rhus tox.* was replaced by *Kali bichrom.* 6x. An amelioration the same evening was observed with a slight rise of temperature.

On the 17th June the patient had had a good night. The throat being still somewhat red, *Kali bichrom.* was continued.

Two days later, the last symptoms disappeared and the patient was sent to the seaside for convalescence.

CASE 2. DR. MAURY'S REPORT

CHRONIC CASE

On the 10th October, 1935, Raymonde B., aged 11, was brought to us by her mother as she was suffering from epileptic fits.

Medical History: Since the age of 5 the patient had had at regular intervals, every three weeks an *epileptic fit* occurring generally towards 5 o'clock in the morning and recurring at the same time for the next four or five consecutive days. The patient's condition became normal again during the next 20 days following the initial fits which started again under the same conditions and with the same periodicity.

The fit was preceded by loss of consciousness followed by convulsions habitually observed in such cases, with clonic tremors in the limbs, abundant salivation, stertorous breathing and biting of the tongue. In short, the usual classical picture of epileptic fits. When the attack was over the patient presented slight signs of hemiplegia on the right side of the body, which, however, were transient, and disappeared in the course of the day. For the last 7 years the fits had not responded to treatment with bromides or gardenal, nor to other therapeutic measures. The patient's mother, having heard the subject of Homœo-

pathy being discussed, decided to bring her daughter to us.

Antecedents: At the age of 3, the patient had an attack of measles followed by broncho-pneumonia; the following year she contracted diphtheria which was treated by the classical methods. Blood tests were negative. There was no history of injury to the head and, since the age of 5, there was no other trouble apart from epileptic fits. The family antecedents showed nothing of significant interest.

Clinical examination—on inspection: The subject had a *pale and chalky complexion* and was *sickly and weak* in appearance. A striking feature was the *big size of the head whose frontal part was rounded*; the edges of the *eyelids were red*, the ears projecting, the upper lip was clearly prominent. The *thorax* was *slender and narrow* with ribs protruding under the skin; the *abdomen* was *distended and tense*, the *limbs* were *thin* and the legs slightly curved inwards. The child seemed to have some difficulty in holding herself erect and the weight of her body was made to rest sometimes on the left leg and sometimes on the right one.

Mentality: On being questioned the young patient *hardly answered*. She appeared to take a certain time to grasp the sense of what was being said to her although the words used were purposely simple. The mother informed us that the child had failed to keep up with children of her own age and she had been put in a class with younger children. She also stated that in spite of her calm appearance the child was *subject to fits of anger which were extremely violent*, to the point of loss of consciousness. In her social reactions she was *obstinate and mistrustful*, especially towards people she did not know well.

Physical examination: This revealed nothing of any importance, apart from her general sickly appearance and *abdominal distention*. The *reflexes were exaggerated*. On auscultation the heart and lungs were found to be normal, and all other signs were negative.

TREATMENT

Having considered the clinical aspect and nature of the functional troubles presented by the young patient suffering from these epileptic fits which assumed the characteristics mentioned above and to which we shall refer more fully in the course of the next chapter, there was only one remedy in the Homœopathic Materia Medica capable of covering as closely as possible the sum total of symptoms observed. This remedy was *SILICA*, which we prescribed in the 200th centesimal potency, that is to say, a high potency, and in a single dose to be taken in the evening at bedtime. This single dose was repeated a fortnight later. We shall discuss the conditions involved in this prescription in the chapter dealing with the mode of application of the homœopathic remedy.

A month later, on the 14th November, the young patient was seen again. During the past 4 weeks she had only one attack which, according to her mother, was much less violent than the preceding ones.

We prescribed again, for the ensuing month, two successive doses of the same remedy in the same potency, each dose to be taken at a fortnight's interval at bedtime.

On the 26th December, the patient was seen again in consultation. The mother informed us that the last attack occurred on the 18th November, that is to say, exactly four days after taking the dose of *SILICA* 200. Since then, that is to say 6 weeks, the epileptic fits had not occurred again.

In order to consolidate the amelioration obtained, we prescribed this time a simple dose of *SILICA* 1,000, to be taken at the time of the new moon in December, that is to say, for the year 1935, on 27th December, in the evening.

The mother brought us the child for the last time in the course of February, 1936. She informed us that her daughter had had no fits since the 18th November of the preceding year, that is to say, for the last two

months. This was the first time, for the last seven years, that this young patient had had such a long respite. We may add that concurrently with the amelioration on the physical plane there had also been a welcome modification of the psychological deficiencies. Her disposition had been transformed and the fits of anger had occurred but rarely.

