

ESSENTIALS
OF
ORGANON

N. C. BOSE





*In conformity with the curriculum prescribed by the General Council
& State Faculty of Homœopathic Medicine, Bengal.*

ESSENTIALS OF HAHNEMANN'S ORGANON OF MEDICINE

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Essentials of Hahnemann's Organon of Medicine.

Preface.

To a student of Homœopathy, Hahnemann's "Organon" is what grammar is to a student of literature, and verily more. My "Aids to the Study of the Organon of Medicine" (now out of print) consisted of brief lecture notes basing on which discourses were given in the class to make the subject interesting and intelligible to my students. Compilation of such notes in a book form was, however, found to be too laconic for readers beyond the class room. Yet, the "Aids" was destined to receive testimony of appreciation from reputed professors and practitioners, as well as the students of Homœopathy.

I now venture to bring out this new work under the title of "Essentials of Hahnemann's Organon of Medicine", but I warn my readers not to take it as a substitute for that masterpiece of Dr. William Boericke's unique translation of the sixth edition of Hahnemann's Organon of Medicine, else they will be disappointed.

This work of mine is *amplification and annotation* of Hahnemann's monumental work—the Organon—and it will certainly be profitable to read these two books side by side for proper conception of the science, art and philosophy of Homœopathy; and with a view to this method of study I have given cross references of Hahnemann's aphorisms at the head of each discourse.

With my apologies to the respective authors, I have added three appendices to this book, viz. "The Dangers

of Homœopathic Prescribing" and "Prescribing: Potency Selection"—by Dr. Elizabeth Wright Hubbard, M.D., and "Comparative Value of Symptoms in the selection of the remedy" by Dr. Robert Gibson Miller, M.D. Because of my having derived considerable benefit from these three articles I thought it would be vile selfishness to conceal these from my readers.

I hope this work will not miss the encouraging approbation of the Profession which my other works met with. Should the students and lovers of Homeopathy find it helpful to them I would consider my labour amply rewarded.

Calcutta,
July, 1945.

N. C. Bose.

Corrigenda.

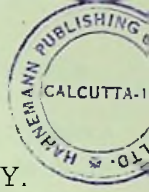
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A BRIEF BIOGRAPHY OF THE FOUNDER OF HOMŒOPATHY.

For the valuable information contained in the following biography of Hahnemann, the author expresses his grateful acknowledgements to the late Dr. Willmar Schwabe of Leipzig who very kindly supplied these some 50 years ago.

Samuel Hahneman was born on the 10th of April 1755, at Meissen, in Saxony. His father's means were limited, but he laid the foundation of a good education, so that the boy, who was eager for learning was, in his twelfth year admitted to the State Latin School in the town; and the same tenacity and perseverance, the same ardour which Hahnemann exhibited throughout his whole life, he already showed as a lad, making himself the favourite of all his teachers. In his fifteenth year, at the boy's earnest desire, he was sent to the celebrated Prince's School at Meissen. Here he received a classical education, which gave him that clearness of method on which the foundation of his important philosophical and practical knowledge was laid; and here he learned to employ his mother tongue with a finish and perfection which enabled him to acquire an excellent knowledge of foreign languages, and a brevity and power of expression of his own which has hardly been surpassed to the present day; and in this acquisition of foreign languages he obtained a thorough knowledge of the medical authors of the time.

In the spring of 1775 he left his School with honourable distinction, and went to the University of Leipzig with very insufficient means for entering on so expensive

a career ; so that he maintained himself in a scanty manner while at the University by translating English works into German and by giving lessons. Few have imagined that the Founder of Homeopathy was a poor man from his youth ; that so illustrious a man as Hahnemann, in spite of his great diligence, must often have suffered want almost to his sixtieth year, and that it was not till old age that he first began to reap the harvest of his exhausting labours.

After two years study at Leipzig he went on foot to Vienna to enjoy the clinical teaching of the then famous Dr. Quarin who was private physician to the Emperor and of whom he afterwards always thought with gratitude. "I am indebted to him", he said, "for all that a physician could have taught me." Owing to his being cheated of his fee by a bookseller to whom he furnished translations, he was at the end of twelve months, compelled to relinquish his studies at Vienna, and to take an engagement as private physician and librarian to the governor of Transylvania. In this position he found the time requisite to perfect himself both theoretically and practically, and on the 10th. August 1779 to take the degree of Doctor of Medicine at the University of Erlangen ; and his thesis on this occasion, on the causes and treatment of cramp, "*Confectus adfectuum spasmodicorum eatiologicus et therapeuticus*" shows that his thoroughly scientific education, which his enemies have sought to disparage, is incontestable.

After obtaining his degree, he was engaged in busy practice in various States of Germany for ten years, and during this period he had adequate experience of the miserable condition of the practice of medicine, and even-

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tually felt such aversion to the prevailing methods that he almost entirely relinquished active practice, occupying himself in the literary world in the provinces of chemistry and pharmacy, earning within a brief time a not unimportant reputation as an author. His work on 'Poisoning by Arsenic' was declared by universal criticism to be "an excellent and classical work". "On the distinction between Genuine and Adulterated Drugs" was without hesitation proclaimed *indispensable to the medical and pharmaceutical knowledge of the time*; his Druggist's Lexicon became esteemed as "classic"; his Guide to the treatment Suppurating Wounds and Ulcers was praised by critics as "thorough and well written"; not less his Instructions to Surgeons on Venereal Diseases was noted as "the work of a man of intelligence and education" and as exhibiting "wealth of knowledge and maturity of judgement". In the province of chemistry he also displayed practical skill and discovered a method for the detection of the adulterations of wine which has become known as *Hahnemann's wine test*; and one of the best preparations of mercury to this day bears his name as *Mercurius solubilis Hahnemanni*.

Hahnemann began openly to criticise the proceedings of his colleagues with inexorable severity, and charged the private physician of the recently deceased Emperor Leopold the Second of Austria with being the cause of his death from the employment of excessive blood-letting in pluerisy. Hahnemann was called unjust and unprofessional, but no physician of the present day would venture to make four copious bleedings within twenty-four hours from an old man like the Emperor Leopold, and every one must now

agree with Hahnemann. Besides this, he protested against the practice at that time employed with the insane, whom the doctors and attendants treated like wild beasts. He announced that "he would never punish a maniac with blows or any other painful corporal punishment, for invalids of this description required pity, and their disorders, instead of being benefited, were always much aggravated by cruelty." This opinion, enunciated by Hahnemann over a century ago, has now met with universal medical acceptance. In addition to this, he opposed the medical traditions of his contemporaries, and called on them "to free themselves from the shallowness, the indecision and the fallacies of the ancient teachers of materia medica and to throw off the yoke of ignorance and superstition." Above all, he insisted, the physician should not prescribe several medicines mixed together, but should ascertain with exactitude which medicine should be ordered in each case and prescribe only that one at a time. "The mind of man" said he "can only grasp one single object at once. How then can it bring the art of healing to a certainty if against one disease alone a compound of various powers is intentionally employed, of which not one ingredient has its action by itself well understood, and much less if given in combination! Every compound prescription is therefore an obstacle to the art of healing." "The physician does not sufficiently distinguish between each individual case of disease, and hence seeks help in a combination of remedies, wherewith the light he has becomes thick darkness." In addition to this Hahnemann challenged his contemporaries to obtain information of the action of

medicines by testing them on healthy persons. These attempts at reformation became by degrees more objectionable to the profession, and if Hahnemann was not met with open contradiction, the press, which had previously extolled him, now remained silent.

He, however, proceeded undeterred on his path, and proclaimed these novel and important propositions :

1. What is the pure action of each medicine in its different doses in health on the human subject ?

2. What does the observation of this action teach in each case of simple and of complicated disease ?

He demanded, instead of the purposeless methods in vogue, an investigation of the action of each medicine obtained on the healthy human subject, as well as its relation to each organ of the body both as regards the primary and secondary actions and he hoped by these provings to obtain the correction of many accepted errors which had existed respecting the mode of action of drugs. Thus, for example, he investigated the action of Peruvian bark as a proof of his theory, for it was at that time believed that its curative influence in ague resulted from tonic action on the stomach ; Hahnemann, on the other hand, asserted that "substances which excite a species of fever, as very strong coffee, arsenic, ignatia, etc., destroy the types of ague". This assertion depended on practical experience, for with four drams of Peruvian bark which he had taken he produced symptoms resembling those of intermittant fever, but he expressly observes "without actual cold shivering" ; he did not say that he had produced an actual fever, but "beating in the head, palpitation of the heart, redness of

the cheeks, dulness of the senses, hard and rapid pulse, depression, etc." Many patients who have taken a full dose of quinine, have had precisely the same symptoms appear as Hahnemann observed, and probably considerable buzzing in the ears. Hahnemann was far removed from forming his doctrine on one experiment alone, but carried on his investigations with other remedies, and arrived at the conclusion that one medicine at a time should alone be administered in order to act directly on the diseased parts and support the healing power of nature, while his contemporaries sought to relieve congestion, expel acrid and bad humours, and unburden the organs of morbid, excessive, accumulated and inflamed blood, by alteratives, resolvents, tonics and astringents which mode of treatment Hahnemann described as "taking, in a dark wood, a path which ends in a precipice."

In 1805 Hahnemann published a work in two volumes "Fragmenta de viribus medicamentorum positivis sive in sano corpore observatis", and in Hufeland's Journal vol. 22, his *Medicine of Experience*. This last work is the actual forerunner of his "Organon of the Healing Art". In this he enunciated his theory of the action of medicines; that two irritants which have great resemblance to one another exist together in the living body, but that the stronger destroys and expels the weaker; and hence, against the existing natural irritant of disease, another disease-producing power, of similar action to that the disease exhibits, must be opposed. And for this purpose, in order to know the action of medicines, it is necessary for physicians to have them thoroughly investigated by careful provings on a large

number of persons in health, and that by this and no other mode could knowledge be obtained of their action. Thus, by the inductive method is the key discovered, which alone is valuable at the bed side, and which raises the treatment with homeopathic specific remedies to an exact method ; here lies the central point of Hahnemann's reform, while all farther opinions attached to it, although in harmony with the spirit of the times in which he lived were but secondary or erroneous. His doctrine of the "specific" action of drugs was not appreciated by his contemporaries, for they understood by it, as it is understood at the present day by the profession, medicines which are in reputation for treating diseases known under assigned names, as for example, rheumatism of the joints, gout, etc. But with Hahnemann the term does not signify the general application of the name in old physic, but a something special which is subordinate to the individuality of the case, and on this ground he repudiated the use of names assigned to diseases. The application of homeopathic specific remedy has no influence on such diagnosis based upon names. Hahnemann truly observed that, of the names of diseases which were employed at the beginning of the century only few were still in use ; and it may be also noted that many of those which were generally current twentyfive years ago, and were esteemed as scientific, are today obsolete ; similarly will the majority of the terms in present nomenclature which refer to pathologico-anatomical products, be disused in the future. Hahnemann's is a biologicomedical method of treatment.

Hahnemann did not, however, merely limit himself to

stimulating this reform of the theory of medicine, but he also undertook the practical task of proving a series of remedies, on himself and his friends. The result of these provings is contained in his *Pure Materia Medica*, a work in six volumes which appeared during the years 1811 to 1821, at the same time that he was engaged as a private teacher in the University of Leipzig. On reading the provings in the above-named work it appears remarkable how technical terms are carefully avoided. It is written in honest German. Hahnemann was not satisfied to state that a remedy produced the symptoms of inflammation of the lungs, etc., but he noted conscientiously every symptom which appeared after medicinal substances had been taken into the human organism. No subjective symptom complained of by the prover failed to appear in the list, and their appearance in order of time is carefully noted.

When it is now considered what ignominy Hahnemann and his followers directly suffered from the potentizing of medicines, and how the master himself, owing to the enmity of the druggists (who in Germany form a strong guild) to the small dose which produced so small a profit, was obliged to prepare and administer his own medicines, and was denounced and driven from place to place, it is difficult to express an adequate feeling of indignation at the treatment he experienced. The violent attacks which have been made on the doses of homeopathy, such as that the whole world had not sufficient water to form the 30th potency, but that a watery globe of a diameter reaching from the earth to the dog-star would be requisite, are now unhasitatingly seen

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to be foolish, specially if it be considered that the human system requires only an atom of medicine to be employed in order to cure, and that many drugs which are taken appear again in the urine. It is well-known that in the last century three celebrated mathematicians, d' Alembert, Maupertius and Euler discovered, through the differential calculus, the economic law of nature from which it is found that she at all times and everywhere works with the smallest quantities ; and it is by similarly reckoning by means of infinitesimal quantities that the greatest problems in applied mathematics, astronomy etc. are solved. It is further known that a measure of milligram, one thousandth part of a grain contains a number of molecules amounting to about sixteen trillions, and that the diameter of a single molecule between the spaces, which are estimated to be similar, amounts to the two and a half-millionth of a millimeter. We know further that the body of no living creature is a chemical retort, in which masses alone are acted on, but that *molecular action is the basis of vital action*. The capacity for movement increases if the molecules have a larger sphere for activity ; the attenuation, the separation of molecules, thus acquires increased activity and energy. This is seen daily in the similar action of steam in the aggregate condition of freed atoms of water, of which 80 cubic inches suffice to draw a train of 300 tons a distance of 50 miles in two hours.

Besides this, the action of a medicament dissolved in water and its molecules separated, can easily be demonstrated by experiment. If, for example, one part of common salt be dissolved in nine parts of water, the salt molecules

extend over a space ten times larger than before, giving them ten times the area for movement, and the question is merely whether the molecules are put into movement or not. A vessel containing this solution of salt is now connected by a tube with another vessel containing water only, and the molecules of salt in the one vessel will then travel to the other until the two fluids contain a solution of equal quantities of salt. This procedure is called the Process of Diffusion, and the same process is taking place continually in the body ; for unless, for example, the blood is supplied similarly with oxygen, etc., life cannot be maintained. From the above experiment it follows that a liquid remedy dissolved in a suitable medium possesses unlimited power of extension ; that the molecules of this material are proportionately distributed in solution ; that this subdivision is not destruction, but the very opposite ; and that the molecules freely circulate between the particles by pendulum movement and by axial movement. If a dense solution of salt be employed, the process of diffusion is obstructed ; but if it be desired to increase the process, *the weaker the solution the more effectual is the diffusion*. For, in a ten per cent solution of salt, one-tenth only of the space is occupied by the salt, and there is nine-tenths of the space remaining for the movement of the salt ; while in a one per cent solution, there is one part of the mass and ninety-nine parts of space are left for movement, What takes place with the salt, also occurs with all solutions and especially with the molecules of drugs which are subjected to the process of potentization. What reasonable man can say that the potentized medicine should not develop extra-

THE FOUNDER OF HOMŒOPATHY

ordinary powers in the body if it is administered under the definite conditions of the law of similars ?

Hahnemann was finally driven from Leipzig by the fury of the druggists, and willingly accepted an invitation from the Duke of Coethen, in the year 1821, to be his private physician. Thus, not until he was advanced in years that Hahnemann was freed from the struggle for his daily bread, and he was able by preference to devote himself to practice in a serene evening of life. The character also of Hahnemann was strong, and he was a born leader of men. After he had laid a solid foundation for re-constructing medicine as a science by the publication of his *Organon of the Healing Art* and his *Pure Materia Medica*, he issued his valuable *Chronic Diseases*.

In the year 1835 he married for the second time, and settled in Paris. Here he became prosperous and was held in high esteem and veneration by a large circle of patients. He died at Paris on the 2nd of July 1843, and twenty years later his medical followers erected a monument to him at Leipzig.

EDICTS OF MEDICINE

“Medicine as commonly practised (allopathy) knows no treatment except to draw from diseases the injurious materials which are assumed to be their cause. The blood of the patient is made to flow mercilessly by bleedings, leeches, cuppings, scarifications, to diminish an assumed plethora which never exists as in well women a few days before their menses, an accumulation of blood the loss of which is of no appreciable consequence, while the loss of

blood with merely assumed plethora destroys life. Medicine as commonly practised seeks to evacuate the contents of the stomach and sweep the intestines clear of the materials assumed to originate diseases".

* * * *

"Whenever it can, it employs, in order to keep in favour with its patients, remedies that immediately suppress and hide the morbid symptoms by opposition (contraria contraries) for a short time (palliatives), but that leave the cause of these symptoms (the disease itself) strengthened and aggravated. For the same object the experienced allopath delights to invent a fixed name, by preference a Greek one, for the malady, in order to make the patient believe that he had long known the disease as an old acquaintance, and hence is the fittest person to cure it."

* * * *

"It seems that the unhallowed principal business of the old school of medicine (allopathy) is to render incurable if not fatal the majority of diseases, those made chronic through ignorance by continually weakening and tormenting the already debilitated patient by the further addition of new destructive drug diseases. When this pernicious practice becomes a habit and one is rendered insensible to the admonitions of conscience, this becomes a very easy business indeed".

* * * *

"Homœopathy sheds not a drop of blood, administers no emetics, purgatives, laxatives or diaphoretics, drives off no external affection by external means, prescribes no hot

EDICTS OF MEDICINE

or unknown mineral baths or medicated clysters, applies no spanish flies or mustard plasters, no setons, no issues, excites no ptyalism, burns not with moxa or red-hot iron to the very bone, and so forth, but gives with its own hand its own preparations of simple uncompounded medicines which it is accurately acquainted with, never subdues pain by opium, etc.,"

* * * *

"The cause of a thing or of an event, can never be at the same time the thing or the event itself".

* * * *

"In searching for the obscure do not overlook the obvious."

* * * *

"Medicine has been swallowed up by the laboratory. It has lost its way in a bewildering maze of unnecessary details and technicalities."

* * * *

"We outrage nature instead of obeying her."

* * * *

"The present routine treatment of countless diseases with serums and glandular extracts, artificial sunlight, etc. may be compared to the indiscriminate treatment of the past by bleeding and purging."

* * * *

"The search for the associated germ is not of fundamental importance. Most of the diseases of civilization are not microbic diseases proper, but are diseases caused by faulty methods of living, and cannot overcome them by

pseudo-scientific tricks and dodges, for we cannot cheat Providence. If we sin against Nature we have to pay the penalty."

* * * *

"In a serious case a small army of specialists may be called upon to ascertain the cause of disease which may be obvious to an intelligent practitioner unaided by science. An unintelligent practitioner will probably not recognize the cause of the disease, and the reports sent to him from the laboratory-men may merely confuse and mislead him. After all, medicine is rather an art than a science."

* * * *

"The sensitive index finger of the experienced doctor can give far more valuable information than all the instrumental methods in the world. It is truly amazing to see the modern cardiologist (heart specialist) getting his assistant take an X'ray photograph of the heart and an electrocardiogram, and even a blood-pressure reading, and then to behold him sitting down to study these reports. It is hard to realise that the practice of medicine could have become so futile and ineffective."

* * * *

"An impressive personality inspiring faith is an invaluable asset to the physician."

* * * *

"After all, patients demand that their doctor should be upto date and use the latest fashions in treatment described in the lay press, exactly as they demand the latest fashions in clothes and hats."

ESSENTIALS OF HAHNEMANN'S ORGANON OF MEDICINE

Hahnemann's Organon is a codification of the laws of cure, the true healing art as discovered for the first time by Samuel Hahnemann. Organon is a German word signifying a body or instrument of rules and canons for regulating scientific investigations.

Hahnemann's organon of medicine consists of 291 aphorisms or paragraphs in his 6th edition as published by Messers. Boerick & Tafel. There are four main divisions of this code, *viz.*, 1. The principles of the treatment of diseases under the laws of homœopathy. 2. Knowledge of disease, the method of acquiring same. 3. Knowledge of medicines, preparation of these for therapeutic use. 4. Knowledge of the proper method of employing the medicines for curing diseases.

Paragraphs 1—71 explain the science and principles of Homœopathy.

- „ 72—104 explain the method of acquiring true knowledge of disease.
- „ 105—244 contain rules for acquiring true knowledge of medicines, and their therapeutic use.
- „ 245—258 contain directions for using remedies for curing the sick.
- „ 259—263 deal with diet and regimen.
- „ 264—271 contain the homœopathic pharmacy.

Paragraphs 272—285 deal with regulation of doses and modes of administering them.

„ 286—291 deal with electricity, galvanism, magnet, magnetism, mesmerism, massage and bath.

SCIENCE AND PRINCIPLES OF HOMCEOPATHY.

Life is not will-o-the wisp. It has a purpose, and that purpose is not mere vegetating existence. Man is born with higher purposes of existence for which he is sent on earth by his Creator. To fulfill those divine purposes one must keep his mind and body in a healthy condition which is only possible when we do not violate the laws of Nature. Unfortunately we violate nature too often, and thus become subject to ills of body and mind, natural and artificial ; natural ills are inflicted by Dame Nature who is extremely unrelenting on her delinquent creatures, and the artificial ills are foolishly yet devotedly acquired by us in keeping up with and adopting modern kaleidoscopic civilization.

As every living man has a purpose of existence, so every man with a profession has a purpose, a mission in life which he should honestly preach and act up to in his day to day work. He may be a bishop, a physician, a cobblar, a barbar, etc. but each has a mission, with which his acts and words must harmonize.

NOW. WHAT IS THE MISSION OF A PHYSICIAN ?

§ 1

Hahnemann opens his codification of the laws of cure, the true healing art, with the first aphorism of the Organon, that *to restore the sick to health is the physician's high and only mission.*

METHODS OF CURE

In his foot-note to this first aphorism Hahnemann pointedly asserts that to cure means nothing short of restoring the sick to health. It is of no use to the physician, and very much less so to the suffering humanity, indulging in empty speculations and hypothesis or employing his faculties in the fruitless attempt in discovering the essential nature of the vital processes and how diseases *originate* in the invisible interior of our organism. By the way, X'ray makes it possible for skiagraphing this interior, but the skiagram only reveals the resulting ultimate, not the origin. Instead of wasting his time and talent in such futile endeavour, let the physician find out how he can restore the sick to health. Transitory removal of the disease symptoms, temporary relief of the pains and troubles of the diseases can not constitute cure or restoration of health. When we say restoration of health, one would like to know what is health.

Health is natural and harmonious state of the bodily organs and of the mind of an individual, as regards both sensations and functions. It is a state of harmony between the person as a whole and the cosmos. A deviation from this is tantamount to disease. In human society, health of all individuals do not bear the same standard. The standard of normal health differs according to race, climate, heredity, occupation and mode of living.

Thus, the first aphorism indicates the duty, the mission of the person who adopts the medical profession and calls himself a physician. The following questions now spontaneously arise :

2. What is the highest ideal of cure and how to accom-

plish it? In the second aphorism Hahnemann elucidates the highest ideal of cure and forcefully specifies the inviolable process of accomplishing same, in order to treat his patient for the restoration of his health. It is not palliation of pain alone, neither the removal of only a few symptoms out of the many manifested by the disease, nor the transference of the disease-symptom from its original site to some other location and in some other form (these metastatic affections, that sooner or latter, but invariably appear caused by such mode of treatment, are always worse than the original malady), thus deceiving people by saying that the first disease has been cured and it is quite a new disease now attacking the patient.

Hahnemann enjoins four unambiguous methods by which diseases are to be cured :

(i) It must be done in the shortest way.

(ii) It must be done in the most reliable way, *i. e.*, the effect of the cure may be depended upon, and not that the disease will reappear in its original form or in a new form. It must not be deceptive.

(iii) It must be done in the most harmless way, *i. e.*, without inflicting injury to the patient's health by causing violent vomiting or producing hurtful evacuations, by depleting the vitality of the patient with blood-letting, cupping, leeches, issues, setons, etc. seeking to draw off some imaginary *materia peccans* from the diseased body. The process will not be such as may cause immediate or remote injury to any of the organisms of the patient, or in any way weaken the vital strength further than what has been done by the disease.

QUALIFICATIONS OF A PHYSICIAN

(iv) It must be done on easily comprehensible principles.

Hahnemann abominates all attempts to give countless explanations regarding the phenomena in diseases and their proximate cause (which must ever remain concealed), explanations deliberately wrapped in unintelligible words and inflated abstract mode of expression which should sound very learned in order to astonish the ignorant, and also those subtle and sophistic expositions of incomprehensible and arbitrary *systems* of treatment based upon no proved law of nature.

Thus the whole process of an ideal cure becomes reduced to three injunctions :

1. It must be rapid, gentle and permanent restoration of health.

2. It must be the removal and annihilation of the disease in its whole extent.

3. It must be done on easily comprehensible principles.

Now, to accomplish all this, what should be the qualifications of the physician so that he may be a true practitioner of the art of the healing ?

§ 3—5.

In the 3rd aphorism Hahnemann asserts that the physician must possess the following qualifications and knowledge :

(a) He must clearly perceive *what is to be cured in diseases*. In every individual case of disease he must do the most minute individualisation to obtain accurately the

indication of the disease, and in this way alone he can have *knowledge of disease*. His perception must be free from and clear of any preconceived idea of the disease before him, conjectures that have been dignified by the followers of the predominant school of medicine with the title of *causal indication*, as such assumptions are too fallacious and hypothetical to prove of any practical utility.

(b) He must clearly perceive *what is curative in medicine, knowledge of medicine*. The physician must ascertain the real action, the sphere of medicinal effects, the power, so to say, of the medicinal substance; else he cannot conscientiously employ medicine for the cure of diseases:

(c) Having thus acquired the knowledge of disease and the knowledge of medicinal substance, the physician should know *how to select the most suitable medicine* which according to its mode of action, will be the most appropriate to the case before him. How to make this selection in conformity with the laws of nature, Hahnemann teaches in subsequent aphorisms of the Organon.

(d) He must know the *exact* mode of preparation of medicine as well as the proper quantity, the dose, to be administered, and the proper period for repeating the dose.

(e) In each individual patient where the effects of medicines employed are found to be tardy or inactive, the physician must be able to detect the obstacles that stand in the way of rapid recovery, and must be aware how to remove such obstacle for the purpose of permanent restoration of health.

If the physician possess these five qualifications then it

will be recognized that he understands how to treat judiciously and rationally, and he is a true practitioner of the healing art.

(f) Then, again, to complete his status, the physician must also be a *preserver of health*. In the next aphorism Hahnemann specifies how to earn this distinction.

The physician must possess knowledge of things detrimental to health and causing diseases in human habitations, as well as the method of removing such things from healthy localities, and the means of protecting healthy individuals from the influence of such injurious substances. He then will be recognized as the *preserver of health*.

We thus find that the science of public health and hygiene—the sanitary science—forms an important part of Hahnemann's homœopathic system of medicine.

Having discussed these preliminary qualifications of a physician Hahnemann now proceeds to consider *what constitutes disease and how to obtain complete and true knowledge of it*.

Disease is disturbance of health and may arise as natural events, or from accidents such as are remediable by the operation of manual surgery. We are not directly concerned with such surgical diseases at the present stage of our study.

Non-surgical diseases are divided into two categories, namely : *the acute disease*, and *the chronic disease*. When we come to study aphorisms 72 *et sequentia* we will see how these differ from each other and how they occasion and manifest themselves.

But, to cure either the acute or the chronic disease the physician must seek the help of *anamnesis* of every case of disease that he undertakes to treat.

In acute disease he must observe the particulars of its most probable *exciting cause*; while in chronic disease he must gather the whole history of the case so that he will be able to discover its *fundamental cause* which is always based upon some *chronic miasm*. Hahnemann deals with the nature of chronic diseases and particulars of chronic miasms in aphorisms 77 *et seq.*

In investigating the exciting cause of the acute disease, and the fundamental cause, especially when the case is one of chronic disease, the physician must take into consideration the ascertainable *physical constitution* of the patient, his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function, etc.. These investigations constitute *individualizing examination of a case of disease*, commonly known as CASE TAKING. In aphorisms 82 to 104 Hahnemann gives directions as to the proper and scientific method of case taking, as applicable to acute disease and chronic disease, and where he has embodied some model questions designed to achieve the purpose.

What is meant by physical constitution ?

Physical constitution is that state of an individual in which his economy has become so altered that it is susceptible to certain circumstances and influences. Dr. Small gives the following definition of it: "By temperament is meant the modification or influence that any one

class of organs or humours may exert when it predominates in the system." Physical constitution is the soil on which grow the idiosyncrasies, diathesis, susceptibilities, dyscrasias, etc., and it is either congenital or acquired. We find men of diverse temperaments, *e.g.*, Sanguine temperament, Nervous temperament, Bilious, Plethoric, Lymphatic, etc., We also meet with complex temperaments, such as, Nervous-lymphatic, Nervous-Bilious, etc. One can always discover some *chronic miasm* lurking under such constitutions. It is the duty of the physician to investigate and know it.

How to investigate and gain knowledge of such chronic miasm before commencing the treatment of a chronic disease, Hahnemann gives specific directions in aphorisms 205 *et seq.*

We, thus, find that the following particulars should be obtained to get the general preliminary view of the disease :

1. The ascertainable physical constitution of the patient (especially when the disease is chronic).
2. His moral and intellectual character.
3. His social and domestic relations.
4. His mode of living and habits.
5. His occupation.
6. His age, and (7) His sexual functions, etc.

In every individual disease what particulars should the unprejudiced observer (the physician) take note of to get a complete picture of the disease ?

§ 6.

In the very commencement of aphorism 6, the great medical jurist Hahnemann enjoins that the observer—the physician—must be *unprejudiced*, *i.e.*, he should proceed to investigate the case with a clear and open mind not clouded by any preconceived notion of ills dubbed with particular fancy names in books on pathology and practice. In Hahnemann's inimitable and immutable language, 'the unprejudiced observer is well aware of the futility of transcendental speculations which can receive no confirmation from experience—be his powers of penetration ever so great'. Hahnemann observes in the *foot-note* to aphorism 6: "I know not, therefore, how it was possible for physicians at the sick-bed to allow themselves to suppose that, without most carefully attending to the symptoms and being guided by them in the treatment, they ought to seek and could discover, only in the hidden and unknown interior, what there was to be cured in the disease, arrogantly and ludicrously pretending that they could, without paying much attention to the symptoms, discover the alteration that had occurred in the invisible interior, and set it to rights with (unknown!) medicines, and that such a procedure as this could alone be called radical and rational treatment."

When a man is sick the altered state of his body and the mind is reflected outwardly as signs and symptoms that are perceived externally by means of our senses. These are called disease symptoms and are divided into two principle groups, *viz.* :

(i) **SUBJECTIVE SYMPTOMS**: These are what the patient feels himself and relates to the physician.

PICTURE OF DISEASE

(ii) OBJECTIVE SYMPTOMS : These are morbid signs and phenomena observed by the physician and those around the patient.

What is the true and only conceivable picture of disease ? (Ref : Aphorism 7).

The true and only conceivable picture of disease in every individual patient may be formed by noticing the changes in the health of the body and of the mind which are possible of being perceived by means of our senses. These morbid phenomena are noticed in the following ways :

- (i) Changes or deviations felt by the patient himself.
- (ii) Those noticed and remarked by the people around him.
- (iii) Those that are observed by the physician.

On the occasion of the golden jubilee celebration of Saradeshwari Asram and Free Hindu Girl's School, Calcutta, founded by the late Sannyasini Gauri Mataji, a direct desciple of Sree Ramkrishna, on Sunday the 10th. December 1944, Sir Sarvapalli Radhakrishnan in his exquisite and inimitable language said : *Let us acquire all technical skill necessary. Let us also develop the civic senses of patriotism, the solidarity of working together. But do not imagine that mind's functions are exhausted when you have acquired these things. There is another side,—when you persue truth you create beauty, you discover new values. There are persuits which cannot in any manner be socialised. He explained further : We live in a world extremely material and phenomenal, measurable by scientific standard. Bui there is also a world invisible, which is more felt than seen.*

more perceived than observed—a world of spirit in which we are also citizens, where we get beyond the contingencies of this empirical world, where we feel that we are all equal so far as the citizenship of that world is concerned whatever may be our social stratification and the artificial restriction of our society or the difference of our psychological makeups and intellectual capacity. Whatever may be all these differences, let us take our stand that each man is made of individual bend and that he is a child of God and that God has given him the right to develop that side of his nature. If we are not able to develop this, all the other things will mean ruin and devastation." That is PERCEPTION. Hahnemann also means this perception, which is more felt than seen. In treating our patients, rich or poor, intellectually undeveloped or highly cultured, all must get our equal attention and sympathy; and we must reach into their world of spirit, with a sense of integration, to understand and assimilate the philosophy of Hahnemannian Homœopathy.

These morbid phenomena, accidents, symptoms, showing changes in the health of the body and the mind, represent the disease *in its whole extent*; that is, together they form the true and only conceivable picture of the disease.

"A single one of the symptoms present is no more the disease itself than a single foot is the man himself."

This *totality of the symptoms* must be the principal, indeed the only thing that the physician has to take notice of in every case of disease and to remove it by means of art, in order that the disease shall be cured and transformed into health.

§ 7—8.

In aphorisms 7 and 8 Hahnemann asserts the rational and radical treatment of disease in order to effect complete and permanent cure. What, then, constitutes a cure ?

In a disease, where there is no manifest exciting or maintaining cause (*causa occasionalis*—accessory circumstances or some chronic miasm) to be removed, nothing else but the morbid symptoms can be perceived by us ; and when all the symptoms of the disease, the totality of the symptoms and the entire collection of the perceptible phenomena have been removed, it means cure and restoration of health : and therefore nothing but health, no morbid alteration could remain uneradicated in the interior of the organism.

“The old school, still cherishing materialistic notions regarding diseases, would say—‘Homœopathy can remove the symptoms, but the disease remains.’ What else will the old school search for in the hidden interior of the organism, as a *prima causa morbi*, whilst they reject as an object of cure and contemptuously despise the sensible and manifest representation of the disease, these symptoms, that so plainly address themselves to us ? Except these, what else do they wish to cure in diseases ?”

Let us again quote Hahnemann : “When a patient has been cured of his disease by a true physician, in such a manner that no trace of the disease, no morbid symptom remains, and all the signs of health have permanently returned, how can anyone, without offering an insult to

common sense, affirm that in such an individual the whole bodily disease still remains in the interior?"

What do we comprehend by the exciting cause and maintaining cause of a disease ?

The causes may be either internal or external.

The internal cause, the *proximate cause* as it is also called, properly only refers to the general natural predisposition (idiosyncrasy)—a peculiar supersensitiveness. It relates to the physical constitution of the patient, either some dormant miasm, the consequences of some past acute disease, or the effect of some medicinal substance injurious to health.

When it is external, it embraces every thing that may produce disease, *based upon a predisposed constitution*. It may also be pure accidents, *e.g.*, sprains, contusions, burns and the like. Poisonings and medicinal diseases are also to be reckoned amongst external causes.

In disease we frequently meet instances where some exciting or maintaining cause must be removed for effecting cure, that is, for the permanent restoration of health. To quote Hahnemann, "It is not necessary to say that every intelligent physician would first remove this where it exists, the indisposition thereupon ceases spontaneously. He will remove from the room strong-smelling flowers which have a tendency to cause syncope and hysterical sufferings; extract from the cornea the foreign body that excites inflammation of the eye: loosen the overtight bandage on a wounded limb that threatens to cause mortification, and apply a more suitable one; lay bare and

MAINTAINING CAUSE

put a ligature on the wounded artery that produces fainting ; endeavour to promote expulsion by vomiting of belladonna berries, etc., that may have been swallowed ; extract foreign substances that may have got into the orifices of the body (the nose, the gullet, ears, urethra, rectum, vagina, etc.) ; crush the vesical calculus ; open the imperforate anus of the new-born infant, etc."

To illustrate the maintaining cause of a disease, I make present to the reader the following extract from Dr. Mahendra Lal Sircar's **Sketch of the Treatment of Cholera** : "In giving our prognosis of a case we must take into our calculation the influence of its surroundings. It is generally the poor who are the victims of the disease ; and the high mortality among them is greatly due to insanitary surroundings,—the dark, dingy, damp rooms in which they live and the insanitary condition of the locality in which their huts are situated, full of offensive, poisonous gases resulting from all sorts of decomposition. In some instances where I could remove the patients to better localities or even to better and more airy rooms I was instrumental in saving their lives. In one case it was a most valuable life, and I remember the event with lively gratitude to the Almighty for having permitted me to be so instrumental. This was in the early days of my practice, when I had heard of homœopathy only to denounce it, and the case was that of no other person than the late Babu Keshub Chandra Sen. He got cholera while he was occupying one of the lower apartments of his family house the windows of which overlooked a dirty bustee. He was under the treatment of the late celebrated Dr. Doorga Churn

Banerjea, and I was attending on the patient as a friend. The case was getting worse, and on coma supervening, I whispered into the ears of Dr. Banerjea that in my humble opinion the only chance for the patient was his removal, if that were possible, to an airy room in the third storey of the house. The doctor, for whom I had the highest respect, looking upon him as father and preceptor, and who loved me as his own son, happily agreed with my views, and without loss of time and with all possible care the removal was accomplished, and almost from the moment the patient began to rally, and lived to be one of the most distinguished Indians of the nineteenth century. In a second case, that of a Mahomedan female patient, the removal had to be done for more than a mile, and in my intense anxiety I had to walk along the *palki*, keeping my hands on the wrist of the patient. This case happily recovered. In a third case, that of a well-to-do Hindu lady, I had to carry her over six miles from Baranagar to her home in Calcutta. She also recovered. And I am sure, none of these cases would have recovered, had I not taken the risky step of removal, in one instance from the ground floor to the third storey, in another for over a mile through the streets of Calcutta, and in the third for six long miles. I shall never forget the intense anxiety I felt when helping in the removal. I have cited these cases to show the real influence which the environment of a patient exerts over the progress of his or her case, but I dare not advise the imitation of the practice I had adopted in counteracting it when deleterious."

The above excerpt has also a strong bearing on aphorism 4, which the reader should refer to once again here.

THE SPIRITUAL VITAL FORCE

§ 9.

“In the healthy condition of man, the spiritual vital force (autochancy), the dynamis that animates the material body (organism), rules with unbounded sway, and retains all the parts of the organism in admirable, harmonious, vital operation, as regards both sensations and functions, so that our indwelling, season-gifted mind can freely employ this living, healthy instrument for the higher purposes of our existence.”

§ 10.

“The material organism, without the vital force, is capable of no sensation, no function, no self-preservation ; it derives all sensations and performs all the functions of life solely by means of the immaterial being (the vital principle) which animates the material organism in health and in disease.”

These two aphorisms read together, form the main key to the temple of Homœopathy. In these, also, we find impregnated an immense store of precious philosophy and metaphysics not to be found in any medical literature of the west. And we are at once struck with deep admiration and reverence for his erudition in such highly arduous subject that bears complete affinity to the Vedantic philosophy of the Hindus. Yet, we do not know whether Hahnemann, the versatile scholar and linguist, had ever studied Indian philosophy.

Hahnemann says, “In the healthy condition of man.” Here he does not refer to the body or the mind. In

aphorisms 5 to 7 we have seen that these two, namely the body and the mind, are the vehicles through which the outward expressions of the disease are manifested. There must be, then, something prior to the body and the mind that is primarily deranged in sickness. It is that which keeps the material body alive, and without which the body is dead and is subject to the power of the external physical world ; the body decays and is again resolved into its chemical and elemental constituents. The cerebrum, the cerebellum and the spinal chord are there in the body even when life is extinct, but these have no function, and these are now only part of the whole cadavour ; and further, there is not the least trace of the reason-gifted mind in it. So, it is the vital force that keeps the material organism animated in health and in disease, and by means of which all sensations are derived and all functions are performed. In health the vital force is vigorous. In disease this vital force is really the curative power, being stimulated by the similar remedy.

**Why Hahnemann calls this Spiritual vital force—
“Autocracy” ?**

The vital force is the spiritual, self-acting (autonomous) principle everywhere present in man's organism which it animates and retains in harmonious vital operation, as regards both sensations and functions ; it is an invisible power, only realised by its effects on organism, both in health and in disease. While this immaterial dynamic power is undisturbed, man enjoys health, his mind thinks rationally and employs this living healthy material organism to the higher purposes of our existence. In disease this

dynamic influence is deranged to an abnormal state, which is expressed by disagreeable sensations and irregular functions manifested in the organism as morbid signs and symptoms.

Hahnemann calls it "Spiritual vital force." He is exquisitely discreet in his language and does not call it 'Spirit' or 'Soul', like careless people who are prone to interpret it as such. By his qualifying epithet-'Spiritual' he determines that this vital force—this immaterial dynamic power—is co-existent with our Soul, and it ceases to guide and control the organs of our material body and to keep it alive, as soon as the Soul departs from the body.

Hahnemann calls it *autocracy* because it cannot be brought under the sway and limitations of any law which man may frame to suit his convenience and pleasure. On the contrary, it has its own formulated law which man must abide by in order to enjoy the gifts of life, and in order that our reason-gifted mind may employ our organism for the higher purposes of our existence. Disregard this autocracy, the laws of life-principle, and you will be sick and invalid, mentally and physically, as if the purposes of our existence had been to remain sick until the material instrument becomes too unfit for the vital principle to utilize it any longer and which (the material body) perishes immediatly the vital principle ceases work. Dynamic power, dynamic influence is an immaterial conceptual energy which is only cognizable by the results of its action upon a substance. It is only a sensible connection between cause and effect, of which only a supra-sensual idea can be formed by cultured people.

In the "Jottings", February, 1929, (Boericke & Tafel), an

elegant illustration is given of the *Force Invisible*. It says, "You do not see the wind but you recognize its force when it sends your hat tumbling down the street. Neither can you see the medicine in a homœopathic potency, but it works just the same. You can see its effects which is all you ever do see of a force." We may likewise say we do not see the vital principle, but we can recognize its force in the metabolism of the body, in the normal and harmonious sensations and functions of the bodily organs and the mind.

Let us study, as briefly as possible, how Hahnemann's conception of Vital Force agrees with the teachings of Vedanta.

To study *Vedanta* it is primarily necessary to comprehend that human soul (Jiva) is identical with the Cosmic Soul (Brahman), the difference lying only in the name and form which are viewed as such due to *Maya* or ignorance ; and to dispel this ignorance and realise that identity, is the highest end of the Vedantist. Plurality of selves is only a product of ignorance, and not a reality. An individual living soul (Jiva) has its own limitations forged by the effects of its *Karma* in previous births plus the *Karma* of his present life, and when it exhausts and consumes all *Karma* (and their effects) he sees light dispelling its ignorance and revealing its identity with the Cosmic Soul, the Brahman ; only then that the Jiva merges in Him. Likewise, we find the Cosmic Vital Force and the Individual Vital Force, the latter being the sustenance of the Jiva. In considering our 'vital force' as introduced in the Organon of medicine we are not to traverse this highest region of Vedanta philosophy. Here we are concerned with our

existence in human sphere, so we shall now proceed to survey how Hahnemann's conception coincides with this section of Vedanta.

When Brahman wished to multiply himself and take the form of *Jiva*, He reflected : "By whose sojourn in the body shall I stay there, and by whose going out shall I depart."—(Prasna-Upanishad, 6, 3). Now he created the *Prana* (Vital force), and from *Prana* came out constancy, ether, air, fire, water, earth, the senses and sense-organs, food ; from food came vigour, meditation तपः (austerity), the Vedas, the hymns, the worlds, and in the worlds (स्य) were placed the names".—(Prashna Upanishad, 6. 4.). We, therefore, find that *Prana* is the first-born and thus it is appropriately called ज्येष्ठ, the eldest.—(Brihadaranyaka Upanishad, 6. 1. 1.). In Mundaka Upanishad, 2. 1. 3, we find the mention of *Prana* as produced from the Self.

The vital principle is also called श्रेष्ठ—the Chief *Prana*, because it functions prior to all other life-actions (also called *Pranas*, and why so we shall presently see) and senses. It is only for the action of this Chief *Prana* that the paternal seed is thrown into the maternal soil and there the seed fertilizes, develops and gets into shape, becomes a full-grown *Jiva*, and ultimately, on completion of the *Jiva*'s present cycle, the Chief *Prana* goes out of the body together with the Self (Brahma Sutra, 2. 4. 8.).

Then again we find that the Chief *Prana*—Vital principle—has fivefold function, displaying five diverse energies in five different regions of the body, viz : (1) *Prana*, in the region of mouth, nose, eyes ears ; (2) *Apana*, in the region (organs) of excretion and generation ; (3) *Samana*, midway

between Prana and Apana, *i.e.*, region of stomach and intestines for digesting and assimilating food by harmonious distribution of the food-essence. (4) Vyana, pervades all the nerves of our body ; its energy moves the nervous system and makes all parts of the body sentient. (5) Udana, it pervades the whole system and sustains it, and helps the Jiva to pass out of the body ; it also controls the subtle body (*लिङ्गशरीर*) in which the Jiva rests after leaving the physical body until it takes a new birth according to Karma. All these five forces are called *Parans* because they come from the same source, like all members of the same family taking the family-name.—(Prasna Upanishad, III. 5. 6. 7 ; and Chhandogya, V. 5. 15).

The five organs of sense, (*viz* : sight, smell, hearing, taste and touch) and five organs of action, *viz* : eyes, nose, ears, tongue and skin, together with *अन्तःकरण* (the inner organ) form the eleven organs of the Jivatman. *अन्तःकरण* consists of *मनः* (mind), *बुद्धि* (intellect), *अहंकार* (ego) and *चित्त* (attention and recollection), and these four are not separate organs but are only modifications of the inner organ. To these eleven organs some thinkers add four others, *viz* : hands, feet, anus and the organ of generation. All these, individually and collectively, are subordinate to the Chief Prana which is verily the support of the body and self (Brihadaranyaka Upanishad, III, 9. 26).

The autocracy and superiority of the Vital force is exquisitely explained by an allegory in Chhandogya Upanishad, V. 1. 7—15, and also in Prasna Upanishad, II. 1 to 7. In these places the Chief Prana (Vital force) is called *वरिष्ठ*, the supreme. From whatever limb the Prana goes, right

there it withers. At death, the functions of the mind get merged in Prana, and the functions of the Prana get merged in Jivatman.

The allegory runs thus : "The organs, once upon a time, disputing over their respective importance, each claiming to be the greatest, went to Prajapati for his decision. Prajapati said that they would easily be able to determine who is the greatest of them, if one by one they would go out of the body and stay away for a whole year, then return and ascertain how the body fared without him. So, the organ of speech went out first, and on his return he was told by the other organs that they lived in his absence just as the dumb people in the world live, doing all other vital functions through the Vital force. The eye, the ear, the mind, the organ of generation went out in their turn and came back to find that the other organs were functioning quite normally, the body living through the vital force. Now, the Vital force took his turn to go out. At this, all the organs of sense and action simultaneously became dislodged and disorganised, uprooted. They at once appealed to the vital force and entreated him to stay, as without him they would all perish. The Vital Force said that as they have now realised his pre-eminence they should pay homage and royalty to him. Each of the organs surrendered his individual attribute to the Vital Force who thus rules them with unbounded sway.—(Brihadaranyaka—Upanishad, VI. 1. 7 to 14).

Read once again Hahnemann's aphorisms 9 and 10, the essence of the philosophy of homœopathy ; and we will appreciate and realise it all the more when we come to

study his discussions on the manner in which man becomes ill, and the operation of medicine by which health is restored (Aph. 15, 16, 17).

VITAL FORCE & ILLNESS.

Now, the question spontaneously arises as to how a person gets ill, manifesting all the morbid symptoms, what we have studied in aphorisms 5, 6 and 7.

§ 11.

In aphorism 11 we learn that in disease the vital force is *primarily* morbidly deranged, and its sufferings due to the internal change are expressed by the abnormal sensations and functions of the organism. This derangement of the Vital principle is and can only be effected by the *dynamic influence* upon it of a morbidic agent inimical to life, to such an extent that it alters the condition and produces in the organism the disagreeable sensations and those irregularities which together are called disease ; in no other way can it make itself known. Hahnemann calls such effects *dynamic, virtual*, i.e., such as result from absolute, specific, pure energy and action of the one substance upon the other. The spiritual vital force is beyond the pale and limitations of matter, and cannot be affected by any alien external substance otherwise than in a spirit-like dynamic way. *Disease, therefore, is the dynamic effect of the sick-making influences upon healthy man.*

Is, then, a disease separate from the living organism and its animating vital force ?

As the uninterrupted vital force keeps the body and the mind in a healthy state, so the morbidly deranged vital force produces disease, expressing at the same time the whole morbid derangement of the internal dynamis. It is absurd to consider disease as a thing separate from the living whole, from the organism and its animating vital force. For sake of easy comprehension our mind separates this unity into two distinct conceptions.

The following transparent illustrations given by Hahnemann make this point perfectly lucid. “ * * The energy of a magnet attracting a piece of iron or steel is not material, not mechanical. One sees that the piece of iron is attracted by one pole of the magnet, but *how* it is done is not seen. The invisible energy of the magnet does not require mechanical (material) auxiliary means, hook or lever, to attract the iron. The magnet draws to itself and this acts upon the piece of iron or upon a steel needle by means of a purely immaterial, invisible, conceptual, inherent energy, that is, dynamically, and communicates to the steel needle the magnetic energy equally invisibly, that is, dynamically. Even at a distance when it does not touch the magnet, the steel needle itself becomes magnetic and it magnetises other steel needles dynamically with the same magnetic property with which it has been endowed by the magnetic rod.” Likewise, a child with small-pox or measles communicates to a near, untouched, healthy child dynamically, i.e., in an invisible manner the small-pox or measles, infecting it at a distance without anything material coming or capable of coming from the already infected child to the one to be infected.

The flood-tide and the ebb-tide which occur daily at certain hours, are the effects of an incognizable influence of the moon.

When we come to study the curative action of the homœopathic remedies we shall find that each indicated remedy becomes effective through its dynamic conceptual influence, its specific health-altering energy upon the conceptual principle of life.

Hahnemann asks : "If one looks upon something nauseous and becomes inclined to vomit, did a material emetic come into his stomach which compels him to this anti-peristaltic movement? Was it not solely the dynamic effect of the nauseous aspect upon his imagination? Is it then so utterly impossible for our age celebrated for its wealth in clear thinkers to think of dynamic energy as something non-corporeal, since we see daily phenomena which cannot be explained in any other manner?" Hahnemann thus queried over a century ago, but, alas! the intellect of the materialistic school of medicine has not improved in this length of time, and with provoking perversity it is still clinging to the grotesque idea of *materia peccans*.

§ 12.

We thus find that it is the morbidly deranged vital force that produces disease which is expressed at the same time by the morbid phenomena perceptible to our senses, representing all the internal change, i. e., the whole morbid derangement of the internal dynamis; it is not revealed there piecemeal, but in its entirety. Likewise, under treat-

ment all the morbid phenomena, all the morbid deviation from the healthy vital operations, disappear wholly, implying restoration of the integrity of the vital force and, therefore, the recovered health of the whole organism. It is the dynamic influence (or energy) of the medicinal substances upon the deranged vital principle which effects the restoration of health.