Such are, briefly summarised, two short observations, the first of an acute case, and the second of a chronic one, both of which showed clear indications for homœopathic treatment.

We have condensed them in some measure so as to point out the signs indicating certain homœopathic remedies and to lay stress on the symptoms whose assessment led naturally to their prescription.

CHAPTER VII

HOMŒOPATHIC EXPLANATION OF THE TWO CASES

1. *Reasons for the prescription in the acute case*

We have chosen the first observation relating to a grave streptococcal infection in a child because the signs presented by the young patient had such clear characteristics that they called for the remedies which were judiciously prescribed. A clear understanding of their mode of action will follow when we have set out succinctly the pathogenetic signs proper to the three remedies indicated and assessed the symptoms for which they were prescribed.

The objection might be raised that the modern treatment with antibiotics (Penicillin, etc.) applied in clinical cases similar to that (Case 1) which has been described above, enables one to obtain the same results. We do not propose to discuss at this stage the obvious value of this particular therapeutic method which has proved its worth, but we should like to point out that at the time when the patient in question was treated, these new remedies had not been discovered. Furthermore, one is justified in raising the question as to how long these latter remedies will prove to be effective. Only the future can give us a final answer. And lastly, we have adhered to our original intention in writing this Guide whose aim is essentially practical.

We have mentioned only one example of acute case to prove that, contrary to common belief, the homœopathic remedy acts in a rapid and effective manner in cases of this kind, and especially to give a clear idea of the mechanism of the homœopathic prescription, with its concomitant necessity of replacing the initial remedy as soon as the symptoms are modified, particularly when treating an affection of rapid evolution.

The practitioner has thus the possibility of acquiring a "living" experience of the affection he is called upon to treat. He is in a position to understand it better for his attention is kept alive by the slightest new symptom appearing in the course of its progress which will lead him towards the next medicinal stage.

2. *Pathogenesis and Application of Remedies*

Let us recall that in the first observation given the following remedies were prescribed successively: *Apis mel*, *Rhus tox.*, and *Kali bichrom.*

In the pathogenesis of each of these three remedies we shall deal only with the principal symptoms which led to their indication and application.

1. APIS MEL

Homœopathic experimentation on healthy subjects has shown that when a bee is killed and then triturated in lactose powder, the product acts on the tissues by causing oedema of the skin and mucous membranes. It is well known, of course, that a bee sting results in swelling of the affected part, local oedema, pain, intolerance of heat and of the least contact. The action of the venom may equally affect mucous and serous membranes by causing the same symptoms, hence the sensation of constriction experienced by the victim which will be observed in the patient for whom this remedy is indicated. It is thus indicated in the course of inflammation due to erysipelas, serous effusions and acute inflammation of the kidneys and other parenchymatous tissues.

In the present case, if we refer to the pathogenesis of *Apis*, we note a marked swelling of the uvula hanging like a sac between the tonsils; there is also swelling of the throat and of the glands corresponding to the affected part. The tonsils are enlarged and of a vivid red colour; the sensation of periglottic constriction is very marked and accompanied by stinging pains.

2. RHUS TOX.

Experiments made with this plant have led to the observation of very marked effects on the skin, the

mucous membranes and the ligaments. If the "provings" are continued the result is appearance of a febrile condition recalling, by many concomitant symptoms, typhoid fever.

In the case under consideration, the practitioner prescribed *Rhus tox.*, being guided by the following pathogenetic signs:—

Tongue: Furred, thick and white, except the tip, which was red.

Throat: Painful with adenopathy.

Right iliac fossa: Sensation of resistance on palpation, probably due to appendicular inflammation.

3. KALI BICHROMICUM

This salt affects the mucous membranes of the digestive system as a whole. When the upper respiratory system is involved in the experimental effects of this product, there results catarrh of the pharynx, larynx and nose with production of thick secretion, viscous and sticky. In the throat the tonsils are red and inflamed, the uvula oedematous and the tonsils, as well as the palate, may be covered with pseudo-membranes. This last symptom determined the prescription of the remedy whose indication followed that of the two preceding ones.

Reasons for the prescribed remedy in the chronic case

Why, in the clinical report of the case of epilepsy, was it considered necessary to prescribe *SILICA*?

Because this remedy covers, to use an expression common to Homœopathic Medicine, the great majority of important symptoms, and consequently represents the "similimum."

There is another fact to which we should like to draw attention in passing. While the nosological signs presented by the young patient called for the application of *SILICA*, in infinitesimal doses, the biological conditions of demineralisation also called for the prescription of this remedy. Here the objection could again be raised that only a ponderable dose is capable of making up for a deficiency of mineral salts in the organism.

We have discussed at length, in the course of the first part of our Guide, the value of the proper action of a homœopathic dose. In the case of the observation given above, we shall refer to this point again in this chapter.

Pathogenesis of SILICA

Before commenting on the observation, let us give a more extensive account than that outlined in the case under consideration of the principal symptoms constituting the pathogenesis of the remedy employed in that connection.

SILICA: Its chemical formula is SiO_2 . It is a combination of silicium and oxygen. Homœopathic experiments made with this product have given rise to the following symptoms: —

General Symptoms

Lack of physical reactions due to deficiency of assimilation processes; physical and nervous debility; loss of moral energy. Hypersensibility to cold, hence need of heat. Morbid conditions recurring periodically.

Mentality: The patient, if young, is timid, anxious, fearful, often stubborn and obstinate. He does not want to be approached or spoken to, and cries on the least provocation.

The adult suffers from want of self-confidence; state of neurasthenia, irritability and bad temper, discouragement over least failure, mental exhaustion and hypersensibility to the least noise.

Nervous System: Exaggerated reflexes; restless sleep, getting up at night, somnanbulism.

Attack of epileptic fits synchronising with the new moon.

Head: Large. In the very young child, the fontanelles remain open for a long time. Chronic headaches irradiating towards the occipital region and affecting the eye, generally the right eye. This symptom is ameliorated if the patient wraps up his head warmly.

Eyes: Inflammation and swelling of the lachrymal duct.

Nose, Ears and Throat: Chronic coryza, loss of

sense of taste and smell, nasal discharge, irritating and purulent. Recurrent sore throat with stinging sensation as if the patient had a needle stuck in his tonsils. Swelling of the parotid gland, foetid discharge from the ears, hypersensibility to low sounds.

Digestive System: Distaste of hot foods, intense thirst, abdomen hard and tense. Foetid diarrhœa in children, more often constipation with constant but ineffective desire; stools hard and partially expelled, constriction of the anus during defæcation.

Respiratory System: Violent cough with mucopurulent expectoration, thick and yellowish, especially when lying down. Weakness of the chest.

Genito-Urinary System: Nocturnal incontinence of urine in children. Suppuration of urinary tract; urine turbid and purulent. In women, sensation of intense cold during periods, which are always abundant; constipation before and after periods.

Locomotor System: Articular and muscular pains after exposure to draughts. Painful sensibility of vertebral column; pain in coccyx, weakness in limbs.

Skin: Pallor of teguments, waxy and sagging skin. Feet cold and damp with abundant sweating. Nails yellow and deformed.

Modalities: The symptoms are aggravated by cold, fresh air, at the time of the new moon and early in the morning. They are ameliorated by heat in all its forms.

Relationships: The remedies closest to *Silica* are *Pulsatilla* and *Chamomilla* by reason of circulatory troubles justifying the simultaneous prescription of the first, and of nervous troubles which call to mind the second.

Complementary: *Thuja*, which is one of the most important polychrests in the Homœopathic Materia Medica, and many symptoms of it are closely akin to those of *Silica*.

Clinical Indications: These are numerous but, as far as the case under consideration is concerned, we have to bear in mind troubles of growth, rickets and epilepsy.

Application of Pathogenesis

The first example of homœopathic treatment given about an acute case has made it possible to understand in a general manner the reasons for the homœopathic prescription and its technique.

We shall now proceed to analyse more fully the second observation concerning the chronic case.

Having established the two elements indispensable for the correct prescription of the remedy whose signs are most closely akin to those presented by the patient, it only remains to justify this by a parallel exposition of the pathogenetic symptoms and corresponding clinical symptoms as shown in the following table.

In the left column we have indicated the principal signs presented by the young patient which called to mind the remedy required whose pathogenetic symptoms appear in the right column.

CLINICAL CASE

Child aged 11.

Recurrent epileptic fits.

Fits occurring early in the morning.

Fits initiated by loss of consciousness followed by convulsions.

Pulsatilla, as relationship remedy (see Relationships).

It is interesting to note in this connection that the child had an attack of measles. *Pulsatilla* is one of the remedies indicated in such cases, and is in relationship

PATHOGENESIS

Remedy for growing young subjects.

Morbid conditions recurring periodically (see General Symptoms).