Hahnemann remarks : "*How* the vital force causes the organism to display morbid phenomena, that is, how it produces disease, it would be of no practical utility to the physician to know, and would forever remain concealed from him ; only what is necessary for him to know of the disease and what is fully sufficient for enabling him to cure it, has the Lord of life revealed to his senses." He further observes : "To treat judiciously and rationally, and to become a true practitioner of the healing art, the physician has not to construct so-called systems by interweaving empty speculations and hypotheses concerning the internal essential nature of the vital processes and the mode in which diseases originate in the invisible interior of the organism, whereon so many physicians have hitherto ambitiously wasted their talents and their time : nor is it necessary or befitting that he should attempt to give countless explanations regarding the phenomena in diseases and their proximate cause wrapped in unintelligible words and inflated abstract mode of expression which should sound very learned in order to astonish the ignorant, whilst the sick humanity sighs in vain for aid. The proximate cause must ever remain concealed from him." The findings of the clinical laboratory constitute only the results of the

disease, the disease ultimates, the symptoms, and not the cause. So, Hahnemann wailed that "we have had enough of such learned reveries to which the name of *theoretic medicine* is given, and it is high time that all who call themselves physicians should at length cease to deceive suffering mankind with mere talk, and *begin* now, instead, for once to act, that is, really to help and to cure." The *modus operandi* of the dominant school of medicine, even today, admits of repetition of Hahnemann's above quoted comment.

§ 13.

Hahnemann, without demur, pronounces that it is an absurdity to consider disease that does not come within the province of manual surgery, as a thing separate from the living whole, *i. e.*, the organism and its animating vital force, as lodged and hidden in the interior, however subtle its character may be ; such a monstrous idea can only be imagined by persons whose minds are of a materialistic stamp. For thousands of years the prevailing system medicine has abjectly yielded to the pernicious passion for locating in the invisible interior a phantomatic *prima causa morbi* and fanatically attempting to expel it, in utter disregard to the axiom that the cause of a thing or an event can never be at the same time the thing or the event itself ; such a practice has made that system of treatment a truly mischievous non-healing art. And in conformity with the infinite benevolence of God who is the all-wise Preserver of human life (पालयिता), nothing morbid that is curable and no visible morbid changes that is curable can

remain hidden from and unmanifested to the *accurately observing* physician by means of morbid signs and symptoms.

§ 14-15.

Thus, the totality of the outwardly manifested and observable symptoms produced by the morbidly deranged dynamis in the organism and representing the existing disease, is not separate from the deranged vital force that animates our body in the invisible interior ; they together constitute a whole, they are one and the same. In the discourse on vital force (*vide* aph. 9 and 10) we have learned that our organism is really the material instrument of the life which we can conceive only for the animation bestowed on it by the instinctively perceiving and regulating dynamis. this function of the spirit-like dynamis is its *autocracy* : likewise, without the organism the vital force is not conceivable, because force is manifestable and conceivable only through its influence on the organism ; hence the two together constitute a unity, an indivisible unit, although for the sake of easy comprehension our mind separates this unity into two distinct conceptions. The perceiving and regulating influence of dynamis acts through the sentient faculty of the nerves everywhere present in the organism.

§ 16.

Having so far learnt that our animating vital force is immaterial, a spirit-like dynamis, an autocracy, one would naturally ask how such a substance can become ill, and by what mode of operation medicinal substances can restore it to health.

The harmonious working of the vital force in its highest form is the healthy human being. This harmony is a divine gift and it is its birth right. Derangement of this harmony is tantamount to disease—physical, mental or both. The external inimical forces that disturb the harmonious play of life can attack and affect our vital force by injurious influences only in a spirit-like—dynamic—way. To derange an immaterial, spiritual, dynamical force, to disturb its harmony is not possible otherwise than in this dynamic way. A thing of dynamic nature can only be affected and influenced by a dynamic virtue. Hahnemann says, and also carefully observing persons must have noticed, that “most severe disease may be produced by sufficient disturbance of the vital force through the imagination and also cured by the same means.” And all such morbid derangements can be removed from it by the physician only by means of the dynamic virtual alterative powers of the serviceable medicines, such medicinal powers acting upon the spirit-like vital force and perceived through the sentient faculty of the nerves everywhere present in the living organism. We should note the words “serviceable medicines” here used by Hahnemann, which will be dilated upon in subsequent aphorisms. To hit upon the serviceable medicine, in an individual case of disease, which can and actually do re-establish health and vital harmony, it is absolutely necessary that the totality of the symptoms indicating changes in the health of the patient, cognizable by our senses, has, as fully as is requisite for effecting cure, revealed the disease to the alert physician, i. e., has been investigated and noted by him.

§ 17.

Hahnemann, in a relative foot note, further illustrates how immaterial dynamic action affects the vital force both in deranging and restoring the vital harmony, i. e. re-establishing health : "A warning dream, a superstitious fancy, or solemn prediction that death would occur at a certain day or at a certain hour, has not unfrequently produced all the signs of commencing and increasing disease, of approaching death and death itself at the hour announced, which could not happen without the simultaneous production of the inward change (corresponding to the state observed externally) ; and hence in such cases all the morbid signs indicative of approaching death have frequently been dissipated by an identical cause, by some cunning deception to a belief in the contrary, and health suddenly restored, which could not have happened without the removal, by means of this moral remedy, of the internal and external morbid change that threaten death." Thus it is established that diseases being of a dynamic order, the serviceable medicaments must act dynamically in order to effect their cure.

In order to effect complete cure of the whole of the perceptible signs and symptoms of the disease which constitute the internal alteration of the vital principle, the physician has only to remove the whole of these symptoms, which will at the same time annihilate the entire morbid derangement of the vital force, the totality of the disease, the disease itself. And when the disease is annihilated, health is re-established ; and thus the highest mission of the physician is fulfilled.

Hahnemann observes here : "It is only thus that God, the preserver of mankind, could reveal His wisdom and goodness in reference to the cure of the diseases to which man is liable here below, by showing to the physician what he had to remove in diseases in order to annihilate them and thus re-establish health. But what would we think of His wisdom and goodness if He had shrouded in mysterious obscurity that which was to be cured in diseases (as is asserted by the dominant school of medicine, which affects to possess a supernatural insight into the inner nature of things), and shut it up in the hidden interior, and thus rendered it impossible for man to know the malady accurately, consequently impossible for him to cure it?"

The sole guide, therefore, for the purpose of choosing a remedy, must be the sum total of all the symptoms and conditions in each individual case of disease, which are indubitably the only means for expressing their need of medical aid.

Diseases consist of nothing more than alterations in the state of health of the healthy person, as expressed by morbid signs and symptoms ; the cure means change of this morbid condition into the healthy state of the individual. Therefore, it undeniably follows that the curative virtues of medicines are sustained entirely by their power to alter man's state of health depending on sensations and functions.

This spirit-like virtue of medicines to alter man's state of health lies hidden in the inner nature of medicines in an esoteric manner. It is not possible for intelligence alone, by a mere effort of reason, to discover it. These two powers, namely, the power of perturbing man's state of health and

the power of altering this morbid condition into the healthy state, i. e., of restoring health to the diseased organism, powers peculiar to all medicines—can only become clearly cognizable to us by our carefully observing the phenomena that each medicine displays when acting on a healthy human being. In no other way can these powers be known to us. The power of medicines to alter the state of health can only be ascertained by their effects on healthy individuals.

§ 21—22.

The curative virtue of medicines is not perceptible, not palpable; and like the vital force this virtue of medicines can only be comprehended by the most accurate observers while the remedies cause distinct changes in the state of health of the human body particularly in that of the healthy individual. These peculiar symptoms produced by each individual medicine are the only possible revelation of its disease producing power which at the same time is its disease-curing power.

How to conduct investigations of the pure effects of medicines on healthy persons, is advised by Hahnemann in aphorisms 121 to 140.

The natural morbid state consisting of the totality of the signs and symptoms of disease already present and intended to be cured, can be remedied and annihilated by the medicinal substance only by producing a certain artificial morbid condition capable of removing and abrogating the natural disease symptoms in the individual. It must also be confirmed by our experience whether the

totality of the natural disease symptoms can be (according to aphorism 2) rapidly, gently and permanently removed and the health restored by producing *similar or opposite* to the existing disease symptoms.

The system of treating a natural disease with medicines that produce artificial symptoms similar to those in the natural diseases, is called Homœopathy, based upon the maxim *Similia Similibus*.

The system of employing artificial symptoms opposite to those in the natural disease, is known as antipathic, enantiopathic, palliative mode of treatment based upon the maxim *contraria contrariis* advocated by Galen.

Isopathy is a method of curing a given disease by the same contagious principle that produces it. The virus is given to the patient highly potentized, and consequently in an altered condition. The cure is therefore effected only by opposing a similitum, although it is not candidly admitted by its advocates.

In *allopathic* system of treatment it is assumed by the physicians that they can penetrate into the hidden interior of both the healthy and the sick, and can so clearly recognize the sickness that they at once diagnose which noxious matter should be removed, according to their empty speculations and arbitrary suppositions. "Many different medicines are mixed constantly together in so-called prescriptions to be administered in frequent and large doses, and thereby the precious and easily destroyable human life is endangered in the hands of these perverted ones. Especially so with setons, emetics, purgatives, plasters, fontanelles and cauterization."

ALLOPATHIC METHOD

The employment of medicines whose symptoms have no pathological relation to the symptoms of the disease, but which act on the body in a different manner, is characteristic of the allopathic method.

Hahnemann remarks in a foot-note under aphorism 22 :

"The other possible mode of employing medicines for diseases besides these two, is the allopathic method, in which medicines are given whose symptoms have no direct pathological relation to the morbid state, neither similar nor opposite, but quite heterogeneous to the symptoms of the disease. This procedure plays, as I have shown elsewhere, an irresponsible murderous game with life of the patient by means of dangerous, violent medicines, whose action is unknown and which are chosen on mere conjectures and given in large and frequent doses. Again, by means of painful operations, intended to lead the disease to other regions and taking the strength and vital juices of the patient, through evacuations above and below, sweat and salivation, but especially through squandering the irreplaceable blood, as is done by the reigning routine practice, used blindly and relentlessly, usually with the pretext that the physician should imitate and further the sick nature in its efforts to help itself; without considering how irrational it is, to imitate and further these very imperfect, mostly inappropriate efforts of the instinctive unintelligent vital energy which is implanted in our organism, so long as it is healthy to carry on life in harmonious development, but not heal itself in disease. For, were it possessed of such a model ability, it would never have allowed the organism to get sick. When made

ill by noxious agents, our life principle cannot do anything else than express its depression caused by disturbance of the regularity of its life, by symptoms by means of which the intelligent physician is asked for aid. If this is not given, it strives to save by increasing the ailment, especially through violent evacuations, no matter what this entails, often with the largest sacrifices or destruction of life itself."

"For purposes of cure, the morbidly depressed vital energy possesses so little ability worthy of imitation, since all changes and symptoms produced by it in the organism are the disease itself. What intelligent physician would want to imitate it with intention to heal if he did not thereby sacrifice his patient?"

§ 23—24.

Hahnemann now proceeds to analyze and reckon the results obtained from medicines to meet the disease with opposite symptoms, as in antipathic, enantiopathic or palliative method.

With employment of medicines producing symptoms opposite to the disease symptoms, the disease breaks out again with increased intensity after transient, apparent amelioration. This result has been fully confirmed by all pure, unprejudiced experience and unerring research. This has been fully discussed in aphs. 58 to 62 and in 69.

§ 24.

And our experience further confirms that the medicine whose pathogenetic symptoms (effects) have been noticed,

SYMPTOM SIMILARITY

gathered and known from having been tried and proved in healthy individuals to have the power and proneness to produce artificial disease condition most similar to the totality of the symptoms of the disease in question, to wit, only the homœopathic medicines, promises to be of service in effecting a cure as demanded in aphorism 2.

§ 25—29.

In appraising the similarity of symptoms produced by medicines on healthy human body with those of the disease under treatment, it is not of supreme importance that the both must coincide *wholly* in all respects. The choice should be made of such medicine which, in all careful trials and pure experience, has demonstrated its power of producing *the greatest number* of symptoms similar to those cognizable in the case of disease under treatment; and such a medicine should be employed in doses of *suitable potency and attenuation* for effecting cure of the entire disease present and re-establishing health, leaving *none* of the symptoms uncured.

It should always be remembered that *qualitative* similarity is of greater importance than *quantitative* similarity.

Hahnemann observes that results of pure experience and careful trials with medicinal substances are the sole and infallible oracle of the healing art. He does not mean that sort of experience which the ordinary practitioner of the old school boasts of, after they have for years worked away with a lot of complex prescriptions

on a number of diseases which they never carefully investigated, but which, faithful to the tenets of their school, they considered as already described in works of systematic pathology, and dreamed that they could detect in them some imaginary morbid matter, or ascribed to them some other hypothetical internal abnormality. They always saw something in them, but knew not what it was they saw, and they got results from the complex forces acting on an unknown object that no human being but only a God could have unravelled—results, from which nothing can be learned, no experience gained. Fifty years' experience of this sort is like fifty years of looking into a kaleidoscope filled with unknown coloured objects and perpetually turning round; thousands of ever-changing figures and no accounting for them!

Now, this phenomenon of a medicine removing rapidly, radically and permanently the totality of the symptoms present in a given case of disease, by virtue of its symptom similarity, when employed in doses of suitable potency and attenuation, is not imaginary or a vague surmise. It is a fact, not fully recognized before Hahnemann, and it depends on the following homœopathic law of nature:

A weaker dynamic affection is permanently extinguished in the living organism by a stronger one, if the latter (whilst differing in kind) is very similar to the former in its manifestations.

Both physical affections and moral maladies are cured when treated under this law of nature. As Hahnemann's

HOMŒOPATHIC LAW OF NATURE

illustrations of this law of nature may be cited the vanishing of the brilliant Jupiter star from our view, as the brightness of the approaching day of a similar but stronger power acts on our optic nerve. Fœtid odors that offend our olfactory nerves cannot be opposed by music or sugared confectionary, but can effectively be countered by snuff that acts on the sense of smell in a similar but stronger way. Mourning or sorrow is likewise removed from the mind by narrating other people's greater mishap, even if that story be only a concoction. Bad effects of sudden and great joy will be removed by drinking decoction of coffee which produces an excessively joyous state of mind. Around us there are countless illustrations of this law of nature.

According to this therapeutic law of nature the curative property of a medicine depends on its power of producing in healthy human body morbid symptoms most similar to and at the same time stronger than the disease under treatment. This is an established fact confirmed by every honest experiment and every accurate observation in the world. Scientific explanation of *how it happens* is of little avail, and attempts to explain it is only a wild goose chase.

In every disease that does not come entirely under surgical treatment, the dynamically altered vital force is acted upon by a medicinal potency, selected according to the therapeutic law of nature (Aph. 26), wielding a somewhat stronger, similar artificial disease-manifestation. Thus, the weaker disease-dynamis ceases to manifest and disappear from the sensation and motion of the patient,

and the vital principle is now held and governed only by the stronger *artificial disease manifestation*. This artificial disease manifestation, caused by the medicine thus selected, soon becomes exhausted leaving the patient free from disease, cured. The vital force, thus freed, can now continue to keep the body alive and healthy. This is how, according to Hahnemann, the cure is effected when a homoeopathic medicament is administered.

§ 30.

Is the human body more affected by the natural disease agents, or by the medicinal agents ?

From all pure experience it appears that the human body is disposed of being more powerfully affected in its health, that is, to allow its health being altered more strongly, by the medicines than by the urge of natural disease influence, since natural diseases are found to be cured and overthrown by suitable medicines ; this is partly due to the fact that it is within our power to regulate the administration of medicine in requisite potency and frequency until we obtain the desired effect.

The results of unbiassed observation prove that the operation of the artificial disease producing influence is short-acting, but it is stronger than the natural diseases ; yet, the vital force can much more easily overpower the artificial morbid forces than the weaker natural diseases. This is solely because of the action (activity) of natural diseases being longer, generally lasting a life-time, (*e.g.*, in cases of psora, syphilis, sycosis), it can never be annihilated and removed by the vital force alone, without the help of

ATTACK OF DISEASE IS CONDITIONAL

the physician impressing the vital force more powerfully by an agent that produces an artificial disease very similar, but stronger, *i.e.* a homœopathic medicine. In aph. 46 Hahnemann cites various examples of cure of natural diseases by impromptu infliction of some other natural disease of a stronger and similar character, the process depending on the principle of *similia similibus*.

§ 31.

Now the question arises : can natural disease agents derange the health of man in all conditions and at all times, and in this respect how do they stand in comparison to the artificial morbid agents which are called medicines ?

Our worldly existence, our life in this world is always exposed to partly moral (psychic) and partly physical forces inimical to our healthy existence, and these forces are known as "morbid noxious agents," *i.e.* mental and physical disease producing harmful influences ; but these are incapable of morbidly deranging the health of man irrespective of time and circumstances. These morbid noxious agents can morbidly affect us only when our organism is disposed, *i.e.* inclined, to accommodate their aggression and is susceptible to the attack of the morbid cause that may come in our way, so as to be altered in its health, to become deranged and thereby suffer abnormal sensations and functions. It is only when persons are placed under such conditions that the disease forces can affect them. That is why they do not produce disease in every person nor at all times.

§ 32.

On the contrary, every artificial morbid agent that we call real medicine acts at *all* times, under *all* circumstances, and in *every* living human being, and produces in him its specific symptoms, plainly discernible to the observer, if the dose of the medicine be sufficiently large ; thus it is evident that every living human organism is liable to be influenced by the medicine at all times, as if it were impregnated with the medicinal disease *unconditionally*, absolutely without proviso, which the natural disease is incapable of doing.

When Hahnemann mentions here the words "*derangement of health*" he must not be taken to mean a *hyperphysical* interpretation of the internal character of diseases or of any particular case of disease ; because, diseases are *not* and *cannot* be mechanical or chemical changes of the material substance of the body, neither diseases depend on any material morbid substance. They are merely conceptual spirit-like dynamic derangements of the life, manifested by the abnormal signs and symptoms in the sensations and functions of the organism. Anatomical, morphological or physical derangements wrought by traumatic and other external, accidental causes do not come within the purview of our present discourse ; for, strictly speaking they are not natural diseases.

Basing upon the proved facts stated in aphorisms 31 and 32, we have the corollary that *the morbid noxious agents possess a power of morbidly deranging man's health that is subordinate and conditional, often very conditional ;*

SUPERIOR POWER OF MEDICINES

whilst medicinal agents have an absolute unconditional power, greatly superior to the former.

Here Hahnemann gives the following foot-note :

“A striking fact in corroboration of this is, that whilst previously to the year 1801, when the smooth scarlatina of Sydenham still occasionally prevailed epidemically among children, it attacked without exception all children who had escaped it in a former epidemic ; in a similar epidemic which I witnessed in Konigslutter, on the contrary, *all* the children who took in time a very small dose of belladonna remained unaffected by this highly infectious infantile disease. If medicines can protect from a disease that is raging around, they must possess a vastly superior power of affecting our vital force.”

§ 33.

It is supported by all experience, without any possibility of contradiction or dubiety, that the living human organism is much more inclined and is more liable to be influenced, and to have its health deranged by medicinal dynamis, than by morbidic noxious agents and infectious miasms.

Here, we feel to ask whether the artificial disease-producing medicinal dynamis cures a natural disease by virtue of its greater strength alone, or by virtue of its similarity alone.

§ 34.

Neither of these virtues by itself is the sole cause of their power to cure natural diseases. Two conditions are required for effecting the cure. The medicinal dynamis

should be capable of producing in the healthy human body an artificial disease *as similar as possible* to the disease to be cured and *with a somewhat increased power* for transforming the instinctive vital force to a very similar morbid state, this life-principle being in itself incapable of any reflection or act of memory.

Here again we are treading a metaphysical ground. In our study of aphorism 10 we compared Hahnemann's conception of the immaterial vital force with its interpretation in the light of Vedanta. In the present discourse Hahnemann calls it *instinctive and incapable of any reflection or act of memory*, so that it has no intelligence to make a plan of action for fighting the aggressive disease force, or to act on the basis of any past experience of such invasion, and be on guard. It passively submits to the disease force which it cannot overcome without the aid of homœopathic medicine employed by an accurate prescriber. The vital force of the Jiva is only a routine-worker, keeping the body alive in harmonious order so long as the Jiva choses to stay in its terrestrial abode of nine gates of exit (नवद्वार पुर), it being so carping and fastidious that it discards the body as soon as it is found irreparable and uninhabitable, just as we discard our worn out shoes and garments. The material body, thus discarded, is left behind with material organs of sense and action, and the departing Jiva is conveyed in its subtle body (सूक्ष्म शरीर) along the path of transmigration, carrying in its अन्तःकरण (the subtle organs) the inevitable impress of its *Karma* to be spent out in births hereafter, -(Katha-Upanishad, V. 6, 7).

The (अन्तःकरण) subtle inner organ, though really one,

has four-fold aspect, *viz.*, the reason gifted mind (मन) Intellect (विवेक बुद्धि), Ego (अहङ्कार), and Reflection (स्मृति).

The vital force has for its origin the (जीवात्मा) human soul (*cf.*, Katha-Upanishad, V, 5.)—like the heat and light having for their origin the Sun. When the sun sets in we are deprived of its rays that convey the heat and light to the earth. We are also deprived of these amenities, temporarily though it may be, when a piece of cloud comes between the sun and the earth; the lighter the cloud the less inhibition is there, and the thicker the cloud the greater depreciation of heat and light. When the cloud passes away we get again the sun's rays bringing to us light and heat in their full splendour. Does not the cloud bear an eminent analogy to the 'morbidic noxious agents' distorting the harmonious relation between the vital force and the material organism ?

It is therefore imparative, for purposes of extinguishing, annihilating and curing derangements caused by the natural disease, to employ a medicine capable of producing symptoms of greatest similarity to the disease and at the same time with somewhat increased power.

§ 35.

Let us now consider and analyze our experience of cases where two *dissimilar* natural diseases meet together in one person, and witness how Nature herself fares in her attempt to help the recovery of the vital force. In such instances Nature has been found incapable of removing a dissimilar disease already present, particularly

a long standing disease, by that unhomœopathic process. The same result—failure—is witnessed also from the administration of unsuitable allopathic drugs which are incapable of producing an artificial morbid condition similar to the disease to be cured; even the strongest medicines are incapable of curing disease whatsoever, if they are unable to produce similarity of symptoms.

We have now to take up three propositions in relation to two *dissimilar* diseases meeting together in the human being, and to determine what results issue. The propositions are :

§ 36—40.

I. When two dissimilar diseases meet together in one person and (a) both are of equal strength, or (b) the older one is the stronger of the two, it is witnessed that the new (weaker) disease will be repelled by the old one from the body and not allowed to affect it.

Examples : The plague of Levant does not break out where scurvy is prevalent, neither does it affect persons suffering from eczema. Rachitis, says Jenner, prevents vaccination from taking effect. Von Hildenbrand asserts that persons suffering from pulmonary consumption do not get attacks of epidemic fevers that are not of very violent character. Likewise, an old chronic disease remains uncured and unaltered under ordinary medical treatment, to wit, when treated according to the common allopathic method, i.e., with medicines that do not produce in healthy individuals a morbid condition similar to the disease, even if such treatment be pushed for years together, and is not

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of too violent character. Such instances are daily witnessed in practice. "But if treated with violent allopathic remedies, other diseases will be formed in its place which are more difficult and dangerous to life,"

II. The second proposition wants to determine what results issue when two dissimilar diseases meet together in one person and *the new dissimilar disease is the stronger of the two*. It is found that the older one being the weaker, will be kept back and remain suspended until the new stronger disease has run its course or has been cured. The old disease then *reappears uncured*.

Examples : Tulpius observed two children, affected with a kind of epilepsy, were found to remain free from epileptic attacks after they were infected with ringworm on scalp, but no sooner the eruption on the head was gone the epilepsy relapsed just as it was before.

Schopf reported that he saw the itch disappear on the occurrence of scurvy, but when the latter was cured the itch broke out again.

Chevalier reported that in a patient the pulmonary phthisis remained stationary when he was attacked by a violent typhus, but when the latter had run its course the pulmonary phthisis again went on active. Reil observed that if mania occur in a consumptive patient, the phthisis with all its symptoms is removed by the mania, but when this leaves the patient the phthisis returns at once and proves fatal.

When measles and smallpox prevail at one and the same time, and both happen to attack the same child, the measles that had already taken the field is generally

checked by the smallpox that appeared a little later ; and it is not until after the cure of the smallpox that the measles resume its course. Manget, however, observed that *inoculated smallpox* often remains suspended for four days if measles supervenes, and only after its desquamation the smallpox completes its course. Kartum witnessed that even after the measles had broken out the cow-pox inoculation took effect but did not run its course until the measles had disappeared.

Hahnemann himself saw angina parotidea (mumps) immediately disappear when the cow-pox inoculation had taken effect and had nearly attained its height, but on the complete termination of the cow-pox and fading away of its red areola the mumps reappeared and ran its regular course of seven days.

Hence the formula : *With all dissimilar diseases, the stronger suspends the weaker* (when they do not complicate one another, which is seldom the case with acute diseases), *but they never cure one another*. That is to say, "A new stronger disease attacking an individual already ill, only suppresses, as long as it lasts, the old disease that is dissimilar to it and already present in the body, but never removes it." This is all the more conspicuous when we closely follow the miserable results of treating chronic diseases with allopathic remedies, i.e. with medicines capable of producing, almost invariably, one *dissimilar* to the disease to be cured. The artificial disease *dissimilar* to the original one merely holds the original disease in abeyance, merely suppressed, merely suspended, so long as the aggressive allopathic treatment is kept up, always to return

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as soon the as lowered vitality of the patient can no longer admit of the pushing up of further allopathic attacks on his life.

Thus Hahnemann discovered and established his second maxim in respect of all dissimilar diseases :

"The stronger suspends the weaker, but they never cure one another, if they do not complicate each other which seldom happens with acute diseases."