Aggravation of symptoms early in the morning (see Modalities).

Epileptic character of nervous attacks (see Nervous System).

with *Silica*.

The child contracted diphtheria, which was treated in the usual manner with serum. *Thuja* is a remedy complementary to *Silica* and is indicated following intolerance of vaccino- or serotherapy.

The patient has a pale and sickly appearance. The patient is weak with a narrow thorax and thin limbs.

Large head.

Edges of eyelids are red.

The child hardly answers questions. Mental sluggishness in learning and understanding things.

Clinical examination reveals marked abdominal distension.
Reflexes exaggerated.

Thuja, as complementary remedy (see Complementary Remedies).

Skin, pale and chalky (see Skin).

Lack of physical reactions. Physical debility (see General Signs).

Marked development of the head; late closing of fontanelles (see Head).

Inflammation of eyes and of angle of eyelids.

Subject timid, anxious and fearful, obstinate. Averse to being approached or spoken to. Irritable. Mental exhaustion (see Mentality).

Abdomen hard and tense (see Digestive System).
Reflexes exaggerated (see Nervous System).

As we have already stated in the course of the observation in question, the physical signs were practically nil or of little significance, apart from the abdominal distention and exaggerated reflexes.

In prescribing *Silica* in the case under consideration we were guided by the following indications:—

1. The important indication given by the periodical

appearance of the epileptic fits occurring every three weeks in a young subject, probably at the time of the new moon.

2. The particular mentality of the patient with her psychological reactions being closely "similar" to those of the remedy indicated.

3. The external appearance of the patient, the colour of her skin, and her static and dynamic demeanour.

4. The antecedents which made one think of the two complementary remedies of *Silica*.

5. Lastly, a modality sufficiently marked, expressed as an aggravation of symptoms in the early hours of the morning.

The therapeutic sanction obtained, following these manifestations, duly confirmed the choice of the remedy but this does not mean that *Silica* is always indicated in cases of epilepsy; the homœopathic prescription depending entirely on the symptoms observed concerning a given morbid affection, always remains strictly individual. Nor does it follow that every clinical case leads to such a simple conclusion and that Homœopathy resolves itself into mere memorisation of the *Materia Medica* making it possible to prescribe remedies in an almost automatic manner. Far from it. But as the chief aim of our Guide is to make Homœopathic Medicine easy to understand, we have purposely chosen an example which can be analysed without difficulty in order to give the reader a better grasp of the principles involved.

HOMŒOPATHY—COMPLETE MEDICINE

The disciples of Hahnemann have often been reproached that they are not clinicians and that their treatment is merely symptomatic since their whole method seems to be entirely based on a knowledge of "signs" which are characteristic of the remedy to be prescribed. Anyone, therefore, without any special knowledge, could practise Homœopathy!

This is a gross error, which is made clearly

apparent in the numerous failures experienced by the uninitiated, especially if they have no medical qualifications.

The most exact determination of the remedy to be prescribed calls first of all for a spirit of observation of the highest order which is a quality possessed by every good medical practitioner. Moreover, the prescription of a remedy, in order to be in strict accordance with the signs presented and the affection to be treated, often necessitates laboratory examinations or radiographic confirmation, for the clinical facts observed lead automatically to a diagnosis requiring confirmation. It is the sign or the sum total of signs which express significantly a functional disorder. Their significance and biological correspondence must be assessed with a view to making a correct diagnosis while individualising the patient in regard to his temperament and constitution. These two factors play an important part in Homœopathic Medicine and they rest on a basis which is fully considered in standard textbooks. The choice of a remedy finds a natural place in this synthesis but with the difference that the remedy is applied not so much to the morbid affection properly so-called but to the patient himself. As Dr. Vannier has most aptly remarked: "The symptom is not only a clinical sign, it is also a therapeutic sign." The latter will have all the more value in proportion to the thoroughness of the patient's observation.

In the case under consideration the sum total of the signs observed in the young patient leads us beyond the phenomenon of the epileptic fits, being a secondary symptom from a biological point of view, to the observation of a state of demineralisation, constituting the real starting point of the signs presented which finally disappeared when treatment was aimed at their actual cause whereas the barbituric drugs prescribed in this case had no effect. And yet, we were guided only by symptoms but with the difference that Homœopathic Medicine interprets them within an individual framework.

The treatment is indeed symptomatic but the symptoms constitute only a working tool, as it were, for the real determination of the nosological fact.

CHAPTER VIII

THE HOMŒOPATHIC PRESCRIPTION

We hope we have given, up to now, all that is essential for understanding the method of Homœopathy and undertaking its study with profit so as to be able to master the works which the student may feel inclined to consult if our exposition has stimulated his interest. There only remains for us to give the key to the homœopathic prescription so that the clinical observations reported in special publications may be familiar to the reader at the outset.

We have noticed on many occasions the difficulties experienced by the practitioner with an orthodox training in interpreting a prescription written by a homœopathic colleague. The number of patients treated by Homœopathy is increasing more and more and it happens now and again that a patient, for some reason or other, shows a homœopathic prescription to his own doctor or to a specialist. It would seem that for them there is a special interest in being able to understand the significance of the remedies prescribed which might sometimes enlighten them as far as treatment is concerned.

Generally speaking, the homœopath has, for each remedy, an extremely wide range of potencies available, from the first or second decimal (1x or 2x) to the hundredths (100, 200, etc.). The potency to be prescribed depends on the clinical case under consideration.

ACUTE CASES AND ORGANIC DISORDERS

As a rule, one may say that in an acute case or in a case where the organic trouble is more significant than the functional one, a low potency of the remedy indicated should be prescribed, that is to say ranging from the first to the sixth centesimal (1c to 6c), representing a remedy whose active principle is still fairly close to the original mother tincture or trituration.

In the acute case which we have chosen, as an example, the practitioner prescribed successfully his three remedies in the 6th centesimal potency. Their action being rapid, one remedy must be replaced by another as soon as the clinical signs presented by the patient undergo a change and consequently call for another pathogenesis.

In feverish cases, for example, it is advisable to repeat the dose of the remedy every hour, two globules each time.

In cases of organic lesions, a low potency of the remedy should be repeated each time, but its administration is often continued for several weeks until an amelioration of the morbid affection is observed.

CHRONIC CASES AND FUNCTIONAL DISORDERS

In chronic cases, on the other hand, the medium (30c) or high potencies (100c) are the rule and the potency of the remedy prescribed must be raised in proportion to the predominance of the psychological signs presented by the patient.

It is for this reason that in the case of the young patient suffering from epileptic fits we prescribed a high potency of the remedy indicated by the signs presented (being guided especially by the mentality). In this patient the symptoms in the psychological sphere were, in great measure, responsible for our choice in the determination of the remedy to be prescribed.

The use of these remedies is more restricted than that of the others and must be equally modified as soon as the functional troubles reveal other indications.

In the example of the clinical case of epilepsy, the doses of *Silica* were prescribed at the rate of only two doses a month, and they were not modified for the indication remained the same.

In principle, as well as in practice, a high potency may be given once a week; a medium potency, once or twice a day, but always bearing in mind that the remedy may have to be replaced as soon as the signs presented by the patient are modified.

DETOXICATION

In order that homœopathic treatment may have a deep effect on the organism it must be supplemented by the concomitant administration of detoxication remedies. These act on the emunctories (excretory organs) and ensure detoxication of the organism which is always essential in the course of treating any affection. We have already discussed the technique of detoxication and defined the term in the Glossary to which the reader is referred. In brief, one may say that the detoxication remedy should be prescribed in a low potency (3c to 6c) and, generally, in a liquid form, in doses of 5-10 drops before meals.

MEDICINAL AGGRAVATION

It may happen sometimes, especially at the outset of homœopathic treatment, and in chronic cases, that certain reactive phenomena manifest themselves by producing an aggravation of the symptoms presented which, in our opinion, are due to an organic response to the treatment prescribed. The occurrence of these phenomena is a proof of the real efficacy of homœopathic remedies and it is well known to homœopaths under the name of "medicinal aggravation" which is but transient and indicating a favourable prognosis although it may sometimes alarm the patient. The best course to adopt in such a case is to discontinue the treatment prescribed and to give in its place the homœopathic remedy whose pathogenesis is most "similar" to the new signs observed. It will become apparent in observing the nature of these symptoms that there exists a relationship between the remedy which has caused its aggravation and that which will restore equilibrium. Thus, for example, a dose of *Sulphur* of high potency, especially if it is given without any preliminary detoxication, gives rise in the patient for whom it is clearly indicated, to the appearance of pathogenetic signs which call for the prescription of *Nux vomica*. Thus these two remedies have a close relationship. The excessive effects of the first are rectified by the second, and when the aggravation

symptoms have disappeared the original treatment may be resumed. These are peculiar subtleties in homœopathic treatment but we do not think they constitute insurmountable obstacles, and we are convinced that such slight reactions are actually beneficial and never assume a harmful character as is the case in some forms of medical treatment now in vogue.