It has been noticed for many centuries, even by the ordinary school of medicine, that Nature herself cannot and do not cure any disease by admitting a dissimilar disease, however greater the latter may be in strength. Hahnemann remarks that nothing can be more heterogeneous, more dissimilar morbid agents, cannot be more allopathic, more exhausting mode of treatment than the customary prescriptions composed of unproved ingredients whose pure effects on healthy persons are unknown, commonly used for innumerable forms of disease. These unproved medicines and their capricious combinations (and in the present time synthetic medicines prepared in the laboratories of capitalist adventurers that are backed by brilliant, ensnaring literature as a revolutionary achievement of scientific research) likewise produce no other effect than debilitating, suppressing and suspending a disease only for a little time, being unable to cure it ; and when these fantastical prescriptions are continued for a long time, some new morbid condition is created and added to the old existing disease.

III. Besides the previously stated effects of suppression

and suspension, when two dissimilar diseases meet, what other phenomenon is observed ?

We have seen that being dissimilar to each other the two diseases cannot remove, cannot cure one another. The third phenomenon observed is that *the new disease*, after having worked for a long time in the organism, eventually joins the old dissimilar disease, and together they form a *complex* disease ; now, each one them holds in its possession the particular region where the organs are peculiarly fit for its habitation, leaving the rest of the organism to the other dissimilar disease.

Hahnemann predicates that a syphilitic patient may become psoric and the *vice versa*, and being dissimilar the syphilitic and the psoric diseases cannot remove neither can they cure one other. The phenomenon observed is that the venereal symptoms remain dormant and are suspended when the psoric eruption begins to appear ; and as syphilis is at least as strong as the psora, the two, in course of time, join together, each involving only those parts of the organism which are most suitable for its accommodation, the patient thus becoming all the more ill and ailing, and more difficult to cure.

Hahnemann asserts, "From careful experiments and cures of complex diseases of this kind, I am now firmly convinced that no real amalgamation of the two takes place, but that in such cases the one exists in the organism *beside* the other only, each in the parts that are adapted for it, and their cure will be completely effected by a judicious alternation of the best mercurial preparation, with the

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remedies specific for psora, each given in the most suitable dose and form."

In our discourse under aphorisms 37 and 38 we have seen that in the instance of two dissimilar acute infectious diseases, viz, smallpox and measles meeting each other, the one usually suspends the other ; yet, in some severe epidemics, as an exception to this rule, there have been, in some rare cases, occurrences of two dissimilar acute diseases meeting simultaneously in one and the same patient and combining, as it were, with each other. Hahnemann cites P. Russell having met in one case both these dissimilar diseases (smallpox and measles) at one and the same time. Simultaneous occurrence of measles and small-pox in two girls was witnessed by Rainey. In his whole practice J. Maurice observed only two such cases. A few other writers have also recorded similar cases. Hahnemann quotes Zencker having seen cowpox run its regular course along with measles and along with purpura. In Hufeland's Journal, vol. xvii., Jenner reported his observation of cow-pox having had run on its usual process undisturbed during a mercurial treatment of syphilis. Making allowance for these exceptions, the third proposition stands thus :

"A new dissimilar disease, after having long acted on the organism, at length joins the old one which is dissimilar to it, but they cannot remove, cannot cure one another ; each of these chooses a specific locality in the organism as if the place were peculiarly adjusted to its accommodation, while leaving the rest of the organism for the other dissimilar disease to occupy."

§ 41.

We now come to study the result of inappropriate treatment of natural diseases with long continued employment of unsuitable drugs, as in the allopathic method.

Artificial diseases are frequently produced by long-continued employment of unsuitable drugs in the treatment of natural diseases, and such an artificial disease being dissimilar to the natural disease sought to cure, cannot produce the desired effect, but only produces new morbid conditions, often very irksome, according to the character of that medicinal agent, and this new morbid condition gradually becomes mixed up with chronic old disease. Thus, a new, dissimilar, artificial disease of a chronic nature is engrafted on the old disease and complicates the case. In place of a single disease the patient now suffers from a double disease which makes his condition much more distressing and often beyond redress.

Hahnemann asserts how frequently we meet cases of venereal chancrous disease, in a similar way, becoming complicated particularly with psora or with the condylo-matous gonorrhoeal diathesis; and how these cases, when assailed with long-continued and increasing doses of improper mercurial preparations, gradually develops into a "hideous monster of complicated disease"—generally called 'masked venereal disease'—which now becomes quite incurable, and health in this case can then be recovered with the utmost difficulty.

Hahnemann remarks in the foot-note: "For mercury, besides the morbid symptoms which by virtue of similarity can cure the venereal disease homœopathically, has among

its effects many others unlike those of syphilis, for instance, swelling and ulceration of bones, which, if it be employed in large doses, cause new maladies and commit great ravages in the body, especially when complicated with psora, as is so frequently the case."

It is only in the case of two dissimilar natural diseases that we sometimes find Nature herself permitting simultaneous occupancy of two dissimilar diseases (sometimes even three), these dissimilar diseases remaining separate in the organism, each occupying a special region of its own choice, without causing derogation of the unity of life; but these dissimilar diseases, in allegiance to the eternal law of nature (see aph. 22 et seq.), do not annihilate, remove or cure one another.

§ 42—45.

In the event of *two similar* diseases meeting together in the organism and the new one being stronger than the old existing disease, we witness quite a different result which manifests the natural salutary effect on the human system, and we thereby learn how to act for curing diseases. Here we do not find the three aspects of dissimilar diseases as observed under aphorisms 36 to 40. On the contrary we witness a different effect.

In conformity with the law of nature studied in aphorism 26, when *two similar diseases*, while differing in kind, very closely resemble each other in their manifestations and effects, as well as in the subjective and objective symptoms that are produced by each one of them individually, of these two the stronger one invariably destroys the weaker when-

ever they meet in the organism. This phenomenon is brought about for the simple reason that the stronger new disease-dynamis, owing to its similarity of action, involves precisely the same parts of the organism previously affected by the weaker one which consequently no longer acts on these parts from which the morbid irritation is thus extirpated. The morbid feeling of the life principle previously due to the 'weaker disease is now entirely obliterated from the sensations of the vital principle which is henceforth affected solely, but only temporarily, by this similar but stronger disease dynamis.

As an instance of extinction of weaker dynamis on the advent of a stronger one, Hahnemann states in the relating foot-note the phenomenon of "the image of a lamp's flame being rapidly overpowered and effaced from our retina by the stronger sunbeam impinging on the eye." He then proceeds to give 'determinate and indubitable' instance of the homœopathic law of cure, and mentions a disease arising from a fixed miasm, thus deserving a particular name. He therefore takes up small-pox which produces such a large number of serious symptoms and is therefore so much dreaded, in order to demonstrate that it has removed and cured a number of diseases bearing similar symptoms.

Cures of diseases bearing symptom-similarity with small-pox :

Smallpox often produces violent ophthalmia, sometimes causing even blindness. We in India are very much cognizant of this. Hahnemann refers to Dezoteux and Leroy

SIMILAR DISEASES

having cured by its inoculation chronic ophthalmia permanently.

A case of amaurosis, resulting from suppressed scald-head, and persisting for two years, was, according to Klein, perfectly cured by small-pox.

Deafness and dyspnœa are conditions often caused by small-pox. Closs observed that both these chronic diseases were removed by small-pox when it reached its acme.

Thus, by virtue of similarity, Klein observed cure of swelling of testicle, also a large, hard swelling of the left testicle caused by a bruise ; and another observer reported a similar swelling of the testicle cured by it.

Dysenteric condition of the bowels being one of the troublesome symptoms of small-pox, Father Wendt observed a case of dysentery subdued by it.

About Smallpox, Cow-pox and Vaccination :

According to the testimony of Muhry and many others, the onset of Smallpox after vaccination (cowpox), on account of the former's greater similarity, immediately and entirely removes the cowpox under the law of homœopathy and does not allow the cowpox to mature. Again, contrary to this manifestation, it has been observed that after the cowpox has come near maturity, on account of its similarity, it considerably reduces a superposing smallpox and makes its attack much milder. Here, in the relating footnote Hahnemann remarks : "This seems to be the reason for this beneficial remarkable fact, namely, that since the general distribution of Jenner's Cow Pox vaccination, human smallpox never again appeared as epidemically or

virulently as 40-50 years before when one city visited lost at least one-half and often three-quarters of its children by death of this miserable pestilence."

Besides its prophylactic substance the lymph of the inoculated cow-pox contains the virus of a general skin eruption of different nature, seldom large and pustular, but consisting of usually small, dry pimples based upon red areola, commonly associated with round red cutaneous spots combined with the most violent itching; this rash has been found to appear in quite a good number of children some days *before* the red areola of the cow-pox makes its appearance, but frequently such rash appears a few days *after*, and disappears in a few days, leaving behind small, red, hard, spots on the skin. As has been asserted by a number of observers, analogous cutaneous eruptions of children—often of very long standing and of a very troublesome character—have been perfectly and permanently cured after the inoculated cow-pox had taken effect. Hahnemann avers that this cure happened in a homœopathic manner, by virtue of the similarity of the accessory miasm specified above.

Further, instances are cited of cures of a *swollen* half-paralyzed arm, two cases of intermittent fever, etc. by cow-pox in a homœopathic manner.

Measles : Bearing a strong resemblance in the character of its fever and cough, *measles* kept many children, who then took measles, from attack of epidemic whooping-cough that simultaneously prevailed in the locality, although the measles bears only a partial similarity to whooping cough which has no cutaneous eruption in its index of symptoms.

SIMILAR DISEASES

Measles can, however, indisputably remove and effect a cure when it meets a disease that carries resemblance to its principal symptom of skin eruption. Instance has been observed by Kortum, where a chronic herpetic eruption was completely and permanently cured by virtue of symptom-similarity when measles supervened. Hahnemann quotes Rau for a case of an excessively burning miliary rash on the face, neck and arms lasting six years and aggravated by every change of weather, which on measles occurring, took the form of swelling of the skin ; and after the measles had completed its course the exanthen was cured, not to return any more.

§ 47—49.

This is the process of cure that takes place in nature, and Hahnemann exhorts physicians to take lesson from these plainest and most convincing facts, and decide for themselves conscientiously what kind of medicine they should employ with a view to cure surely, rapidly and permanently the patient under treatment ; and every honest reseach, observation and reflection will always impress upon the physician that not a single case of illness can be remedied by dissimilar morbid agent, however strong that may be ; and that it can only be cured by an agent that will produce symptoms similar to the disease but in somewhat greater strength, in conformity with the immutable and eternal law of nature. Unfortunately, observers have not paid sufficient attention to the natural homœopathic cures that happen around us, nor are there in nature sufficient homœopathic diseases to be helpful in

in curing the endless variety of ailments independently of the aid of the physician's art. Moreover, measles, small-pox, the exanthematous contagious virus present extraneously in the cow-pox lymph, and miasmatic diseases of constant character (the itch, of which miasm some elaborate and illuminating discourse is given in aphorisms 80—81) have good many disadvantages in their employment as therapeutic agents, being more dangerous to life and more fearful than the disease they are to cure ; and after they have effected the cure, they themselves in their turn require treatment for extermination. In either way, as homœopathic remedies they are unmanageable, indefinite and dangerous, since their doses cannot be regulated according to circumstances, as can be done in respect of medicinal substances ; whereas a patient suffering from a like-malady of long standing must be brought under the entire dangerous and tedious disease like measles or small-pox or itch which in its turn must receive treatment to be cured. Howbeit, the examples of homœopathic cures cited in the preceding aphorisms are indubitable proofs of the great homœopathic law of cure, viz : *cure by symptom similarity*.

§ 50—53.

In employing medicinal substances for rendering homœopathic aid to the patient we have the following supreme advantages which greatly outweigh all other methods of treatment :

We have at our disposal innumerable medicinal substances universally distributed throughout creation for recording their pathogenetic symptoms and employing them

SUPREME ADVANTAGES OF HOMŒOPATHY

for the relief of the suffering humanity in all conceivable and inconceivable natural diseases.

The power of these medicinal substances, after completing their remedial action, being overcome by the vital force, willingly disappears without requiring any treatment for its removal.

The medicinal substance can be attenuated, subdivided and potentized *ad infinitum* to suit the exigency of the case under treatment.

The dose can be reduced to such an extent as to remain only slightly stronger than the similar natural disease to be cured.

Thus, in the method of curing by *symptom similarity* which is beyond comparison with any other method of cure in vogue, even an inveterate old standing disease can be cured without any violent attack upon the organism, but in a gentle, imperceptible, harmless method, effecting rapid and permanent restoration of health. The homœopathic method of cure is based upon accurate observation of nature, on careful experimentation and pure experience.

The only other method, as opposed to homœopathy, is the heteropathic system of treatment which utilizes many things against disease, but only the improper things by way of speculation, without ascertaining the true effect of those things upon healthy organism. Its custom is to give fantastic names to visionary disease pictures and to classify them, and likewise to ascribe to medicines illusory actions guessed to cure the abnormal conditions. Persons who do not know thoroughly either of these two systems of treatment, are deluded to think that these two can ever

approximate or may ever be combined. For a practitioner of homœopathy to yield obsequiously to the humour of the patient and treat him at one time homœopathically and at another time allopathically, is comic and dishonourable ; and as Hahnemann puts it, 'such a practice may be called criminal treason against divine homœopathy.' In the natural science of homœopathy established on the incontrovertible law of nature *Similia Similibus*—'idle speculations and scholastic vaporings' can never have a place. The only prop that helps allopathy keep up its credit, is the palliative relief obtained occasionally from empirically seen remedies 'whose almost instantaneous flattering action' is so obvious to the patient. While the patient becomes deluded with almost immediate amelioration by means of this palliative method, any intelligent and honest observer who would follow up the case should not fail to notice from its results how basically unprofitable and injurious is this method of treatment especially in diseases that do not have an acute swift speed but run slowly and insidiously into the vitality of their victims.

The palliative, antipathic, enantiopathic method of treatment was introduced by Galen's theory of "contraria contrariis." Amongst the various and diverse modes of treatment adopted in allopathic practice this Galen's method is surely the only one that exhibits any palpable relation to a portion of the troublesome symptoms of the natural disease. But in the treatment of a chronic disease which characteristically comprises of quite a number of long-standing morbid symptoms based upon a *chronic miasm*, the ordinary physician employs this antipathic method against a single troublesome one amongst so many other symptoms of the

GALEN'S CONTRARIA CONTRARIIS

disease disregarding the others, and selects a medicine known to produce the exact opposite of the symptom he seeks to control, thereby expecting the quickest palliation ; but this can produce only transitory relief. In the antipathic method of treatment, the physician gives large doses of opium against pains of all kinds as this drug primarily deadens the sensation, and the same remedy is prescribed for diarrhœas because it quickly arrests the intestinal peristalsis, deadening the sensibility and checking alvine evacuations ! It is also prescribed for sleeplessness because it rapidly induces stupefaction, comatose condition. Likewise, dipping the burnt hand in cold water, warm baths for chilliness and deficient vitality, purgatives for long-standing constipation and costiveness, wine for prolonged debility, and other antipathic (opposite) remedial means are every day employed for their instantaneous palliative, enlivening and refreshing effects, without the least thought being given to their secondary effects of aggravation of the original malady after the transient amelioration fades away, which follows in every case without exception. J. Hunter rightly says that "wine and cordials given to the weak increase the action without giving real strength, and the powers of the body are afterwards sunk proportionately as they have been raised, by which nothing can be gained, but a great deal may be lost."

When after such short antipathic amelioration the aggravation sooner or later sets in, the ordinary physician tries to explain away this subsequent intensity to be either due to the malignancy of the original disease now mani-

festing for the first time, or to be the visitation of a new disease altogether.

§ 58.

Such palliation (antipathy) is an extremely faulty symptomatic treatment, limiting the physician's attention in only one-sided manner, to only a single symptom amongst those present, as it does not constitute the disease itself any more than a single foot is the man himself.

In the foot-note to aphorism 58, Hahnemann makes the following observation :—

“A third mode of employing medicines in diseases has been attempted to be created by means of *Isopathy*, as it is called—that is to say, a method of curing a given disease by the *same* contagious principle that produces it. But even granting this could be done, yet after all, seeing that the virus is given to the patient highly potentized, and consequently in an altered condition, the cure is effected only by opposing a *similimum* to a *similimum*.

“To attempt to cure by means of the very same morbid potency (*per Idem*) contradicts all normal human understanding and all experience. Those who first brought *Isopathy* to notice, probably thought of the benefit which mankind received from cowpox vaccination by which the vaccinated individual is protected against future smallpox infection and as it were cured in advance. But both, cowpox and smallpox are only similar, in no way the same disease. In many respects they differ, namely in the more rapid course and mildness of cowpox and especially in this that it is never contagious to man by mere nearness.

Universal vaccination put an end to all epidemics of that deadly fearful smallpox to such an extent that the present generation does no longer possess a clear conception of the former frightful smallpox plague.

“Moreover, in this way, undoubtedly, certain diseases peculiar to animals may give us remedies and medicinal potencies for *very similar* important human diseases and thus happily enlarge our stock of homœopathic remedies.

“But to use a human morbid matter (a Psorin taken from the itch in man) as a remedy for the same human itch or for evils arisen therefrom is—?

“Nothing can result from this but trouble and aggravation of the disease.”

[The author mournfully recalls the tragic experience in the case of his seven-years old son Dibyansu who was attacked with virulent itches covering his entire body excepting the head and thorax, and these eruptions persisted for months, increasing and abating off and on. In this condition he accompanied his mother to a close relation and stayed there for about a fortnight. When they returned home the boy was found quite free from the itches. On enquiry it was said that the boy was injected with auto-vaccine which cured (?) those obstinate and dirty eruptions. A few weeks after this the poor boy was attacked with meningitis and after having suffered for 42 days, died in spite of the best available homœopathic and allopathic treatment.]

§ 59—61.

Aphorism 59 says, “Important symptoms of persistent diseases *have never* yet been treated with such palliative,

antagonistic remedies, without the opposite state, a relapse indeed, a palpable aggravation of the malady—occurring a few hours afterwards.” Here Hahnemann proceeds to describe the primary and secondary actions of some remedies commonly employed antagonistically by the ordinary physicians, and he explains how later the disease is aggravated, or something even worse is effected by the secondary action of such antipathic remedies, as taught by experience in a terrible manner, although the old school does not comprehend it owing to its false theories. He also mentions in the foot-note, the disastrous results of bleeding the patients by *lœches* and cupping glasses introduced by Brousseau of Paris, a practice still being followed by the old school in many cases—particularly in attacks of apoplexy and high blood-pressure. This is because the ordinary physician is incapable of reflecting on the regrettable results of the antagonistic employment of medicines which is a very convenient treatment of all diseases and which spares him from ‘further thinking—the most laborious of all work under the sun.’ A happy-go-lucky sort of a job! His ignorance of the inviolable therapeutic law of nature, his slouching sloth, the pernicious result of his murderous action, are craftily covered by priggish and sonorous discourse of pathological and physiological bombast, fired at the bed-side to cause awe and wonder in the patient and those around him; “*And still they gazed, and still the wonder grew that one small head should carry all he knew.*”

§ 62—69.

What is **primary action**, and what is **secondary or counter-action**?

PRIMARY ACTION—SECONDARY ACTION

Every medicine, and every agent that acts upon the vitality, more or less disturbs the vital force and effects some alteration in the health of an individual for a longer or shorter period ; this disturbance of health results from the power of medicinal substance combined with the opposing power of the vital force, but the disorder is principally due to the aggressive action of the medicinal substance and hence termed *primary action*.

The vital force directs its own energy, its *automatic action* of life-preserving power against the disturbing power of the medicinal substance, and this activity is called *the secondary or counter action*.

In course of the primary action of the artificial morbid agents (medicines) upon the healthy individual, our vital force seems to remain dormant and to suffer the external impression without resistance, as if without any disposition to oppose it. After a while the vital force seems to spring into activity, developing either of the two conditions according to the specific circumstance, namely :

(a) It may develop a condition exactly opposite and in equal measure to the effect produced on it by the primary action of the artificial morbid or medicinal agent—if such an opposite condition be possible, and commensurate with its own strength. This is one phase of the secondary action. For instance, a person who was a few hours ago heated by drinking too much wine, a few hours after feels too weak and chilly. An arm kept long in very cold water or exposed to frost, at first becomes paler and colder than the other, but when removed from the cold water and dried it becomes warmer than the other

and subsequently even hot, red and inflamed. After purgation with castor oil, constipation follows. It invariably happens that where a medicine whose primary action, in large doses, produces a great change in the health of a healthy individual, *its exact opposite condition in the secondary action is produced by our vital force.*

This opposite secondary action is never observed from the action of the minute doses of homœopathically employed agents deranging the healthy body. A primary action of even such a small dose does not escape the perception of an observer alert with adequate attention, and the living organism—the vital force—has to employ for the restoration of the normal condition only such small reaction as is commensurate with the minuteness of the homœopathic doses.

In the treatment of sudden accidents or poisonings it may be unavoidable to employ, for the urgency of the case, medicines and means other than based on the principle of *similia similibus*. Hahnemann writes a special foot-note on this subject. Our commonsense help us to understand that an accident is only an accident—only a mishap, an unforeseen and undesigned injury—and it can never be termed a disease. Regarding the treatment of such mishaps Hahnemann says, "Only in the most urgent cases, where danger to life and imminent death allow no time for the action of a homœopathic remedy—not hours, sometimes not even quarter-hours, and scarcely minutes—in sudden accidents occurring to previously healthy individuals—for example, in asphyxia and suspended animation from lightning, from suffocation, freezing, drowning, etc.—is it ad-

missible and judicious at all events as a preliminary measure, to stimulate the irritability and sensibility (the physical life) with a palliative, as, for instance, with gentle electrical shocks, with clysters of strong coffee, with stimulating odour, gradual application of heat, etc. When this stimulation is effected, the play of the vital organs again goes on in its former healthy manner, for there is here no disease to be removed, but merely an obstruction and suppression of the healthy vital force. To this category belong various antidotes to sudden poisonings; alkalies for mineral acids, hepar sulphuris for metallic poisons, coffee and camphor (and ipecacuanha) for poisoning by opium, etc.

“It does not follow that a homœopathic medicine has been ill selected for a case of disease because some of the medicinal symptoms are only antipathic to some of the less important and minor symptoms of the disease, if only the others, the stronger, well-marked (characteristic), and peculiar symptoms of the disease are covered and matched by the same medicine with similarity of symptoms—that is to say, overpowered, destroyed and extinguished; the few opposite symptoms also disappear of themselves after the expiry of the term of action of the medicament, without retarding the cure in the least.”

We, not unoften, meet a new sect of physicians who mixes the systems, under the sly and dishonest pretext of the above observation of Hahnemann, so that they may have an excuse for seeking everywhere an opportunity for taking recourse to such exceptions to the general rule in diseases, and to justify their convenient employment of

allopathic palliatives, and of other injurious allopathic trash further, solely for the sake of sparing themselves the trouble of seeking for the suitable homœopathic remedy for each case of disease—and thus conveniently appear as homœopathic physicians, without being such. These feats are as profane as the system of treatment they follow ; corruption, deceit, treason.'

(b) The vital force, often having for sometime passively suffered the aggressive primary action of the artificial morbid substance, develops, in the event of absence in nature of the condition exactly opposite of the primary action of the medicine, a condition other than what has been observed in paragraph (a) and tries to identify (associate) itself with the primary action, by making its own superior power now serviceable for subduing and extirpating the alteration of health brought about by the primary action, and in restoring the normal state. This is the *secondary action, curative action*.

In *homœopathic* cures, the uncommonly small doses of medicines employed in this system of treatment, by virtue of the similarity of symptoms, are quite competent to defeat the similar natural disease and remove its impress from the sensation of the life-principle of the patient ; and after the extirpation of the natural disease thus effected, there certainly remains in the organism some portion of the medicinal disease, which, however, owing to the wonderfully minuteness of the dose, is so trifling, so ephemeral and vanishes so rapidly of its own accord, that the vital force does not require to make any especial effort to react against that insignificant residue of the artificial derange-

ment of its health ; it is only with a slight reaction that the vital force can now regain its own standard of health after the extinction of the natural disease. The minuteness of homœopathic doses has been discussed in aphorisms 275—287.

The monstrous assault by colossal doses of allopathic treatment strikes tremendous blow on the life principle, so that the vital force must have to resile with equal violence, if its inherent strength carries that degree of energy. But the energy of the vital force is only limited in our organism, while the doses are *ad libitum* in the hands of the physician who is not provided by God with any standard gauge to measure the dose-bearing capacity of human organism except by speculation. Therefore, the most common result is that on reaching its greatest height of resilience the life's energy exhausts and the organism breaks down. Contrary to this phenomenon, the reaction in the homœopathic system of treatment is imperceptible, most harmless, most reliable and easily comprehensible.

Allopathy intends and avows to oppose the disease and proposes to annihilate the disease symptom by effecting an *opposite* medicinal symptom, which is, by law of nature, beyond any possibility. Of course, antipathic medicine touches *disease-point* precisely the same as the homœopathic medicine, but it *cannot displace the disease sensation of the vital principle on account of dissimilarity*, neither can it therefore occupy the region as it could after having dispossessed the natural disease, if it had the symptom-similarity. It only touches the fringe of only a single part of disease. The natural morbid derangement becomes

necessarily strengthened and increased by the reaction of the vital principle against the dissimilar artificial disease, and consequently becomes worse after the duration of the action of the palliative has ended, *worse in proportion to the magnitude of the dose of the palliative*. Thus, 'the larger the dose of opium given to allay the pain, so much the more does the pain increase beyond its original intensity as soon as the dose has exhausted its action.'