CONCLUSION

Having accomplished our task we venture to express the wish that this conclusion may prove to be, in fact, an introduction that will enable an increasing number of practitioners to take up the study of Homœopathy. Although not so ancient as its sister, Allopathy, Homœopathy, nevertheless, is over a hundred years old, and in the course of a century it has proved its worth, having an impressive number of cures to its credit.

It must, of course, be admitted that Homœopathy, like any other therapeutic system, has its limitations which are expressed in the following statement. Homœopathic treatment, being essentially based on the law of similars, can only be applied to affections whose clinical signs are susceptible of being found in the course of experiments on the healthy subject; the understanding of pathogenesis leads to the understanding of the medicinal prescription.

It goes without saying that a gastric ptosis, for example, cannot be treated only with a homœopathic remedy; it is evident that something else must be done. Nor can a displaced vertebra be put back in its normal position by the application of homœopathic remedies even in low potencies. This applies equally well to any form of treatment.

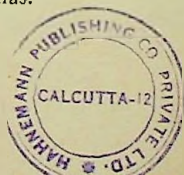
If one realises the limitations of the method and does not expect the impossible from Homœopathy, any more than one would from any other form of treatment, and if in addition to the first condition the mechanism of the correct prescription has been

thoroughly understood, then one may attempt, with every hope of success, to cure the patient without interfering with his biological integrity and respecting his personality as a thinking being, for, in the art of prescribing, this must inevitably be taken into account.

N.B.—As an introduction to the practice of Homœopathic Medicine the reader will be well advised to undertake the treatment of a few simple cases such as those described in our recent work entitled “HOMŒOPATHY IN 25 REMEDIES.”

BIBLIOGRAPHY

- HOMŒOPATHY IN 25 REMEDIES by Dr. E. A. Maury.
FIRST STEPS TO HOMŒOPATHY by Noel Puddephatt.
HOW TO FIND THE CORRECT REMEDY by Noel Puddephatt.
THE HOMŒOPATHIC MATERIA MEDICA: HOW IT
SHOULD BE STUDIED by Noel Puddephatt.
HOMŒOPATHY FOR THE FIRST-AIDER by Dr. Dorothy
Shepherd.
THE MAGIC OF THE MINIMUM DOSE by Dr. D. Shepherd.
MORE MAGIC OF THE MINIMUM DOSE by Dr. D. Shepherd.
A PHYSICIAN'S POSY by Dr. D. Shepherd.
ORGANON OF MEDICINE by Dr. S. Hahnemann.
MATERIA MEDICA PURA by Dr. S. Hahnemann.
CHRONIC DISEASES by Dr. S. Hahnemann.
THE PRINCIPLES & ART OF CURE BY HOMŒOPATHY by
Dr. H. A. Roberts.
THE STUDY OF REMEDIES BY COMPARISON by Dr. H. A.
Roberts.
SENSATIONS AS IF by Dr. H. A. Roberts.
THE PRESCRIBER by Dr. J. H. Clarke.
A DICTIONARY OF DOMESTIC MEDICINE by Dr. J. H.
Clarke.
A DICTIONARY OF PRACTICAL MATERIA MEDICA (3
volumes) by Dr. J. H. Clarke.
LECTURES ON HOMŒOPATHIC PHILOSOPHY by Dr. J. T.
Kent.
LECTURES ON HOMŒOPATHIC MATERIA MEDICA by Dr.
J. T. Kent.
REPERTORY OF MATERIA MEDICA by Dr. J. T. Kent.
KEY-NOTES & CHARACTERISTICS OF THE LEADING
REMEDIES by Dr. Allen.
LEADERS IN HOMŒOPATHIC THERAPEUTICS by Dr. Nash.
THE RELATIONSHIP OF REMEDIES by Dr. Miller.
THE TIMES OF REMEDIES by Dr. Boger.
MATERIA MEDICA WITH REPERTORY by Dr. Boericke.
HOMŒOPATHIC DRUG PICTURES by Dr. M. L. Tyler.
A SONG OF SYMPTOMS by Patersimilias.





HEALTH & YOU

A monthly magazine containing articles of interest to all those who wish to acquire a knowledge of Homoeopathy for domestic purposes.

Subscription 13s. 6d. for 12 issues.

Specimen copy 1s. 2d. post free from

HEALTH SCIENCE PRESS
Wayside, Grayshott, Hindhead, Surrey,
England