The palliative (allopathic) medicines leave the disease uneradicated, and the secondary action (which is the reaction of the vital force) emanating from the vital force on administration of antagonistic (palliative) is therefore intensified. It is indeed frivolous to assert, as some people do, that the palliative in its secondary action becomes similar to the disease, and must therefore be able to cure as a homœopathic medicine does in its primary action; but they cannot reflect that the secondary action is never a product of the medicine, but invariably of the opposing vital force of the organism.

The folly of the theory of neutralisation in the treatment of natural disease is discussed by Hahnemann in the following foot note :

"In the living human being no permanent neutralization of contrary or antagonistic sensations can take place as happens with substances of opposite qualities in the chemical laboratory, where, for instance, sulphuric acid and potash unite to form a perfectly different substance, a neutral salt, which is now no longer either acid or alkali, and is not decomposed even by heat. Such amalgamation and thorough combinations to form something permanently

SYNOPSIS OF THE HOMŒOPATHIC SYSTEM

neutral and indifferent do not, as has been said, ever take place *with respect to dynamic impressions* of an antagonistic nature in our sensific apparatus. Only a semblance of neutralization and mutual removal occurs in such cases at first, but the antagonistic sensations do not permanently remove one another. The tears of the mourner will be dried for but a short time by a laughable play ; the jokes are, however, soon forgotten, and his tears then flow still more abundantly than before."

In aphorism 70, Hahnemann summarises the whole discourse upto this point, and gives the following synopsis of the inferences drawn therefrom :

(a) A disease consists solely of the sufferings of the patient and the sensible alterations in his health, *i. e.*, the totality of the symptoms ; any other cause supposed to be hidden in the interior of the patient, any other mystic material imagined to produce the disease, is only phantasy.

(b) Such disturbance of health can only be remedied and restored to its previous sound standard by means of producing in the patient's present state of health another shock by means of medicines which effect cure solely by their power of altering man's state of health, *i. e.*, by their power of exciting morbid symptoms. This power of medicines can be comprehended definitely and clearly solely by testing (proving) the medicines on healthy human beings.

(c) A natural disease can never be cured by medicine that produces in the healthy individual morbid symptoms dissimilar to those exhibited by the natural disease. Even in nature no cure has ever been found to take place by the

advent of a new dissimilar disease, however strong the new one may be.

(*d*) In long-standing diseases of a serious nature, antogonistic (palliative) treatment is absolutely inefficacious ; it produces merely a very transient alleviation, always followed by its aggravation.

(*e*) In the free play of nature herself, we find that when a new similar disease is added to an old existing disease, the old one is rapidly and permanently annihilated and cured. Likewise, when a medicine, capable to producing the most similar symptoms in a healthy individual, is administered in suitable dose for the totality of symptoms of a natural disease, we find the disease is easily, perfectly extinguished, and the normal health of the individual restored.

It is therefore established beyond any shade of doubt that diseases of mankind consist solely of a collection of certain symptoms, and that all genuine cures are effected only by such medicinal substances which can artificially produce in the individual morbid symptoms similar to those of the natural disease.

Thus, we face three points to be solved in the medical problem, points that are absolutely necessary for curing the sick : (*a*) The physician's investigation of the disease for acquiring knowledge of what is to be cured. (*b*) Investigation of the effects of medicines for acquiring knowledge of their pathogenetic powers on healthy individual, with a view to adapt them for the cure of natural disease. (*c*) Knowledge of the most appropriate method of employing these medicines for curing natural diseases—(Aph. 71)

PART II.

KNOWLEDGE OF DISEASES

Here begins the second part of Organon consisting of aphorisms 72—104, with clear directions for acquiring knowledge of disease. We have already learnt that disease is only the sensible alterations in the health of the individual, consisting solely of the totality of the symptoms which express the sufferings of the patient. The diseases which attack man and morbidly derange his vital force, have two ways of affecting human beings, and are accordingly termed *acute* diseases and *chronic* diseases.

Acute diseases are the rapid processes of the abnormally deranged vital force, which have a tendency to finish their course more or less quickly, but always in a moderate length of time. (Aph. 72) There are different methods or processes of attack that differentiate the character of acute diseases. They affect human beings in the following ways:—

(1) Acute febrile affections such as attack human beings individually: here the exciting cause being the injurious influences to which the individuals were particularly exposed. For instance, indiscretion and excesses in food, insufficient supply of food, severe physical impressions, chills, overheating, dissipation, strains, etc., physical irritation, mental emotion and the like; and these are usually *the exciting causes* of such acute febrile affections. So, in our attempt at acquiring knowledge of an acute disease we should explore the exciting cause of it before we can hope to manage the case. However, in reality these acute affections

are only a fleeting exacerbation of latent *psora* (vide aph. 80-81) which spontaneously becomes quiescent again if the acute disease were not too violent and were soon extinguished.

(2) There is another variety of acute disease which affects several persons at one and the same time in scattered localities ; this is due to the influence of the peculiar local atmosphere, water and soil and of injurious substances ; a few persons have either a congenital or acquired indiosyncrasy for being affected by it at one and the same time. These are called *sporadic* diseases.

(3) There is another kind of acute disease, allied to the sporadic variety, that attacks many persons at one time with very similar sufferings from the same cause. These are called *epidemic* diseases. When they prevail in thickly populated localities they become *infectious* and *contagious*. In this variety, fevers arise, in each instance, of a peculiar nature. The cases of disease, having an identical origin, set up an identical morbid process in all persons affected by it ; and when left to itself, they terminate, in a moderate period of time, in death or recovery. War, famine, floods are frequently the producers or the exciting cause of such attacks. Sometimes they are due to peculiar acute miasms which attack persons in two ways, viz. ; (a) Once in a life-time, as small-pox, whooping cough, mumps, etc. (b) recurring frequently in almost the same manner, as Intermittent fever, cholera, plague, etc.

With rapid adoption of artificial mode of living, economic and social mutations, frequent international medley of intercourse, etc. the above-mentioned phases of diseases

have undergone considerable changes, so that the former descriptions of such diseases recorded in pathological works hardly bear much semblance with the actual picture now met with at the bed-side. It is therefore fraught with danger for a physician to approach a patient with foregone conclusions forced upon him by the device of christening the diseases with Greek and Latin paronomasia. Homœopathy does not entertain such vagaries. Its votary treats diseases each according to their several peculiarities, to wit, each on the merit of its totality of symptoms.

Chronic Disease : We now come face to face with Hahnemann's discourse on "chronic disease." In common medical parlance this word indicates any disease that has been lingering a considerable time, may be many years or a man's whole life-time. Hahnemann reckons chronic disease under two categories, viz., (a) Artificial chronic diseases, and (b) Natural chronic diseases.

Artificial Chronic diseases are derangements of health so commonly met with, and artificially produced by non-homœopathic treatment by prolonged use of violent heroic medicines by large and increasing doses, by abuse of calomel and other mercurial preparations and ointments, nitrate of silver, iodine and its ointments, opium, valerian, Cinchona bark and Quinine, Digitalis, Hydrocyanic acid, Sulphur and sulphuric acid, incessant purgatives, blood-letting, etc., whereby the vital energy is ruthlessly weakened, if it do not actually succumb to such treatment, so that a revolutionary reaction is produced in the organism. As a result of this some part of the organism is

deprived of its sensibility and irritability, or increased to an excessive degree, causing dilatation or contraction, relaxation or induration, or even total destruction of certain parts, and develop faulty organic alterations here and there. They cripple the body internally and externally, in order to preserve the organism from complete destruction by those hostile attacks. Of all chronic diseases, these artificially produced ones are the most deplorable, the most incurable.

As blood-letting by venesections greatly prevailed in the days of Hahnemann for the purpose of reducing plethora or a local inflammation, he sorrowfully remarks: "The only possible case of plethora shows itself with the healthy woman, several days before her monthly period, with a feeling of a certain fulness of womb and breasts, but without inflammation." Well, why not let out her blood to relieve that fulness of womb and breasts, and other concomitant ills? He further observes: "Even for true local inflammation, the most certain and quickest cure is found in medicines capable of taking away dynamically the arterial irritation upon which the inflammation is based and this without the least loss of fluids and strength. Local venesections, even from the affected part, only tend to increase renewed inflammation of these parts. And precisely so it is generally inappropriate, aye, murderous to take away many pounds of blood from the veins in inflammatory fevers, when a few appropriate medicines would dispel this irritated arterial state, driving the hitherto quiet blood together with the disease in a few hours without the least loss of fluids and strength. Such great loss of blood is evidently irreplaceable for the remaining continuance of life,

since the organs intended by the Creator for bloodmaking have thereby become so weakened that while they may manufacture blood in the same quantity but not again of the same good quality. And how impossible is it for this imagined plethora to have been produced in such remarkable rapidity and so to drain it off by frequent venesections when yet a hour before the pulse of this heated patient (before the fever and chill stage) was so quiet ! No man, no sick person has ever too much blood or too much strength. On the contrary, every sick man lacks strength, otherwise his vital energy would have prevented the development of the disease. Thus, it is irrational and cruel to add to this weakened patient, a greater, indeed the most serious source of debility that can be imagined. It is a murderous malpractice, irrational and cruel, based on a wholly groundless and absurd theory instead of taking away his disease which is ever dynamic and only to be removed by dynamic potencies”.

We also meet a few other ailments that are inappropriately called chronic diseases. These are false chronic diseases. People incur these diseases under various circumstances, such as,

- (1) By continually exposing themselves to *avoidable* noxious influences,
- (2) By habitually indulging in injurious liquors and aliments.
- (3) By addicting to dissipation of many kinds which undermine health.
- (4) By undergoing prolonged abstinence from things that are necessary for the support of life.

(5) By residing in unhealthy localities, especially marshy districts, or living in cellars or confined dwellings, deprived of exercise and fresh air.

(6) By over-exertion of body and mind.

(7) By living in a state of constant worry, etc.

The state of ill-health caused by any of the above circumstances disappears spontaneously under an improved mode of living, provided there is no *chronic miasm* lurking in the body.

The renowned and forceful author J. Ellis Barker writes : "The danger of drugs lies not only in their establishing a habit and in their enabling us to continue violating the laws of nature and commonsense. The most so-called diseases are merely symptoms by which Nature endeavours to effect a cure, This has been recognized by many of the greatest physicians and surgeons of the past, from Hippocrates and Celsus onward. A large number of people die prematurely and unnecessarily, not from disease, but from drugs prescribed by short-sighted doctors who mistake the symptoms for the disease, and who by *fighting* the symptoms outrage nature which had intended to relieve the patient by unpleasant manifestations."

Again, "In the past, medicines were nauseous. They were deliberately made nauseous by wise doctors who did not wish their patients to become habitual drug takers. In old books the adjective "bitters" is almost invariably coupled with the substantive—"medicine". Now we have elegant preparations which are tasteless and which are so small that we can dose ourselves with drugs at the dinner table without arising any body's attention. Of course, the

smaller and more elegant a pill is the greater is its danger, because it contains irritants and poisons in a concentrated form. Owing to the unremitting, pushful zeal of millionaire manufacturers who have made their preparations ever more attractive and who urge us unceasingly on posters and advertisements to swallow their pills and salts 'for the good of our health', the majority of us take purgatives and laxatives every day, and many take drugs at every meal, medicines 'highly commended by physicians!' Unfortunately, the end is evil. The beginning is pleasant, but only too often the end is terrible and tragic. Doctors and chemists combined unfortunately encourage us in violating the laws of nature day after day, because they have, for every trouble which has been brought about by our self-indulgence, a pleasant drug or treatment which relieves unpleasant symptoms or pains, at least for a time. In due course our permanently ill-treated constitution gives way, and some incurable disease has been firmly and permanently established, thanks to the symptom-relieving drugs given to us. The doctor, the chemist, or the local grocer will readily relieve their pain with poisonous headache powders, which will encourage the unfortunate sufferers to continue drinking the nerve racking liquid; and serious, often incurable injury will thus be inflicted, owing to the drug, upon their nerves and their brain."

We now come to Hahnemann's discourse on *true* Natural Chronic Diseases. Here are the three submarine rocks on which allopathic mariners get ship-wrecked in their attempt to sail through and reach the shores of Homœopathy.

The true natural chronic diseases are those that arise from and are caused by the dynamic infection of a *chronic miasm*. When left to themselves and unchecked by the employment of *remedies that are specific for them* they always go on increasing and growing worse inspite of the best mental and bodily regimen, and torment the patient to the end of his life with ever aggravated sufferings. These diseases have often imperceptible beginnings, derange the organism, each in its own peculiar manner, and cause it gradually to deviate from the healthy condition in such a way that the vital principle only opposes to them, at the commencement and during their progress, imperfect, unsuitable, useless resistance. The diseases thus spread, and the vital principle by itself is unable to extinguish them, and suffer itself even more and more abnormally deranged, until at length the organism is destroyed. The true natural chronic diseases may be *either congenital or acquired*.

What is meant by chronic miasm ?

Hahnemann discovered three infectious principles which dynamically derange the organism and cause all conceivable chronic diseases. He calls these as *Chronic miasms*. They are : (a) Syphilis, (b) Sycosis and (c) Psora. Each of these creates a peculiar dyscrasia in the living human organism, which forms the basis of numerous disease manifestations.

To elucidate the character of chronic miasms Hahnemann, in the foot note, makes the following observation :

“During the flourishing years of youth and with the commencement of regular menstruation joined to a mode

SYPHILIS—SYCOSIS

of life beneficial to soul, heart and body, they (the chronic miasms) remain unrecognized for years. The afflicted appear in perfect health to their relatives and acquaintances and the disease that was received by infection or inheritance seems to have wholly disappeared. But in later years, after adverse events and conditions of life, they are sure to appear anew and develop the more rapidly and assume a more serious character in proportion as the vital principle has become disturbed by debilitating passions, worry and care, but especially when disordered by inappropriate medicinal treatment."

§ 79

WHAT IS SYPHILIS ?

Syphilis is the miasm of the proper venereal disease, the chancre disease, originated from impure coition, and has been traced to have existed for nearly nine centuries. Syphilitic miasm may be either inherited or received by direct infection. When uncured by appropriate remedies, it persists till the termination of life.

WHAT IS SYCOSIS ?

Sycosis is commonly called the (condylomatous) figwart disease, on account of the excrescences which first manifest themselves on the genitals, and appear usually attended with a sort of specific gonorrhœa from the urethra several weeks or several days after infection through coitus. The sycotic miasm penetrates the whole organism, but is easily amenable to treatment unless it becomes complicated with syphilis or psora, or with both, or unless treated externally

and internally with inappropriate medicines, when it becomes a very persisting dyscrasia.

The specific internal dyscrasia of syphilis is revealed by the venereal chancre after the completion of the internal infection of the whole organism. Likewise, the sycotic miasm is revealed by the cauliflower-like growths (warts, verucca) after the whole internal organism has been completely infected.

§ 80

WHAT IS PSORA ?

Psora, the internal itch-miasm with or without its attendant eruption on the skin, is the most ancient, most universal, most destructive, and yet most misapprehended chronic miasmatic disease, which for many thousands of years has diffigured and tormented mankind, and which during the last centuries has become the mother of all the thousands of incredibly various acute and chronic (non-venereal) diseases, by which the whole civilized human race on the inhabited globe is being more and more afflicted. It is the oldest and hydra-headed of all the chronic miasmatic diseases, Hahnemann says, 'incalculably greater and more important than the two chronic miasms just named, is the chronic miasm of psora.' It announces its infection by a peculiar cutaneous eruption, sometimes consisting of only a few vesicles attended by unbearable voluptuous tickling itching, often with a peculiar odour. This monstrous internal chronic miasm psora, Hahnemann observes, is the only real *fundamental cause* and producer of all the innumerable forms of disease which are reckoned in

the standard works on pathology as peculiar, independent diseases, under the names of nervous debility, hysteria, hypochondriasis, mania, melancholia, imbecility, madness, epilepsy and convulsions of all sorts, softening of the bones (rachitis), scoliosis, and cyphosis, caries, cancer, fungus hæmatodes, neoplasms, gout, hæmorrhoids, jaundice, cyanosis, dropsy, amenorrhæa, hæmorrhage from the stomach, nose, lungs, bladder and womb, of asthma and ulceration of the lungs, bladder and womb, of impotence and barrenness, megrim, deafness, defects of the senses and pains of thousands of kinds, etc., etc.

Hahnemann spent twelve years in investigating this incredibly large number of chronic diseases, and in ascertaining and collecting definite proofs of this great truth, and also in discovering at the same time the principal remedies (the antipsorics) which together are almost enough for combating this thousand-headed monster of disease in all its diverse manifestations and forms. This monumental work is entitled *THE CHRONIC DISEASES*. By the employment of these antipsoric remedies more suitable for this particular miasm, the homœopathic physician is now enabled to render more essential service to the afflicted humanity and almost invariably to effect a perfect cure.

The primary symptoms of this infectious psoric miasm are its cutaneous eruptions, from the pustular itch to the dreadful leprosy. The disposition of being affected with the miasm of itch is found with almost every individual and under almost all circumstances. As already said, it is only after the whole organism has been thoroughly

permeated by this miasmatic infection that the external skin symptoms become manifested.

§ 81

Hahnemann now proceeds with his discourse on the secondary symptoms of psora.

Laying aside the indeterminable variety of human beings regarding their inherited constitutional peculiarities, we find their equally diverse mode of living and circumstances of life quite potent in the production of that great medley of chronic diseases, those multifarious defects, injuries, derangements and sufferings, described by so many improper ambiguous names in the ordinary pathological works, each of these wrong names hanging upon one single symptom only, as *ague*, *jaundice*, *dropsy*, *consumption*, *leucorrhœa*, etc. as if diseases are of independent character.

In the relating foot-note Hahnemann says, "Some of the causes that exercise a modifying influence on the transformation of psora into chronic diseases, manifestly depend sometimes on the climate and the peculiar physical character of the place of abode, sometimes on the very great varieties in the physical and mental training of youth, both of which may have been neglected, delayed or carried into excess, or on their abuse in business or conditions of life, the matter of diet and regimen, passions, manners, habits and customs of various kinds."

In practice we do not find two cases of rheumatism or apoplexy or convulsions to be identical in all their bearings, yet they are represented in the pathological works as of fixed and unvarying character; hence, on account

of this identical name, they are treated according to a fixed plan, although an identity of treatment cannot be justified solely for the sameness of the improperly applied name. Hahnemann quotes Fritze to say lamentably that "essentially different diseases are designated by the same name."

A pathological name indicates a disease of fixed and unvarying character which, on account of the name, must be treated according to a determinate plan. An identity of name postulates an identity of treatment. Take, for instance, any two patients under what is called typhoid fever, and each will exhibit excessively morbid conditions, resembling each other in one single symptom only. Epidemic diseases also, which are designated by the old school of medicine by particular names, never recur under the same form; on the contrary, at every occurrence it differs considerably from its previous form, in many of its most striking symptoms and its whole appearance.

To quote Hahnemann, "These useless and misused names of diseases ought to have no influence on the practice of the true physician who knows that he has to judge of and cure diseases, not according to the similarity of the name of a single one of their symptoms, but according to the totality of the signs of the individual state of each particular patient, whose affection it is his duty carefully to investigate, but never to give a hypothetical guess at it."

He further remarks, "If, however, it is deemed necessary sometimes to make use of names of diseases, in order, when talking about a patient to ordinary persons, to render ourselves intelligible in few words, we ought only to employ them as collective names, and tell them, e. g.,

the patient has *a kind* of St. Vitus's dance, *a kind* of dropsy, *a kind* of typhus, *a kind* of ague ; but (in order to do away once for all with the mistaken notions these names give rise to) we should never say he has *the* St. Vitus's dance, *the* typhus, *the* dropsy, *the* ague, as there are certainly no diseases of these and similar names of fixed unvarying character."

Even in epidemic diseases, "each is so far dissimilar to all previous epidemics, whatever names they may bear, that it would be a dereliction of all logical accuracy in our idea of things, were we to give to these maladies, that differ so much among themselves, one of those names we meet with in pathological writings, and treat them all medicinally in conformity with this misused name. He observed that the candid Sydenham alone perceived this, when he insisted upon the necessity of not considering any epidemic disease as having occurred before and treating it in the same way as another, since all that occur successively, be they ever so numerous, differ from one another."

§ 82

Having thus discussed the nature of chronic miasms, particularly psora, and the discovery of specific remedies for their treatment, Hahnemann proceeds to guide us to the method of selecting those remedies for the cure of each individual case of chronic disease, as well as in an acute and rapidly developed disease.

For effecting real cure of diseases it is indispensable for the homœopathic physician to carefully apprehend the ascertainable symptoms and characteristics of each case of

CASE-TAKING

disease, with a view to strict particular treatment of each individual patient. Of course, some difference has to be made in our investigation between an acute disease and a chronic one.

Under aphorism 72 we studied the nature and character of *acute disease*. Its chief symptoms strike us and become evident to our senses more quickly than in chronic diseases, hence it requires much less time for tracing the picture of the disease and much fewer questions are required to be asked, everything being self-evident in the case. On the contrary, a *chronic disease* runs through a gradually progressing process for several years, in which the symptoms are much more difficult to be ascertained.

Here the following remarks of Dr. Raue is noteworthy :
“The physician whose researches are directed towards the hidden relations in the interior of the organism, may daily err ; but the homœopathist who grasps with requisite carefulness the whole group of symptoms possesses a sure guide : and if he succeed in removing the whole group of symptoms he has likewise most assuredly destroyed the internal hidden cause of the disease.”

§ 83—90

CASE-TAKING.

By the term “Case-taking” is meant the individualizing examination of a case of disease, and this work is the most important and the most difficult part of the homœopathic art of medical treatment.

A person who aspires to the honourable designation of a

Homœopathic physician must possess (Ref. Aph. 3-4) the following attributes :—

(a) Entire freedom from prejudice, so that he approaches his patient with a clean receptive mind untarnished with any preconceived idea of what disease he is called to cure.

(b) He must possess *sound senses*, so that he can see, hear and feel by touch the manifestations of the disease unerroneously.

(c) He must be fully attentive in observing the signs and symptoms of the disease.

(d) He must be scrupulously truthful and precise in tracing the picture of the disease, *i. e.*, in noting down the subjective and objective symptoms of the individual case of disease.

A strict particular individualizing examination and the selection of an appropriate remedy according to the laws of *similia similibus*, together constitute the *accurate diagnosis* of a disease. The selection of the most suitable homœopathic remedy becomes simplified when we possess an image of disease complete in all its requirements. This can be accomplished by faithfully writing down the symptoms at the first examination.

Hahnemann repeatedly advises that every true practitioner of homœopathy should write down accurately the symptoms of every individual case of disease in all its details, as expressed by the patient, narrated by his friends and observed by himself. This is partially applicable in acute diseases of short duration, because the characteristic symptoms are at once outstanding in such cases and they strike us immediately. "Still there are not a few cases

METHOD OF INVESTIGATION

where such a *seemingly acute* disease is merely the beginning of chronic invalidism, and where we are compelled later on to do that which was omitted at first?"

How should a case of disease be investigated and noted?

The physician should *write down accurately* all that the patient and his attendants tell him, *in the very expressions used by them*. He should advise them at the beginning of the investigation to speak slowly, so that he may write down the important parts of what they say. He should keep silence himself and refrain from interrupting them. For, every interruption breaks the train of thought of the narrators, and all they would have said at first does not occur to them in precisely the same manner after that.

He should begin *a fresh line* for every new circumstance mentioned by the patient and his friends, so that the symptoms shall be all arranged separately one below the other, thus enabling him to add to any one of these, at first vaguely expressed but subsequently more explicitly explained.

When they have finished of their own accord describing the disease, the physician should read over every particular symptom one by one, enquiring about each one of them for further particulars, *e. g.*, the exact period of the day when this symptom occurs, what kind of pain, exactly what sensation and on what precise spot it occurs. Is the pain fitful or continuous or intermittent? How long does it last? Aggravation and amelioration in regard to time, position of the body, and circumstances. All these should be noted down in plain words.

The physician should not put any leading question, *i. e.*, should not frame his questions suggestive of a special answer. For instance, he should not ask, "Did you not feel headache in the afternoon?" For, such questions seduce the patient in giving a false answer, either from indolence or in order to please the doctor, and from which an untrue picture of the disease will be formed, leading to wrong treatment.

In order to obtain further details of the disease as the physician may consider necessary for the proper diagnosis of the case respecting several facts and functions of the body or the patient's mental condition, the physician proceeds to ask further questions concerning these parts and these functions, or the state of disposition or mind; but he must use only general expressions so that his informants will be obliged to give definite details concerning such questions.

Here Hahnemann gives a few model questions to educate us in the mode of conducting our investigations: "What is the character of his stool? How does he pass his water? How is it with his day and night sleep? What is the state of his disposition, his humour, his memory? How about the thirst? What sort of taste has he in his mouth? What kinds of food or drink are most relished? What are most repugnant to him? Has each article its full natural taste, or some other unusual taste? How does he feel after eating and drinking? Has he anything to tell about the head, the limbs, or the abdomen?"

Except in the case of *feigned diseases*, the physician has

SOME MODEL QUESTIONS

chiefly to rely on his patient for a description of his sensations which is obtained by the details given by the patient of his own accord as well by enquiries exemplified in the preceding paragraph, which together complete the requisite information and form a perfect picture of the disease. Still, if the physician feels that he has not yet obtained all the information that he needs, he is obliged and is at liberty to ask more special questions. Herein below is quoted Hahnemann's model questions in this respect :

For example, how often are his bowels moved ? What is the exact character of the stool ? Did the whitish evacuation consist of mucus or fæcas ? Had he or had he not pains during the evacuation, what was their exact character, and where were they seated ?

“What did the patient vomit ? Is the bad taste in the mouth putrid, or bitter, or sour, or what ?—before or after eating, or during the repast ? At what period of the day was it worst ? What is the taste of what is eructated ?

“Does the urine only become turbid on standing, or is it turbid when first discharged ? What is the colour when first emitted ? Of what colour is the sediment ? What does it smell like ?

“How does he behave during sleep ? Does he start during sleep ? Does he snore during inspiration, or during expiration ? Does he lie only on his back, or on his side ? Does he cover himself well up, or can he not bear the clothes on him ? Does he easily awake, or does he sleep too soundly ? How does he feel immediately after waking from sleep ? How frequently does he dream ?

What is the subject of his dream? How does he feel after the dream?

“How often does this or that symptom occur? What is the cause that produces it each time it occurs? Does it come on whilst sitting, lying, standing, or when on motion?—only when fasting, or in morning, or only in the evening, or only after a meal, or when does it usually occur?

“When did the rigor come on?—was it merely a chilly sensation, or was it actually cold at the same time?—if so, in what parts?—or while feeling chilly, was he actually warm to the touch?—was it merely a sensation of cold, without shivering?—was he hot without redness of the face?—What parts of him were hot to touch?—or did he complain of heat without being hot to the touch? How long did the chilliness last? How long the hot stage? When did the thirst come on—during the cold stage?—during the heat?—or previous to it?—or subsequent to it? How great was the thirst, and what was the beverage desired? When did the sweat come on, at the beginning or the end of the heat? or how many hours after the heat?—when asleep or when awake? How great was the sweat?—was it warm or cold?—on what parts?—how did it smell? What does he complain of before or during the cold stage?—what during the hot stage?—what after it?—what during or after the sweating stage?

In women, note the character of menstruation and other discharges, etc.

The above particulars are gathered from the statements of the patient and from those around him, *i. e.* his atten-

SOME MODEL QUESTIONS

dants. These must be *written down* as repeatedly advised by Hahnemann. No honest physician can trust his memory in this regard, especially in cases of chronic disease where the subtle and weighty symptoms are so multitudinous and complex that it is not possible to commit these to memory and utilise while repertorising.

The next procedure in case-taking is for the physician to make a note of what he himself observes in the patient (Ref. to aphorism 6), and to verify how much of that was peculiar to the patient in his healthy state. In this instance also Hahnemann gives a few model queries for our guidance.

“For example, how the patient behaved during the visit,—whether he was morose, quarrelsome, hasty, lachrymose, anxious, despairing or sad, or hopeful, calm, etc., *i.e.*, the patient’s behaviour and conduct should be observed. Whether he was in a drowsy state or in any way dull of comprehension; whether he spoke hoarsely, or in a low tone, or incoherently, or how otherwise did he talk? *i.e.* his power of comprehension and his manner of speech. What was the colour of his face and eyes, and of his skin generally? What degree of liveliness and power was there in his expression and eyes? What was the state of his tongue, his breathing, the smell from his mouth, and his hearing?—were his pupils dilated or contracted?—how rapidly and to what extent did they alter in the dark and in the light? What was the character of the pulse? What the condition of the abdomen? How moist or hot, how cold or dry to touch was the skin of this or that part, or generally? Whether he lay with head thrown back, with

mouth half or wholly open, with the arms placed above the head ; on his back, or in what other position ? What effort did he make to raise himself ? And anything else in the patient that may strike the physician as being remarkable."

§ 91—94

It is not proper to examine the patient during a previous course of medicine, *i. e.* while he is still under the influence of a medicine previously administered, because his symptoms and feelings do not during this period furnish the genuine picture of the disease, but a pot-pourri of the medicinal symptoms and disease symptoms. The true fundamental idea of the *original* form of the disease can be obtained only from the symptoms and ailments from which the patient suffered *before the use of the medicines, or after they have been discontinued for several days* and these must be especially taken note of. (In case of severely acute disease where the physician has no time to lose, he must take note of the most prominent indications that naturally present themselves with remarkable clarity, and prescribe accordingly). When the disease is of a chronic character and the patient has been using medicine upto the time he is visited, it will be advantageous for the physician to wait some days before proceeding to employ any medicine, or, if necessary, to give unmedicated globules or sugar of milk, or a few drops of rectified spirit in water ; then at some subsequent date he will be able to scrutinise with precision the morbid symptoms in their unmixed form presenting the genuine abiding symptoms of the old

malady enabling him to conceive the correct picture of the disease.

But when an acute disease runs a rapid course and admits of no delay, the physician has to be satisfied with the morbid condition that he observes, though composed of alterations caused by medicines; but he should try to ascertain the symptoms that were present before the employment of medicine prior to his visit, with a view to form a reasonable idea of the complete picture of the disease in its original unmixed condition. The use of inappropriate drugs generally renders the original disease more serious and dangerous, hence it demands prompt and efficient aid; the physician will thus be able to combat it with suitable homœopathic remedy and save the patient from succumbing to the effects of the injurious drugs employed on him.

Apropos of ascertaining the exciting and maintaining cause of diseases—*causa occasionalis*—as advised in aphorism 7, Hahnemann further advises that in certain cases, either in a disease that has appeared a short time or one of a chronic nature that has stayed previously for a considerable time, there may be some obvious cause which should be ascertained from the patient or his friends by questioning them privately and by careful interrogation. Hahnemann's remark in the relating foot-note is as interesting as it is illuminating. He says: "Any causes of a disgraceful character, which the patient or his friends do not like to confess, at least not voluntarily, the physician must endeavour to elicit by skilfully framing his questions, or by private information. To these belong poisoning or attempt-

ed suicide, onanism, indulgence in ordinary or unnatural debauchery, excesses in wine, cordials, punch and other ardent beverages, or coffee, over-indulgence in eating generally, or in some particular food of a hurtful character, infection with venereal disease or itch, unfortunate love, jealousy, domestic infelicity, worry, grief on account of some family misfortune, ill usage, balked revenge, injured pride, embarrassment of a pecuniary nature, superstitious fear, hunger, or an imperfection in the private parts,—a rupture, a prolapsus, and so forth.”

Referring back to aphorism 5 in regard to finding the particulars of the most probable *exciting cause* of an acute disease, as also the most significant points in the whole history of the chronic disease with a view to discover its *fundamental cause*, Hahnemann gives special stress on the consideration and scrutinization of the particular circumstances of the patient with regard to his ordinary occupations, his usual mode of living and diet, his domestic situation, and so forth, for the purpose of determining what there is in them that may tend to produce or to maintain disease, so that by the removal of these the recovery of the patient may advance. Here also in the relating foot-note Hahnemann gives a few illustrating hints: “In chronic diseases of females it is especially necessary to pay attention to pregnancy, sterility, sexual desire, accouchements, miscarriages, suckling, and the state of the menstrual discharge. With respect to the last-named more particularly, we should not neglect to ascertain if it recurs at too short intervals, or is delayed beyond the proper time, how many days it lasts, whether its flow is continuous or interrupted,

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what is its general quantity, how dark is its colour, whether there is leucorrhœa before its appearance or after its termination, but especially by what bodily or mental ailments, what sensations and pains—it is preceded, accompanied or followed; if here is leucorrhœa, what is its nature, what sensations attend its flow, in what quantity it is, and what are the conditions and occasions under which it occurs."

§ 95—98

In contrast to acute diseases, the signs of disease in chronic cases must be investigated more carefully, especially in regard to the circumstances—the conditions—of their aggravation and amelioration; 'the most minute peculiarities must be attended to'—because in chronic diseases these peculiarities are not unoften the most characteristic, and a cure can only be accomplished by noting these most accurately; and also because by suffering these peculiar minute symptoms, apparently insignificant, the patient becomes so very accustomed to them that they pay no attention to the accessory symptoms, thinking them of no consequence, as a necessary part of their condition—almost as health, though they are full of meaning and often very helpful in deciding upon the right remedy.

It is the experience of every physician that the disposition of patients always differs from each other, no two are alike in this respect, particularly the so-called hypochondriacs and highly sensitive persons who cannot endure any suffering and who describe their symptoms with too

much emphasis ; while others, with the object of enlisting especial sympathy of the physician to give them relief, narrate their troubles with exaggerations. There are, however, patients of a counter nature who narrate their symptoms vaguely, forego mentioning a number of their symptoms, or declare some of them to be of no weight ; this they do 'partly from indolence, partly from a kind of mildness of disposition or weakness of mind, and thus refrain from stating a number of their symptoms, describe them in vague terms, or allege them to be of no consequence.' Although the physician should place better reliance on the narration of his patient than on the statements of his friends and attendants who usually make errors and alterations in describing the symptoms, yet, in all cases and particularly in the chronic ones, the physician's special carefulness, tactfulness, discernment of human nature, caution in directing the inquiry and immense patience are positively required to enable him to sketch out the real and complete picture of the disease in all its peculiarities.

In acute disease where the recent deviation from health with all its phenomena remains fresh in the memory of the patient and his friends, and nature throws up so conspicuously before the eyes of the physician all that he needs knowing, he has much less to investigate ; 'they are for the most part spontaneously detailed to him.' In acute diseases the chief symptoms strike us and become evident to the senses more quickly than in chronic diseases, hence much less time is required for tracing the picture of the disease and much fewer questions to be asked.

INVESTIGATION OF CHRONIC CASES

In this laborious work, the physician has within his reach excellent help in the Repertories of Boenninghausen, Boger, Jahr, Knerr and Kent ; an intimate acquaintance with these magnificent works should never fail any conscientious physician to hit the target. The stupendous work of Knerr is indeed a radiant magnifier of the subtle and intricate symptoms in chronic diseases. A knowledge of repertorizing and *evaluating* the symptoms is indispensable and invaluable in the treatment of all diseases, especially in chronic cases. Here, it should be remembered that any success in this work rests upon the solid foundation of proper case-taking. I must at once acknowledge my unredeemable debt of gratitude to Dr. L. D. Dhawale, B.A., M.D. (Bombay), President of the Homœopathic Post-Graduate Association, Bombay ; Hony. Consulting Physician, K. E. M. Hospital, Bombay ; Hon. Physician, Bai Jerbai Wadia Hospital for children, Bombay, for the rigid and critical drilling in case-taking, repertorization and evaluation, through which he impelled me to my immense gain and to the incalculable benefit of my patients. His brilliant brochure entitled "An Introduction to Homœopathy" is a remarkable unfoldment of Hahnemann's art and science.

EPIDEMIC AND SPORADIC DISEASE

§ 191—102

These two varieties come under the category of *acute* disease, and these should be treated accordingly. **Sporadic diseases** are caused by atmospheric influences or condition of water and soil, and injurious agents, the susceptibility of being morbidly affected by which is possessed by only

a few persons at one time. This kind of diseases attacks several persons at the same time, here and there. **Epidemic diseases** are allied to the sporadic variety and attack many persons at one time with very similar sufferings from the same cause. When they prevail in thickly populated localities, they become *infectious* and *contagious*. In this variety fevers arise, in each instance of a peculiar nature. The cases of disease, having an identical origin, set up an identical morbid process in all persons affected by it; and when left to themselves, terminate in a moderate period of time in death or recovery. War, famine, floods are frequently the producers or the exciting causes of such attacks. Sometimes they are due to peculiar acute miasm which attack persons in two ways, viz.: (a) once in a life-time, as smallpox, whooping cough, mumps, etc.; (b) recur frequently in almost the same manner, as Plague, Cholera, Intermittent fevers, etc.

In treating such diseases, the totality of symptoms of every individual case must be investigated thoroughly for itself, as if every case were something new, novel and unknown, in order to obtain the pure picture of every prevailing disease, with no concern as to whether or not something similar has ever before appeared in the world. In this respect no conjecture or supposition can replace any actual observation, and no physician should assume or accept that the case before him is fully or partially known. A careful investigation will convince him that every case of such prevailing disease vastly differs from all previous epidemics, and in many respects presents some phenomena of a unique character. Therefore, in the mode of examin-

EPIDEMIC DISEASES

ing and treating a disease of this kind the physician must proceed as he would do in treating every new case of any other disease, without being influenced by certain pathological names falsely applied—excepting to such epidemics that result from a contagious principle that always remain the same, such as small pox, measles, etc. He must scrupulously adhere to this instruction if he desire to practice medicine in a real and radical manner, that is, if he intend to be a true practitioner of the real healing art and to radically cure the patient.

An epidemic being a collective disease, the physician cannot become familiar with its totality of signs and symptoms, at once gaining a knowledge of its complete picture by seeing the first case of an epidemic disease. 'It is only by a close observation of several cases of every such collective disease that he can become conversant with its signs and symptoms'. But a carefully observing physician will be able to impress in his mind a characteristic sketch of it from examining the first few cases, two or three, and to select the accurate homœopathic remedy for it. In the relating foot-note Hahnemann observes: "The physician who has already, in the first few cases, been able to choose a remedy approximating to the Homœopathic specific, will, from the subsequent cases, be enabled either to verify the suitability of the medicine chosen, or to discover a more appropriate—the most appropriate—homœopathic remedy."

As in other diseases, so also in diseases of this kind the symptoms must be written down; having done so in several cases the delineation of the disease will be more

and more complete, more characteristic and significant symptoms will come out in bold relief, the general symptoms, e. g., loss of appetite, sleeplessness, etc., will become more and more manifest as to their peculiarities, and the more marked, special and rare symptoms, at least in this combination, will become prominent, constituting the true and complete picture of this disease. This can only be ascertained from the sufferings of several patients of different constitutions, affected as they are with the disease prevailing at one and the same time, having been infected with the *same* disease. It is not possible to acquire this knowledge from one single patient. It should be remembered that these epidemic diseases are generally of an acute character. *It however often happens in some cases of epidemic disease that a chronic miasm lurks in the constitution of the patient hindering his recovery.* In the process of his investigation the physician must explore it before he can expect to hit upon the appropriate remedy and effect complete recovery.

MIASMATIC CHRONIC DISEASE

§ 103—104

Likewise, in treating the miasmatic chronic maladies the physician must gather the whole array of the symptoms, especially where *the psora miasm* lingers as their essential nature, in their minutest details, which can only be 'ascertained from the observation of *very many* single patients affected with such a chronic disease ;' in individual patients we obtain only in a portion of the tremendous marshalling of symptoms which in their totality constitute the malady in its entirety. To recapitulate the nature of such chronic

miasm we should refer to aph. 78, 79 and 80. Hahnemann asserts that without a complete survey and collective picture of these symptoms the appropriate antipsoric remedy for curing the malady cannot be discovered by any physician. Here again the physician must put down in writing all particulars of his observations which will enable him to study the picture without flaw.

Once again Hahnemann rubs into his readers the supreme importance and the great advantage of having in writing an accurately sketched picture of the disease under treatment, which, he says, is the most difficult part of the task undertaken by the physician. He writes thus: "The physician has then the picture of the disease, especially if it be a chronic one, always before him to guide him in his treatment; he can investigate in all its parts and can pick-out the characteristic symptoms, in order to oppose to these, that is to say, to the whole malady itself, a very similar artificial morbific force, in the shape of a homœopathically chosen medicinal substance, selected from the list of symptoms of all the medicines whose pure effects have been ascertained." The physician has, in this written chronicle, the very great advantage of a reliable document to refer to when at any time in course of the treatment he wants to find out what has been the effect of his medicine and what change has taken place in his patient's condition; and at every fresh examination he has only to delete from the list of symptoms written down on his first visit such symptoms as have disappeared or have ameliorated, to mark those that still remain, and to add any new symptoms that may have accrued in the case.

PART III

KNOWLEDGE OF MEDICINE.

§ 105—111

In the preceding discourse, having advised fully how to acquire a complete knowledge of the individual case of disease that a physician undertakes to cure, Hahnemann now begins a new chapter containing indisputable rules for acquiring true knowledge of medicines and their therapeutic use ; that is, *a knowledge of the instruments intended for the cure of the natural diseases*. This is the second point of the business of a true physician.

For the purpose of effecting a cure on homoeopathic principle (and this is the only scientific, rational and by itself a complete therapeutic law of cure), the physician must produce in his patient an *artificial* disease whose symptoms are as similar as possible to the principal symptoms of the natural disease under treatment ; and to do this he must ascertain the pathogenetic power of the medicines, in order to select from among them the most suitable one carrying similarity of symptoms to the greatest measure.

To equip himself with such armamentarium, the physician must know the entire disease-producing effects of several (a large number of medicines) medicinal substances, carefully noting all the morbid symptoms and alterations in the health that each of the medicinal substances is especially capable of producing in a healthy individual. Thus only he will be able to find among these medicinal

substances and to select suitable homœopathic remedies for most of the natural diseases.

But to ascertain the pure effects, the disease producing power of these medicinal substances, every one of them must be administered to healthy individuals in order to obtain their true effects ; because, if administered to a sick person, even singly and alone, the expected alterations of health in their exactness can hardly be observed owing to their getting mixed up with symptoms of the disease.

Therefore, in order to accurately ascertain what changes, symptoms and signs each individual medicinal substance produces on the health of the body and the mind, what peculiar effects on the health of individual persons are produced by them, what components of disease they have the tendency and ability to produce, they must be employed in moderate doses by way of experiment on *healthy* persons. And in aphorisms 24 to 27 it has been indisputably established, and confirmed by observation, that this power they possess of changing the state of man's health constitute all the curative power of medicines under the sole and inviolable law of *similia similibus curanter*.

Hahnemann says in the foot note : "Not one single physician, as far as I know, during the previous two thousand five-hundred years, thought of this so natural, so absolutely necessary and only genuine mode of testing medicines for their pure and peculiar effects in deranging the health of man, in order to learn what morbid state each medicine is capable of curing, except the great and immortal Albrecht Von Haller. * * * But *no one, not a single physician*, attended to or followed up this invaluable hint."

Hahnemann persevered in his experiments with many medicinal substances on the fixed principle stated in aphorism 108, and in his perfect conviction of its great truth he boldly and unhesitatingly declared that "it is only by the homœopathic employment of medicines that the certain cure of human maladies is possible." In the relating foot-note he comments :

"It is impossible that there can be another true, best method of curing dynamic diseases (*i. e.*, diseases not strictly surgical) besides homœopathy, just as it is impossible to draw more than one straight line betwixt two given points. He who imagines that there are other modes of curing diseases besides it, could not have appreciated homœopathy fundamentally nor practised it with sufficient care, nor could he ever have seen or read cases of properly performed homœopathic cures; nor, on the other hand, could he have discerned the baselessness of all allopathic modes of treating diseases and their bad or even dreadful effects, if, with such lax indifference, he places the only true healing art on an equality with those hurtful methods of treatment, or alleges the latter to be *auxiliaries* to homœopathy which it could not do without! My true, conscientious followers, the pure homœopathists, with their successful, almost never-failing treatment, might teach these persons better."

The morbid lesions (disease symptoms) that resulted from medicinal substances therapeutically employed or accidentally taken, or taken for suicide as noted by authors previous to Hahnemann and as also recorded in current medical literature, were caused by large and lethal doses;

PRIMARY AND SECONDARY ACTIONS

these symptoms coincide with the observations of Hahnemann when experimenting with the same substances upon himself or on other healthy individuals. These proofs of the harmful and poisonous character of such substances were never dreamt of by any physician to be the curative power of the such substances when employed against natural diseases bearing similar symptoms. It was divinely ordained for Hahnemann to discover this power. It reveals "neither by any ingenious *a priori* speculations, nor by the smell, taste or appearance of the drugs, nor by their chemical analysis, nor yet by the employment of several of them at one time in a mixture in diseases"; but these morbid symptoms of the drugs now form the basis of the true, pure materia medica of Hahnemannian Homœopathy.

§ 111—120.

It is according to the fixed, eternal laws of nature that medicinal substances produce morbid changes in the healthy human body, and by virtue of this power they produce certain reliable disease symptoms, each according to its own peculiar character.

Every medicinal substance deranges more or less the vital force, with a certain alteration in the health of the individual for a longer or shorter period, by exciting peculiar signs and symptoms. This is called **the primary action** of the medicine. The vital force acts as if compelled to submit passively to the power of the medicinal dynamis (Aph. 63) and take impressions of the actions of the medicinal substance—the artificial disease-force. Subse-

quently the vital force appears to react, that is to say, rouse itself and develop an opposing power; the resistance is indeed 'the automatic action of our life-preserving power' which is called the **secondary action**, the counter-action. For the most comprehensive explanation of these two actions, that is, the primary action of the medicinal dynamis and the secondary action of the vital force in opposition to that primary action, the reader is referred to Aphorisms 62 to 67. The narcotic drugs, however, stand in exception to this general mode of action of medicinal substances. The narcotic medicines are commonly administered to subdue, in their primary action, the sensibility and the sensation of pain, sometimes the mental and physical irritability; but in their secondary action, even from more moderate experimental doses, increased sensibility and greater irritability are frequently exhibited in the case under treatment. The results of the action of opium and its derivatives, of the various synthetic narcotics prepared in modern laboratories and even of castor oil, are eloquent testimony to the correctness of Hahnemann's observation.

But in the Hahnemannian experiments with moderate doses of medicines on healthy human body, only the primary action of longer or shorter duration is met with; the secondary action is not brought to play owing to the smallness of the doses which do not excite any such obvious reaction of the vital force.

In these experiments (in Hahnemannian language it is called *proving*), in the case of some medicines, symptoms appear which are partly, or under certain conditions directly, opposite to the other symptoms that have previously

ALTERNATING ACTION OF MEDICINES

or subsequently appeared with the same medicinal substance. These opposite symptoms, Hahnemann warns, should not be taken as the actual secondary action or reaction of the vital force. They are called *alternating symptoms*, only representing the alternating state of the paroxysms of the primary action.

Furthermore, the pathogenetic symptoms of medicines do not appear uniformly in all individuals experimented upon. Some are produced in a large number of individuals, others only in a few persons, and still others only in very few healthy bodies. Therefore, experiments with no medicine are complete unless and until they have been conducted upon quite a good number of persons, a point which Hahnemann deals with in his subsequent discourse.

For a medicinal substance to produce morbid alterations in the health of man, two things are required, *viz.*, firstly the inherent power of the influencing substance, and secondly the competency of the vital force that animates the organism to be influenced by it. Idiosyncrasies, however, may becloud the manifestation of the action of certain medical substances on some peculiar constitutions, but this impression is actually done on every healthy body, as is evident from cures effected by them on the principle of symptom-similarity.

Idiosyncrasy means the peculiar physical constitution which, although otherwise healthy, possesses a disposition of being easily influenced by certain substances which apparently produce no impression or change in many other individuals. For instance, the smell of roses produces *corrhyza* in some few persons, jackfruit excites dangerous diarrhœa in

some, etc. Hahnemann remarks in the foot-note : "Some few persons are apt to faint from the smell of roses and to fall into many other morbid and sometimes dangerous states from partaking of mussels, crabs or the roe of the barbel, from touching the leaves of some kinds of sumach, etc." He cites two specific facts from history : "Thus the Princess Maria Porphyrognita restored her brother, the Emperor Alexius, who suffered from faintings, by sprinkling him with rose water in the presence of his aunt Eudoxia ; and Horstius saw great benefit from rose vinegar in cases of syncope."

And let us note at once that every medicine produces on the living human body the *peculiar* symptoms which solely belongs to itself and cannot be produced in the same manner by any other medicinal substance of a different kind. The action of every medicine differs from every other medicine. Hence it follows that in the case of a disease, the medicine unerringly indicated on its symptom-similarity cannot be substituted by any other remedy in the materia medica. "In the homoeopathic therapeutics there can be no such things as surrogates."

Medicines are mainly drawn from the vegetable and mineral kingdoms, and it is obvious that among the members of the vegetable kingdom there is difference between one species of plant from every other species and genus, in their appearance, mode of life and growth, in their taste and smell ; and likewise such differences exist between one mineral and all other minerals, between one salt and all others salts in their external and internal physical and chemical properties. In their pathogenetic and therapeutic

NO CONFUSION OR SUBSTITUTE

effects also they naturally differ and diverge among themselves. In the words of Hahnemann, "Each of these substances produces alterations in the health of human beings in a peculiar, different, yet determinate manner, so as to preclude the possibility of confounding one with another."

The relating foot-note contains the following remarks: "Only those who do *not* know the pure, positive effects of the different medicines can be so foolish as to try to persuade us that one can serve in the stead of the other, and can in the same disease prove just as serviceable as the other. Thus do ignorant children confound the most essentially different things, because they scarcely know their external appearances, far less their real value, their true importance and their very dissimilar inherent properties."

With a view to the correct selection of medicines for their employment in diseases, they must be thoroughly and most carefully distinguished from one another by means of pure and accurate proving on healthy human being. It should be remembered for all time that it is only by the correct selection of medicines on the basis of precise similarity of symptoms that the health of the body and of the mind can be rapidly and permanently restored. For the same reasons, one medicine cannot be substituted for purposes of provings.

PROVING OF MEDICINES.

§ 121—127.

Amongst medicinal substances there are some possessing heroic power, others of milder power, and yet some having

only the weakest strength. Hence, in the matter of proving, the doses of these substances require adjustment in proportion to their inherent and natural strength, as also in consideration of the strength of the persons engaged for these experiments. Even to persons of robust health the strong medicinal substances should be employed in small doses, and substances of milder power should be given in greater quantities; and while making experiments with the very weakest ones, the provers should be delicate, irritable and sensitive persons. But in all instances the provers should be free from diseases, so that the results (the pathogenetic symptoms) may not be contaminated by the symptoms existing in the body and in the mind of the sick individual.

Only such medicinal substances should be employed for purposes for experiments (proving) about whose purity, genuineness and energy we are thoroughly assured. Upon these facts depend precision of the medical art and the welfare of the mankind for generations to come. Playing on the life of a prover with unknown medicines is tantamount to the vilest offence against God and the greatest felony against the State.

FOR PURPOSES OF PROVING THE MEDICINAL SUBSTANCES MUST BE EMPLOYED IN THE FOLLOWING FORMS :

(a). Every medicinal substance must be employed quite alone, perfectly pure. No other substance must be mixed with it, and the prover must not take anything of a medicinal nature during the whole period of proving, neither on the day he starts the proving nor on several subsequent

IN WHAT FORMS THE DRUGS SHOULD BE PROVED

days, in order to observe the pure effects of the medicine he is proving.

(b). Of the indigenous plants, its freshly expressed juice, mixed with a little alcohol for preservation, should be used.

(c). Exotic (imported) vegetable substances should be used in the form of powder, or tincture prepared with alcohol when they were in fresh condition, and afterwards mixed with a certain proportion of water.

(d). Salts and gums should be dissolved in water, immediately before taking.

(e). In case of any plant that can be procured only in its dry condition, and if its powers are naturally weak, it should be cut in small pieces and an infusion made by pouring boiling water on same for extracting its medicinal parts. This should be swallowed immediately after its preparation while still warm, because expressed vegetable juices and aqueous infusions of herbs rapidly decompose and ferment and lose their medicinal properties, if not preserved by the addition of alcohol.

THE MEDICINES MUST BE TESTED ON BOTH MALES AND FEMALES, FOR THE PURPOSE OF OBSERVING THE ALTERATIONS OF THE HEALTH THEY PRODUCE IN THE SEXUAL SPHERE.

The diet of the prover, during the whole period of the proving, must be strictly regulated. He should, as far as possible, refrain from using spices. They should be simple, nutritious and plainly cooked. Vegetables like young green-peas, boiled potatoes and carrot are allowable, because they are the least medicinal vegetables. Other green

vegetables, roots (such as radish, asparagus, etc.), and all salads and herb-soups, must be deleted from his diet, because these articles, even when most carefully prepared, possess some disturbing medicinal properties. The prover must for a considerable time previous to commencing these experiments, abstain from using wine, brandy, coffee, tea, all stimulating drinks and beverages.

The prover of a medicine must satisfy on the following points :

(a) He must be thoroughly trustworthy and conscientious.

(b) During the whole period of the proving he must avoid all overexertion of mind and body,

(c) He must, during the whole of that time, refrain from dissipation and disturbing passion.

(d) He should have no urgent business to distract his attention.

(e) He must carefully devote to the observation of the alterations in his mind and in the health of his body and must not be disturbed in any way while engaged in the proving of the medicine.

(f) His body must be in such state of health that is good and normal standard for him.

(g) He must be sufficiently intelligent to express and describe his sensations accurately.

THE PROCEDURE FOR PROVING DRUGS

§ 128—132.

It is confirmed by the most recent observations that the powers of medicinal substances in their crude state lie

EFFECTS OF MEDICINE

dormant and are developed and made active to an incredible extent when potentized by the simple operations of trituration and succussion. They should therefore be employed in high dilutions for purposes of proving. Regarding the determination of their inherent strength we are advised in aphorism 121.

The best plan to adopt is to give to the prover, on an empty stomach, daily from 3 to 6 every small globules of the 30th. potency of the drug to be proved, moistened with a little water or dissolved in a small quantity of water and thoroughly mixed ; he should continue this for several days. In the event of such a dose producing only a slight effect, a few more globules may be taken daily until the effects become strong enough to elicit the alterations in health conspicuously.

The effects of medicines are not equally great on all persons. They greatly vary in this respect according to the individual constitution and idiosyncrasy of the prover. Moderate doses of a powerful drug may scarcely affect an apparently weak individual, while the same person may be strongly affected by drugs of a much weaker kind. On the contrary, a very robust person may be considerably affected by an apparently mild medicine, while stronger drugs produce in him only slighter symptoms. The exact susceptibility of a person cannot be anticipated.

It is, therefore, advisable to begin, in every instance, with a small dose of the drug, and where necessary, 'to increase the dose more and more from day to day.'

There are different methods of conducting the proving of drugs, namely :

In order to obtain a knowledge of the genius of the medicine to be proved, all sensations, every alteration in the state of the health of the body and of the mind should be noted down with accurate description and in *sequential order* of the phenomena, that is, putting before each symptom a consecutive numerical figure to mark the order of succession of the symptoms, and accurately noting down the period at which each symptom occurs; so that the order of the primary actions as well as of the alternating actions may be precisely known. The duration of each symptom should also be noted carefully. This advantage, however, is only possible if the very first dose administered shall have been sufficiently strong to produce effects at the commencement, and provided the experimenter possess sufficiently delicate sensitiveness and be very attentive to his sensations.

Another method is to give medicine to the same person for several successive days in ever-increasing doses. By this method we learn the various morbid states which the medicine is capable of producing *in a general manner*, but we can not obtain symptoms in their regular order of succession. In this method of proving a second or subsequent dose may act curatively and remove any one or more of the symptoms produced by the previous dose, or even develop in its place quite an opposite state. Such symptoms are ambiguous and should be put within brackets, until at some purer experiments in future it can be ascertained whether such symptoms are the results of the secondary action (reaction of the organism) or the alternating action of the medicine.

MODALITIES AND SENSATIONS

Another method is to ascertain only the symptoms of weak medicinal substances even of the mildest nature, without reference to the sequential order or the duration of action. In this method of proving the preferable course is to test the medicine on sensitive persons, by giving it for several successive days, increasing the dose every day.

§ 133—136.

MODALITIES OF SYMPTOMS, that is, the condition of their aggravation and amelioration, are of very great value in the treatment of diseases, and SENSATIONS are of no less importance. Hence, any particular sensation derived from the medicine must be carefully noted for determining the character of the symptom; while any such symptom lasts, the prover should observe whether by taking various positions, by moving the affected limb, by walking in the room or in open air, by standing, sitting or lying down, by tightly bandaging, by applying warmth, this particular symptom is increased, decreased or removed altogether, and whether it returns by adopting again the position in which it was first noticed; also the modalities caused by eating or drinking, by any other action of the body, *i. e.* belching, urination, stool, passing flatus, etc.: what time of the day or night it usually occurs in the most marked way, etc. By most attentively observing such peculiarities we can discover the very characteristic expression of each symptom.

But, owing to individual susceptibility (*idyosyncrasy*), a medicine does not exhibit all symptoms peculiar to it in one prover, neither all at once, nor in the same experiment.

Some of the symptoms are produced in one person mainly at one time, others subsequently while proving for the second or third time. In another person some other symptoms manifest, but their way of exposition is such that some of the phenomena which are noticed in the fourth, eighth or tenth prover, were observed in the second, sixth, ninth person, and they may not arise at the same hour. We thus find that some of the symptoms of a medicinal substance skip over some provers and exhibit in others. Therefore, in order to obtain the whole symptomatology of a medicine nearing completeness, the medicine should be experimented on a good number of suitable individuals of both sexes and of various mental and physical constitutions. We are only convinced of its unsullied powers of producing morbid conditions in a healthy individual when in the later provers we do not observe any symptom of a new type emanating from its action, and notice over and over again only repetition of the symptoms already observed in the previous provers. Yet, in every medicinal substance there exists, in conformity with the eternal and indubitable law of nature, a trend to excite all these symptoms in every human being, (Ref. Aph. 117). Therefore, when the medicine is administered homœopathically in the case of a natural disease, it quietly produces in the patient an artificial disease-condition simulating the natural disease he is suffering from, and under the laws of symptom-similarity it rapidly and permanently relieves him and annihilates his original disease. Even rare symptoms that are produced in a healthy individual, when found in a disease, will be useful in curing the patient.

DISADVANTAGES OF LARGE DOSES IN PROVING

RARE SYMPTOMS are those that seldom appear, and but in few individuals in proving a medicine ; yet these rare symptoms are actually impressed upon all the provers, though not with the same degree of clearness in all. These rare symptoms do not fail to effect a rapid and permanent cure of a natural disease, when employed with symptom-similarity.

§ 137—140.

Hahnemann now mentions the disadvantages of employing large doses of medicines in proving. These are :

(a) A danger of poisoning and toxic effects.

(b) Among the symptoms produced, a number of secondary effects are manifested by the reaction of the organism, and get mixed up with primary effects.

(c) The effects of primary action are manifested in such hurried succession and confusion, and with such violence that it becomes impossible to observe any thing accurately.

On the contrary, the medicinal doses, if moderate within certain limits when employed for proving, will produce much more distinctly the primary effects, and will develop only those symptoms that are worth knowing, and these will appear without being mixed up with secondary effects or reactions of the vital force.

But with all these precautions in regard to the moderation of doses employed in experimenting medicines, pure symptoms can be observed only when we select a prover who is truthful and temperate in all respects, who has delicate feelings and is capable of directing the minutest attention to sensations produced in him by the medicine he is proving.

When a proving is conducted according to the conditions laid down in aphorisms 124 to 127, and in the manner directed in the aphorisms just preceding, it should be noted that all symptoms which appear during the action of medicine under proving are solely derived from this medicine itself. The recurrence of any previously experienced symptom shows that the prover, on account of his peculiar physical constitution, is particularly disposed to such sufferings. Such symptoms do not appear spontaneously while the medicine is exercising its action over the whole organism; they are certainly produced by the medicine.

The most dependable proving of the pure effects of unmixed medicines for their power in altering the human health, and the most reliable catalogue of artificial diseases and symptoms developed by them on healthy human beings, are those derived from the provings implemented on himself by a physician who is healthy, unprejudiced and sensitive, and carries on the experiment with all the care and caution required herein above. It is then that he notices with the greatest conviction all things that he has encountered in his own person. "By such observation on himself he will be brought to understand his own sensations, his mode of thinking and disposition (the foundation of all true wisdom) and he will also be trained to be, what every true physician ought to be, a good observer." It is an inestimable advantage to acquire a true knowledge of the curative power of medicines.

But in circumstances where he can not conduct the proving on his own self, but has to give it to another person, that prover must write down distinctly all the

symptoms, sensations in his body and mind, all changes, of health experienced by him as soon as they occur, mentioning, after having taken the medicine the time when each symptom appears and how long it lasts. If the experiment is only of a short duration the physician should, immediately at the conclusion of the proving, scrutinize the report in the presence of the prover, or where the trial lasts several days he should do this every day, so that he may question the prover about the precise nature of every one of the symptoms while these are yet fresh in his memory ; and he should write down the exact details that are elicited from his query or make such corrections as may be suggested by the prover. It is the physician who informs the world the effects of these provings, upon which the medical world depends for treating the sick and restore his health. "He is thereby responsible for the trustworthiness of the person experimented on and for his statements, and justly so, as the weal of suffering humanity is here at stake,"

§ 141—142.

Of all other works, the proving of medicines is the most important and demands the greatest moral certainty and fidelity ; because, this forms the main pillar of the whole edifice of the only true art of healing. Hahnemann strongly condemns the practice of employing paid experimenters living at a distance and unknown to the physician ; for, the informations so obtained are not carried on under the direct observation of the physician and cannot be verified by him from day to day.

In the relating foot-note Hahnemann remarks : "The observer of others must always dread lest the experimenter did not feel exactly what he said, or lest the experimenter did not describe his sensations with the most appropriate expressions. He must always remain in doubt whether he has not been deceived, at least to some extent. These obstacles to the knowledge of truth, which can never be thoroughly surmounted in our investigations of the artificial morbid symptoms that occur in others from the ingestion of medicines, cease entirely when we make the trials on ourselves. He who makes these trials on himself knows for certain what he has felt, and each trial is a new inducement for him to investigate the powers of other medicines."

Are the provings of drugs injurious to the health of the provers ?

During the whole course of a proving, the artificial disease conditions excited by the minute doses of the medicinal substances, pass off spontaneously within a short time, without leaving the slightest trace of indisposition or being injurious to the health of the majority of the provers. Experience proves on the contrary that by these frequent experiments with moderate doses the prover becomes all the more robust, and his organism becomes strengthened to resist external invasions by all artificial and natural morbid noxious agents, to repel all adverse external influences. (Foot-note to aph. 141). It is quite a different question when persons ingest medicines in mighty lethal doses. Such doses only manifest the physiological action of the

WHAT IS MATERIA MEDICA ?

medicines, not their pathogenetic and curative power. Hahnemann has thoroughly discussed it in aphorism 110.

The pure effects of medicine *in diseases* is indeed very difficult of investigation. In treating a disease, especially one of a chronic character which usually remains unchanged in its symptoms, when a simple medicine is given for the purpose of curing same, some symptoms of the medicine have been observed to appear which are quite distinct from the pathological symptoms of the disease under treatment ; and "symptoms which, during the whole course of the disease might have been observed only a long time previously (or never before, consequently new ones" should be reckoned as symptoms of the medicine. Hahnemann says that it is a matter belonging to the higher art of judgment and must be left exclusively to masters in observation. These should be studied with reference to aphorism 136.

WHAT IS MATERIA MEDICA ?

§ 143—145

A true materia medica is a collection of real, pure, reliable and authenticated symptoms of simple medicinal substances, ascertained to belong to each of the medicines only after complete proving. It is a record of the artificial morbid state which each medicine is capable of producing in the healthy human body, showing the natural disease state which that medicine cures rapidly, surely and permanently by virtue of symptom similarity.

It is a sacred trust to all practioners of homeopathy and should be kept uncontaminated by excluding everything that is conjectural, all that is mere assertion or imaginary.

It should be written in the pure language of nature, after being carefully and honestly investigated and critically revised. Punning and flowery language must not be indulged in.

By such cautious and honest provings we can considerably increase our stock of medicines from which we can find out a homœopathic remedy for *each* of the infinitely numerous diseases in nature. When our true materia medica becomes enriched by the help of accurate and trustworthy provers and observers, there will hardly remain any natural disease for which a suitable homœopathic remedy will be found wanting, for restoring patient's health in a rapid, gentle, sure and permanent manner, a performance which no other therapeutic method with its unproved component medicines can achieve, but which only alter and aggravate chronic diseases, retard recovery from acute diseases and frequently hazard the life of the patient. (Ref. to aphor. 22, foot-note).

PART IV

APPLICATION OF MEDICINE

§ 146—149

Apropos of the third aphorism, Hahnemann now delineates the third qualification of the person who aspires to be a Homœopathic physician. It is the knowledge of the medicinal power of each individual medicinal substance used according to the methods enjoined in aphorisms 105 to 245, 'in order to effect the homœopathic cure of natural diseases'.

The general rule for the therapeutic application of homœopathic medicine is that the most certain homœopathic remedy is the one whose pathogenetic symptoms have *the greatest similarity* to the totality of the symptoms of a given natural disease, and this medicine is its specific homœopathic remedy.

Keeping in view the discourse in aphorisms 11 to 13, 33, and 279, a case of *acute* natural disease recently developed will be cured with disappearance of its symptoms unperceptibly in a few hours, if the accurately selected homœopathic medicine is administered properly in regard to its dose and repetition.

An older disease, *i.e.*, a more chronic one will take a somewhat longer time to disappear along with all signs of uneasiness, by administering several doses of the same remedy in higher potencies, or after *carefully selecting* some other homœopathic medicine which is more similar to the disease. Recovery will rapidly and imperceptibly follow,

the patient's vital force will be liberated from the grip of the disease dynamis, and will re-establish its harmonious functions on the organism as before in its health, and the patient will be gaining strength again.

In the matter of careful selection of 'another more similar homœopathic medicine' cited in the preceding paragraph, Hahnemann makes the following remark :

"But this laborious, sometimes very laborious, search for and selection of the homœopathic remedy most suitable in every respect to each morbid state, is an operation which, notwithstanding all the admirable books for facilitating it, still demands the study of the original sources themselves, and at the same time a great amount of circumspection and serious deliberation, which have their best reward in the consciousness of having faithfully discharged our duty. How could this laborious, care-demanding task, by which alone the best way of curing diseases is rendered possible, satisfy the gentlemen of *the new mongrel sect*, who assume the honorable name of homœopaths, and even seem to employ medicines in form and appearance homœopathic, but determined upon by them anyhow (*quidquid in buccam venit*), and who, when the unsuitable remedy does not immediately give relief, instead of laying the blame on their unpardonable ignorance and laxity in performing the most important and serious of all human affairs, ascribe it to homœopathy, which they accuse of great imperfection (if the truth be told, its imperfection consists in this, that the most suitable homœopathic remedy for each morbid condition does not spontaneously fly into their mouth like roasted pigeons, without any trouble on their own part).

They know, however, from frequent practice, how to make up for the inefficiency of the scarcely half homœopathic remedy by the employment of allopathic means that come much more handy to them, among which one or more dozens of leeches applied to the affected part, or little harmless venesections to the extent of eight ounces, and so forth, play an important part; and should the patient, in spite of all this, recover, they extol their venesections, leeches, etc., alleging that, had it not been for these, the patient would not have been pulled through, and they give us to understand, in no doubtful language, that these operations, derived, without much exercise of genius, from the pernicious routine of the old school, in reality contributed the best share towards the cure. But if the patient die under the treatment, as not unfrequently happens, they seek to console the patient's friends by saying that they themselves are witnesses that everything conceivable had been done for the lamented deceased. Who would do this frivolous and pernicious tribe the honour to call them, after the name of the very laborious but salutary art, *homœopathic physicians*? May the just recompense await them, that, when taken ill, they may be treated in the same manner!"

Do not, even now in our own days, the so-called homœopathists—the mongrel sect of the present time, practise the same pernicious half-homœopathy to make an easy job for themselves and deceive the people? Will true homœopathy ever brook applications of counter-irritating liniments in gout and rheumatism, in bronchial and pneumonic diseases, blood-letting in apoplexy, ice bags, systematic use of purgatives, antinflamins, fomentations, etc.,

daily resorted to by the mongrel sect of homœopathic practitioners, vaunting that they keep themselves abreast of the most up-to-date scientific method of medical treatment?

Long-standing diseases, especially the complicated ones, take a proportionately longer time for their cure. Such a patient is invariably rendered more difficult to cure owing to the chronic medicinal dyscrasia so frequently produced, along with his natural disease left uncured, for the medical bungling; these cases are often rendered incurable for the ignominious plunder of the patient's strength and their vital juices (blood letting, purgatives etc.), persistent administration of violently acting medicines in heroic doses, depending upon the hollow and sophistical theories of their own school, indiscriminately in all cases of disease which appear to them to be similar, also advising inappropriate mineral baths and use of medicated soaps etc., which are the leading features of their vaunted method of treatment.

ACUTE DISEASE

§ 150—166

Well then, on what basis should an acute disease be treated?

In case of slight indisposition, if the patient complain of one or more trivial symptoms that have only been observed a short time previously, it should not be considered as a fully developed disease requiring serious medical aid. A slight alteration in the diet and regimen will be sufficient to put this condition in order.

Where, in a case of acute disease, the patient complains of a few violent symptoms, there will be found upon

TREATMENT OF ACUTE DISEASE

investigation several other symptoms of lesser violence : all these symptoms put together form a complete picture of the disease. The medicine which furnishes the nearest antitype to this disease picture, will be the desired remedy.

The worse the acute disease is, the more numerous and characteristic symptoms it will display. Hence, the physician who knows the pathogenetic symptoms of a sufficient number of medicines, will not be in difficulty to find out the medicine which covers the totality of the elements of that natural disease.

The question spontaneously arises as to what symptoms of a case of disease should receive the greatest attention of the physician in searching for its homœopathic remedy. Up to this stage of the Organon we are told that it is the totality of the symptoms that constitutes a disease and that the removal of these symptoms restores the patient to his health, *i. e.*, cures him completely. It is a mighty job, almost impossible indeed, to find a medicine whose pathogenetic symptoms will entirely cover the disease symptoms so that both of these two will geometrically coincide with each other. It is the *totality of quality* that counts in the selection of a homœopathic remedy, every time superseding the *totality of quantity*.

In searching for a specific homœopathic remedy the physician should chiefly and solely keep in view the more *striking, singular, uncommon* and *characteristic* signs and symptoms of the natural disease; because, in order to effect cure, the selected medicine must possess among its other pathogenetic symptoms, especially those that correspond to the aforesaid symptoms of the natural disease.

The more general and indefinite symptoms (such as loss of appetite, headache, debility, restless sleep, discomfort and so forth) unless more accurately described with emphasis, are too vague to be of any utility to the physician in selecting the specific homœopathic remedy.

Hence, in acute diseases, the medicine which covers the uncommon, singular and characteristic disease symptoms in the greatest number and in the greatest similarity, will *without any considerable disturbance*, remove and extinguish the disease by its first dose within the first hour, or the first few hours if the case be not one of very long standing.

In the second aphorism Hahnemann asserted that the cure by homœopathic treatment must be rapid, *gentle* and permanent restoration of health. Hence, in the preceding paragraph appears the sentence—"without any considerable disturbance."

Let us now see how does the beneficial action of the properly chosen homœopathic medicine take effect, and when and where does it become disturbed.

The distinguishing symptoms of the properly chosen homœopathic medicine, corresponding to the symptoms of the disease, annihilate the latter by overpowering them according to the laws of nature. *Its numerous other artificial disease symptoms (pathogenitic symptoms) which do not correspond to the symptoms of the natural disease, are not called into play.*

The excessively minute dose requisite for its homœopathic employment, is too weak to produce the other medicinal (pathogenetic) symptoms in those parts of

HOMŒOPATHIC AGGRAVATION

the patient's organism that are free from the manifestations of the natural disease.

The already most irritated and excited parts of the patient's organism only are acted upon by the homœopathic action of the properly selected remedy, and the patient's vital principle reacts only to the stronger but similar medicinal disease, whereby the original disease is extinguished and the health of the patient is restored.

Disturbance of this remedial effect of a homœopathic medicine occurs when the dose is too strong for the individual patient. For, it is next to impossible to make the dose of a homœopathic medicine sufficiently minute to inhibit in very irritable and sensitive patients some slight new symptoms while its action lasts. Such symptoms, however, are scarcely perceived by the patient, unless he is excessively delicate, and are easily subdued by the potential activity of the vital principle, under ordinary circumstances, and perfect recovery is obtained.

The vital force, however, fails to bring about the restoration of health, where its efforts are hindered by the heterogeneous medicinal influences upon the patient, by errors of regimen, or by excitement of passions. These are positive hinderances to recovery, as has been evidenced in course of our daily practice.

§ 157—160.

Homœopathic aggravation : what it is and what is its effect on the patient ?

When a homœopathically selected remedy is applied in too large a dose, or is unnecessarily continued for several

hours, it usually produces a slight increase of the existing symptoms which the patient feels to be an aggravation of his own disease. This is called *homœopathic aggravation* and usually occurs immediately after taking the medicine, for the first hour or for a few hours. In such event, the acute disease mostly yields to the first dose, since this aggravation is only the manifestation of a stronger medicinal disease which overpowers the weaker natural disease and extinguishes it. This *apparent* increase of the disease occurs in proportion to the dose of the medicine *i. e.*, the smaller the dose of the medicine the slighter and shorter is the aggravation. This phenomenon is ascribed to the primary action of the homœopathic medicine.

If the medicine selected and employed, be precisely homœopathic to the case, the dose can hardly be so reduced that it shall not completely cure and annihilate the natural uncomplicated disease of acute nature which bears similarity to the medicine. Implications of medicinal aggravation and its management have been explained and in aphorism 249 and its relating foot-note. Next in importance to the selection of the single similar remedy is the question of dosage. The classic rule is the *minimum dose*, and its potency must be on a plane most similar to that of the patient at the moment in question (Elizabeth Wright Hubbard). As it is always extremely difficult to accurately gauge the reacting strength and sensitiveness of a patient prior to the employment of medicine, it happens that if the dose be not the very smallest possible it will always, during the first hour of administration, produce an aggravation stated above, perceptible to the patient.

THE QUESTION OF DOSAGE

Hence, the safest plan is to commence treatment of acute disease with the quite small dose requisite when the medicine bears similarity, so that a cure may be effected without (or almost without) seeing this apparent increase of the disease. This is true with respect to diseases of a more acute nature and of recent origin.

§ 161—168.

In chronic diseases, where the homœopathically selected remedy is administered in its proper small dose and its repetition is made with gradually higher doses, each time newly dynamized, the homœopathic aggravation cannot take place. It may happen only at the termination of the treatment when the patient has become practically free from the disease, so that, any further repetition of medicine becomes too strong for the altered condition of the patient at this stage.

It may sometimes happen that a medicine selected with all necessary care and assiduity, only partially covers the disease symptoms, for want of a more accurate remedy in the materia medica. In such instances a complete and uneventful cure cannot be expected. With the first dose of this inappropriate medicine some symptoms of the remedy appear which were not previously manifested in the natural disease. These new symptoms, excited by the remedy, are called **ACCESSARY SYMPTOMS** of the imperfectly corresponding medicine.

When the physician has not erred in his selection of the appropriate homœopathic remedy (the true simillimum), the symptoms of the case will, in case of chronic disease, be

cured in accordance with Hering's three laws of direction, *i.e.* From within outward, from above downward, and in the reverse order of their appearance. If the symptoms do not go in this order the remedy is wrong.

If the dose of such an inappropriate remedy is sufficiently small, it excites accessory symptoms only of moderate strength, and does not prevent the extirpation of those symptoms which coincide with the symptoms (pathogenetic) of the medicine ; thus, a fair advancement towards recovery is actually initiated. Numerical paucity of symptoms in the best selected remedy is no impediment to the cure of the disease where its uncommon characteristic symptoms are precisely covered by the pathogenetic symptoms of the remedy. Under such condition the cure is effected without any particular disturbance.

Accessory symptoms of moderate strength pass away when the dose is allowed to exhaust its action, and then a subsequent medicine of more accurate semblance should be administered for the remnant disease-symptoms. If, however, the accessory symptoms be of a serious nature, the physician will not allow the dose to finish its full duration of action, but will examine anew the whole condition of the patient for tracing the new picture of the disease which now includes the accessory symptoms annexed to the remnant original symptoms of the disease and will administer a newly selected remedy accurately analogous to this new morbid state. The physician should thus carry on, examining again and again, and selecting the most suitable homœopathic remedy in each instance, until restoration of health is accomplished. *This experience is rare and irrational*

ALTERNATING OF DRUGS PROHIBITED

now, owing to the increased number of proved medicines in the homœopathic *Materia Medica* from which it is possible for any intelligent homœopathic physician to select accurately analogous medicines for any acute disease. We are indebted to reputed authors like Bonninghausen, Jahr, Boger, Kent, Lippe, Hering, T. F. Allen, Knerr, who equipped us, since the time of Hahnemann with excellent works on materia medica and repertory enabling us to fight and achieve marvellous results in the treatment of acute and chronic curable diseases.

ALTERNATION OF MEDICINES PROHIBITED

§ 169—170

In occasionally occurs that two medicines contend each other for appropriateness in case of a disease, one suitable for one set of symptoms and the other medicine for another set of symptoms. In such instance the physician *must not administer both the medicines together or alternately*, but should first employ the one that covers the more serious set of symptoms and wait until this medicine has worked its effect. He should then make a new inspection of the case, and if the remaining set of symptoms now present justify the employment of the second medicine previously found suitable, he will administer same in the proper dose. Else, he must select such other medicine as may be found suitable for the new picture of the disease under the changed circumstances. If, however, the medicine first employed be still indicated for the morbid condition found remaining on second inspection, it should be employed in preference to another medicine, but in a different potency.

NON-VENEREAL CHRONIC DISEASES

§ 171—174

Non-venereal chronic diseases are of *psoric origin* and they often present only insufficient number of symptoms of an indefinite character. In order to effect cure of such cases, it becomes necessary to employ several antipsoric remedies in succession. Before giving each successive medicine the case should be thoroughly investigated to ascertain the group of symptoms remaining after the previous medicine has completed its action ; so that, these remaining symptoms will guide to the selection of the appropriate remedy every time. The difficulty of curing such cases, arising from paucity of symptoms, should receive our careful and untiring attention ; as, by the removal of this small group of symptoms, all the difficulties in the way of effecting complete cure will disappear.

ONE-SIDED DISEASES manifest only too few symptoms and they chiefly belong to the class of chronic diseases. On account of the few symptoms, one-sided diseases are less amenable to cure. They are either (a) *internal complaint, e.g.*, a headache of many years' standing, a long-standing diarrhœa, an old cardialgia, an inveterate old catarrh, etc., or (b) *local maladies* which means changes and ailments appearing on the external parts of the body.

§ 175—184

In treating one-sided diseases of an internal kind the physician's want of accurate observation may fail him to sketch a complete picture of the disease ; otherwise, the

initial examination done with requisite carefulness (ref. aph. 84-98) must reveal one or more severe outstanding symptoms which (if very striking, uncommon and characteristic) will help in the selection of a suitable remedy. If this carefully selected remedy do not cover the totality of the symptoms of the disease it may produce some accessory symptoms from its own range of phenomena, but none other than the morbid symptoms which the original disease can produce in this individual case. We must regard the totality of symptoms now observed as pertaining to the disease itself, as really the existing morbid condition of the patient, and proceed to treat accordingly. It is, therefore, now possible, with the help of the newly developed symptoms added to the original symptoms of the disease, to discover a second and more accurate homœopathic remedy. So long as the desired result is not obtained, the physician should, after each new dose of medicine has exhausted its action, carefully note down the state of the disease in regard to the remaining symptoms for which he will select the most suitable remedy ; and this method should be carried on until health is restored.

New symptoms may arise from some grave error in regimen, from a violent emotion or an intensive physical change, like occurrence or cessation of menstruation, conception, confinement, etc. The conditions brought about by such causes often render the disease very tedious and troublesome.

Sometimes it happens that the patient ceases to derive further salutary effect from the first medicine. In such instances also, and where some newly developed symptoms

are not so grave as to demand immediate relief, the patient should be examined anew, his present morbid condition noted down and a medicine selected to cover this new totality of symptoms.

We may also meet a patient who feels very ill, though there is no distinct symptom perceptible, or where a most carefully selected remedy fails to produce any effect. Such cases are very rare in chronic diseases, but frequently occur, in acute diseases. This condition is due to the insensible state of the patient's whole organism. In such cases a dose of *opium* in the requisite potency often removes the torpidity of the system by virtue of its secondary action, and thus the symptoms of the disease become distinctly apparent. In employing such reactionary medicines the physician should be extremely cautious about the dose and the proper time of application, otherwise the reaction will be so violent as to deprive the patient of his life.

LOCAL MALADIES

§ 185—186

LOCAL MALADIES occupy an important place among the one-sided diseases. Strictly speaking, the name should apply to such local lesions as arise from external injuries of recent occurrence. When the injury is *only trivial* it heals rapidly with a little care and attention. When it is *severe*, the whole living organism becomes sympathetic, in consequence of which fever and other violent symptoms arise. In this latter case, a two-fold treatment is necessary. The external lesion on the affected part must receive surgical

aid, *e.g.*, dislocation be reduced, lips of wounds be brought together by suture and bandages, bleeding from open arteries be stopped by clamps and pressure, foreign articles be extracted, pus and collection of fluids be evacuated, extremities of fractured bones be brought into apposition and retained in position by splints and bandages, etc.. But the sympathetic manifestations of the whole living organism, *e.g.*, pains of the external wounds, burnt parts, lacerated muscles or blood vessels, etc., require the dynamic aid of homœopathy, in order to accomplish the work of healing.

"A word should be said here about pathology and surgery. From the homœopathic standpoint much of pathology is protective, abscesses, ulcers, tumors are an effort on the part of the vital force at localization and extrusion. Such pathology should not be removed by surgery until *after* the sick constitution which produced such pathology has been cured. Often in course of cure, such pathology will shrink or be absorbed. If not, it remains as a foreign body and is subject for surgery. Its removal before the cure of the constitution simply means that, balked at the outlet, the vital force will seek another one, by recurrence in the same form or by more deep-seated trouble. * * * It requires the keenest judgment to decide when the case has gone too far to be relieved by remedies, and emergency surgery is indicated in a crisis. The homœopathic remedy should always be resumed after surgery."—(Elizabeth Wright Hubbard).

§ 187—191

Diseases of external parts, not arising from any external injury of recent origin, or having only some slight external

wound for their immediate cause, always indicate some internal diseased condition to be its source. "No external malady (untraceable to some important injury from without) can arise, persist and even grow worse without some internal cause, in which the whole organism is involved and in consequence is a diseased condition." It is a pernicious and colossal blunder to consider them as merely topical diseases, independent and without the participation of the of the whole living organism. "No eruption on the lips, no whitlow can occur without previous and simultaneous ill-health." Treatment of such diseases must be directed against the whole constitution, when the most salutary results will be produced in the restoration of the health of the entire organism, along with the disappearance of the external affection, without the application of any external medicine.

§ 192—196

To effect such a cure the physician must trace out a complete picture of the whole disease condition consisting of the exact character of the local affection and all changes in the health of the body and of the mind of the patient, and carefully select a medicine to correspond to the totality of whole disease condition. "The local condition depends solely on a disease of the rest of the body and should be regarded as an inseparable part of the whole, as one of the most considerable and striking symptoms of the whole disease." This medicine must be employed *only internally* by which the general morbid condition of the patient together with the local affection will be entirely removed.

Why does homœopathy forbid external medicines in local maladies ?

The local affection is one of the most important and striking symptoms of the whole disease. It always indicates the existence of a latent miasm. The primary local symptoms of miasmatic diseases being destroyed by the pernicious mode of external treatment so universally practised, the miasms migrate to the deepest region of the human economy as internal syphilis, internal sycosis, or internal psora, which stay there either in a latent state and might be brought into activity any moment by some exciting cause, or may at once attack some important internal organ, or even the mental faculties of the patient. To allay the internal chronic disease, the vital principle strives to transfer it in the shape of vicarious local affections to the less dangerous external part of the body. In spite of this metastasis the internal disease continues to increase gradually, and the vital principle is constrained to increase the local affection more and more in order to reduce the internal affection. Thus, psoric ulcers, chancre or condylomata grow and increase along with the general internal disease as time goes on, and the whole condition is rendered more and more difficult to cure.

§. 197—201

By the application of an external remedy to the seat of the local affection, either alone or along with some internal remedy, a rapid change in it might be effected ; but such a result presents a very great disadvantage to the physician, in as much as the premature disappearance of

the important local symptom *e. g.* recent itch eruption, chancre, condylomata, deceives him with the semblance of a perfect cure, and he is therefore unable to decide whether the general disease has been eradicated or requires further internal medication. Internal treatment is indispensable to eradicate the chronic miasmatic diseases with these local symptoms, and if these are made to disappear by mere topical employment of medicines, the other symptoms, less important and less displayed, remain obscure in the case, but do not fail to hinder restoration of health. The case becomes immensely difficult on account of the vague and fleeting appearance of the remnant symptoms. On the other hand when the local disease is cured on its seat by internal medication of its homœopathic remedy, without the external application of any medicine, and without destroying lesions like condylomata by corrosive or desiccative external remedies or by the knife, we have ever so much of the convincing proof of ever so much of complete cure of the patient.

By its own power our vital force would never be able to overcome a chronic disease, nor even to conquer transient diseases, without the aid of genuine medicine. But when encumbered by a chronic miasm it tries to develop a local malady by transferring internal miasmatic disease to the vicarious local affection, for the purpose of arresting its powers from injuring and destroying the vital organs and the patient's life. "The presence of the local affection thus silences, though without being able either to cure or to diminish it materially." Something similar is done by the old school inflicting issues and artificial ulcers which cause

only painful irritation, without being able to cure either the internal miasmatic disease or the local malady ; on the contrary, they rob the patient's strength and despoils his general health to a very much greater degree than is done by the instinctive vital force with the metastases. Being unable to reduce or cure the internal disease, without the appropriate remedy, the local symptoms enlarge and aggravate always more and more for commuting the progressing internal disease and for holding it down. "Old ulcers on the legs get worse as long as the internal psora is uncured, the chancre enlarges as long as the internal syphilis remains uncured, the fig-warts increase and grow while sycosis is not cured whereby the latter is rendered more and more difficult to cure, just as the internal disease continues to increase as time goes on."

§ 202—205.

Hahnemann has said enough for any intelligent person to understand the profanity and hazard of employing external medicines to hasten the disappearance of local maladies. It is *incorrect* to say that the external remedies *drive back* the local affection into the system or upon the nerves. Hahnemann says : "This pernicious external mode of treatment, hitherto universally practised, has been the most prolific source of all the innumerable named or unnamed chronic maladies under which mankind groans ; It is one of the most criminal procedures the medical world can be guilty of, and yet it has hitherto been the one generally adopted, and taught from the professional chairs as the only one." Further, he says in the relating foot-

note : "For, any medicine that might at the same time be given internally served but to aggravate the malady, as these remedies possess no specific power of curing the whole disease, but assail the organism, weaken it and inflict on it, in addition, other chronic medicinal diseases."

We learnt in aph. 74, how diseases, often only of a trivial character, are turned into the numerous medicinal diseases by "the irrational, persistent, harassing and pernicious treatment of the old school" ; and in aph. 77 we learnt of diseases derived from and persisting for the unhealthy mode of living. Subtracting diseases under these categories, the great number of the remaining chronic diseases arise from and depend upon three chronic miasms, namely, internal syphilis, internal sycosis, but principally and in the biggest proportion—the internal psora. Vicarious local symptoms of each of these three miasms appear on the external parts only after the infection has pervaded the whole living organism in all directions, and thereby the local external symptoms keep in check the the immediate explosion of the miasm upon important internal vital organs. Such dangerous consequences of external treatment of the local maladies can be eluded and the radical cure of both internal and external manifestations of the miasms effected in a rational way by solely employing the proper internal *homœopathic* remedy for each miasm.

In foot-note to aph. 282 Hahnemann says : "Since diseases in general are but dynamic attacks upon the life principle and nothing material, *no materia peccans*—as their basis (as the old school in its delusion has fabulated

DANGERS OF EXTERNAL MEDICATION

for a thousand years and treated the sick accordingly to their ruin), there is also in these cases nothing material to take away, nothing to smear away, to burn or tie or cut away, without making the patient endlessly sicker and more incurable than he was before local treatment of these three miasms was instituted. The dynamic, inimical principle exerting its influence upon the vital energy is the essence of these external signs of the internal malignant miasms that can be extinguished solely by the action of a homœopathic medicine upon the vital principle which affects it in a similar but stronger manner and thus extracts the sensation of internal and external spirit-like (conceptual) disease-enemy in such a way that it no longer exists for the life principle (for the organism) and thus releases the patient of his illness and he is cured."

"Experience, however, teaches that the itch plus its external manifestations, as well as the chancre together with the inner venereal miasm, can and must be cured only by means of specific medicines taken internally. But the *fig-warts*, if they existed for some time without treatment, have need for their perfect cure the external application of their specific medicine as well as their internal use at the same time."

External medicinal agents that act dynamically or even those that act mechanically, are never resorted to by practitioners of homœopathy, when treating primary symptoms of any chronic miasm, or the secondary affections developed further from the same source. He proceeds straight to treat and cure the great miasm on which depend those external lesions or other secondary affections which

then spontaneously cease to exist. How very regrettable it is that we are invariably called to treat these chronic miasmatic diseases after their primary symptoms, *i.e.* the eruption, chancre (bubo), condylomata, and other external lesions, have already been effaced by external remedy of the non-homœopathic schools of treatment, and it is only left for us to deal with the secondary ones, *i.e.* "the affections resulting from the breaking forth and development of these inherent miasms" ; but out of the three chronic miasms, it is especially from the *internal psora* that the uncountable varieties of chronic diseases grow and expand ; and these have been lucidly delineated by Hahnemann in his monumental work on CHRONIC DISEASES.

Hahnemann records his horror and protests against the employment of the arsenical remedy of Frere Cosme, used in his time, for the local effacement of the so-called cancer of the lips and face which are evolved from highly developed psora, very often associated with syphilis. Such arsenical preparations are perhaps still in vogue, but in the guise of some coined names given to proprietary and patented products. His objection is not so much for the most excruciating pain that it inflicts and the failure this treatment meets, but because it cannot and will not in the least reduce the basic internal miasmatic disease, and thus compel the instinctive vital force to preserve the living organism by changing the miasmatic activity to some more important province of the body, as happens in every case of metastasis ; the results of this transference are evidenced in blindness, deafness, insanity, suffocative asthma, dropsy, apoplexy and a host of other dreadful

TREATMENT OF CHRONIC DISEASES

conditions. It is only where the ulcer has not increased to a great size, and the vital force is still highly vigorous, that the topical application is efficacious, but the true cure is yet very doubtful: indeed, it is in this condition of the case that complete cure of the whole original disease from internal miasm by the internal homœopathic remedy, is still feasible.

TREATMENT OF CHRONIC DISEASES

Before commencing the treatment of a chronic disease the physician must make the most careful investigation on the following points, writing down the facts discovered by him, as advised in aph. 5 and in the chapter on case-taking from aph. 84 to 91.

§ 206-209

"In investigations of this nature we must not allow ourselves to be deceived by the assertions of the patients or their friends, who frequently assign as the cause of chronic, even of the severest and most inveterate diseases, either a cold caught (a thorough wetting, drinking cold water after being heated) many years ago, or a former fright, a sprain, a vexation (sometimes even a bewitchment), etc. These causes are much too insignificant to develop a chronic disease *in a healthy body*, to keep it up for years, and to aggravate it year by year, as is the case with all chronic diseases from developed psora. Causes of a much more important character than these remembered noxious influences, must lie at the root of the initiation and progress of a serious, obstinate disease of long standing; the

assigned causes could only rouse into activity the latent chronic miasm."

The physician must bear in mind these important points :

(i) Whether it is a case of unmixed syphilis, or (ii) a case of unmixed sycosis, the condylomatous gonorrhoea, where the treatment should be based upon the antisymphilitic or antisycotic remedies. In far the greatest number of chronic venereal diseases, symptoms of pure syphilis or pure sycosis cannot be obtained ; almost all the chronic diseases are complicated with internal itch miasm, since psora is the most frequent fundamental cause of chronic diseases. (iii) Whether both the syphilitic and itch miasms are complicated with sycosis. (iv) Whether it is a case of pure psoric miasm whatever name it may bear.

We must remember further to investigate on the following points : (v) What kinds of allopathic treatment had been employed upto that date, in order to understand how and to what extent the original disease has increased and degraded, and also to avoid those medicines that have been improperly used ; or if possible, to rectify as far as possible, the injurious operations done by caustics, ligature, cautery or knife. (vi) Correct informations regarding the patient's age and sexual functions, mode of living and diet, occupation, domestic and social relations, the state of his mind and disposition. (vii) Complete record of the whole history of the illness, and by repeated conversation with the patient ascertain the most striking and characteristic symptoms of the case. This investigation should be written down in an intelligently

SCHEMA FOR WRITING DOWN RUBRICS

devised scheme in a systematic way, and in conformity with the instructions given in aphorisms 84 to 90.

What is the proper schema of writing down the rubrics of a case of disease? Let me assure students and practitioners of homœopathy that if this is done properly, half the battle is won, here and now.

The RUBRICS should be written down with all possible exactness in the record book, in the following order :

(1) The general image of the patient, his personality, the individuality, should stand at the head of the record which must comprise of his age, sex, constitution, mode of living, occupation, disposition before the illness and upon the attack, complexion, colour and volume of hair; leanness or corpulence, slender or heavily built, etc.; the state of his mind and spirit, his understanding according to its nature, *viz.*, capacity for mental work, nervousness, fixed ideas, illusions and delusions, memory, fancies, etc.

(2) The ANAMNESIS, that is, a brief history of the former illnesses should be noted, their course and how the cure was effected, whether any sequela remained behind, together with a statement of the treatment used, and if possible, the medicine prescribed.

(3) The nature and peculiarities of the present illness. Here the greatest industry and patience are demanded of the physician. The seat of the patient's complaint on certain particular parts of his living organism, often furnishes an important characteristic symptom. General terms, as headache, toothache, colic, gouty pains, etc. are too vague to help in the rational choice of the remedy.

The exact seat of the ailment, the kind of pain, the direction it proceeds from the seat of its origin, the circumstances which produce, increase, improve or relieve the pain, the hour of the day when the symptoms occur and disappear. All these are of no less importance. [Locality, direction, modalities].

In his discourse on aphorism 94, Hahnemann observes in the foot-note: "*In chronic diseases of females* it is especially necessary to pay attention to pregnancy, sterility, sexual desire, accouchements, miscarriages, suckling, and the state of the menstrual discharge. With respect to the last named more particularly, we should not neglect to ascertain if it recurs at too short intervals, or is delayed beyond the proper time, how many days it lasts, whether its flow is continuons or interrupted, what is its general quantity, how dark is its colour, whether there is *leucorrhœa* before its appearance or after its termination, but especially by what bodily or mental ailments, what sensations and pains it is preceded, accompanied or followed: if there is leucorrhœa, what is its nature, what sensations attend its flow, in what quantity it is, and what are the conditions and occasions under which it occurs?"

(4) THE CONCOMITANTS, that is, the accompanying symptoms, must not escape the attention of the physician. "Every case of disease, in its recognizable phenomena, presents a more or less numerous groups of symptoms, and it is only their totality which presents its complete image." These are the attending symptoms of the characteristic ones. For instance, take the case of a person suffering from

INVESTIGATION OF A CASE OF ILLNESS

Cough. We should proceed to investigate the case in the following order :

- a.* The personality of the patient.
- b.* Did he have any previous attacks of cough or any other disease, and if any sequele remains behind.
- c.* The nature of the cough, tickling, dry, short or of a whooping character ; voice, husky or otherwise, etc.
- d.* Character of expectoration, easy or difficult, its colour, taste and smell, consistency and quantity.
- e.* Time of the day for its beginning, increase, acme, decrease and end.
- f.* The circumstances and position of the body under which it occurs, increases, improves or stops.
- g.* The accompanying troubles, e.g., bleeding from the eyes or nose ; trembling, nausea and vomiting ; various pains in head, ears or other organs ; weariness and giddiness ; involuntary passing of urine or stool during the cough ; fever, its time, height and nature : condition of tongue, etc.

(5) THE CAUSE OF THE DISEASE : The internal or proximate cause ; the external cause ; the medicinal diseases, that is, the effects of being treated with inappropriate medicines ; poisonings, whether accidental or self-inflicted.

(6) Having thus noted down the general image of the patient and the particulars indicated above, further investigations should be made for special symptoms in each part of the body in the following order :

(*a*) The mind, mood and disposition. (*b*) The internal head, including vertigo, obscuration of sensations, impairment of the understanding, the memory, the internal

headache. (c) The outer head, including eruptions and dandruff on the scalp, condition of hair, pains and sensations on touch ; perspiration, twitchings, etc. (d) The eyes, appearance, sensations, colour, location of the trouble, eye-brows, eye-lids, eye-lashes, canthii, sight and vision, etc. (e) Ears, sensations, hearing, ear-wax, pus or other discharges, eruptions, ulcers in the interior or the exterior, etc. (f) The nose, sensations, appearance, bleeding, sense of smell normal or abnormal, ulcers internal or external ; catarrh and discharges, their character and consistency, etc. (g) Face, its colour and external appearance, paleness, redness, yellowness, freckles, spots, blue rings around the eyes ; eruptions on face, articulation of the jaws, sensations and swellings of the glands of the lower jaw, eruption on the chin, etc. (h) The teeth and gums ; as to pains, colour, sensations and appearance ; swelling of the gums, bleeding, ulceration, appearance and discharges, etc. (i) Mouth, the condition and colour of the buccal cavity, soft palate, fauces, tonsils, uvula, tongue, sensations and deposits, power of speech and of swallowing, etc. (j) Appetite, thirst, taste, and their abnormalities. (k) Stomach, regarding nausea, belching, hiccough, sensations, exact location of pain and its nature, hypertrophy or atrophy of the liver and spleen, as also the feelings on these organs, etc. (l) Abdomen, sensations in the epigastrium, hypochondria, hips, loins, hypogastrium, umbilical region, the whole abdomen, flatulence, its smell, noise, accumulation, incarceration and discharge ; colic, its nature and location, the direction of its drive, condition of and sensations at the abdominal walls and the abdominal rings, etc. (m) Stool : constipation, looseness.

INVESTIGATION OF A CASE OF ILLNESS

hard, soft, knotty, colour, smell, bloody, mucous, watery, changeableness, windy ; sensations before, during and after stool, etc. (n) Anus, rectum and perineum : piles, eruptions, worms, sensations in the inner and outer parts, discharges and their nature, colour and smell, etc. (o) Urine : quantity, frequency, sensations before, during and after urination ; quality and deposits, upon laboratory finding, i.e., chemical analysis and microscopical examination, for purposes of ascertaining defects and selecting suitable medicine, diet and regimen, etc. (p) Urinary organs : sensations at the kidneys, bladder and urethra. (q) Sexual organs : sensations in general, on glans, prepuce, testicle, penis, scrotum and spermic cords ; *female sexual organs* : discharges, nature, colour, consistency and smell ; pubic hair, etc. (r) Sexual instinct, excitability or lack of it, weakness or complete impotence, emission of seminal and prostatic fluids, pollutions ; sensations and condition during and after coitus ; nature, smell and colour of semen, etc. (s) Menstruation, its period, flow, colour, quantity, smell, sensations ; Leucorrhœa, its character, etc. (t) Respiration, heart and pulse. (u) Chest and female breast. (v) Bones, their formations, softness, sensations, etc. (w) Skin, its condition, colour, sensibility, eruptions and ulcerations, etc. (x) Back, Upper and Lower extremities ; sensations, pains, swellings, mobility, strength, etc. (y) Fever, its conditions ; pulse, its frequency, volume, strength : chill, its site of commencement, the force of the rigor, and its concomitant symptoms ; Heat ; before, accompanied with, or how long after the chill ; its duration, weather diffused or localised in any particular region ; Sweat, whether before, during or

after the heat : over the whole body or localized in any particular spot : Thirst : before, during or after the chill or heat ; accompanying troubles, such as, aching of the head, of the limbs, burning in eyes, condition of stomach and abdomen etc.

N. B. At all events, never omit to note the time, position and circumstances of the beginning, rise, acme, improvement and the disappearance of the symptoms.

(7) Always look out for the cause of the whole disease, the internal, the external, and the maintaining causes. Regarding the possible causes of a disease, the student is referred to the discourse on aphorisms 7 and 8, et. seq., and further questionnaire under aph. 89 to 91.

§ 210-214

MENTAL DISEASES

Any sharp distinction of the deranged state of mind and disposition from the so-called physical ailments, is hardly to be experienced in actual practice. Being a *one-sided malady* of psoric origin, its other symptoms fade away, as it were, before one prominent symptom embracing mind and disposition. Here also, as in all cases of disease, the whole disease condition of the patient must be carefully investigated, while it is indispensable to note the condition of the patient's disposition for tracing an accurate picture of the disease on which depends the success of homœopathic treatment.

Very often the mental condition of the patient serves as the best guide to the selection of the most suitable remedy. Of all other symptoms of a case of disease, the state of

mind and disposition can remain the least concealed from the observing physician. It is, indeed, a divine and blessed coincidence that all the powerful medicines are capable of producing alterations in the mind and disposition of healthy individual provers, and every one of these medicines produce it in a different way. In all acute and chronic diseases it is therefore possible for the accurately observing physician to select a suitable homœopathic medicine which, in addition to the other symptoms of the disease, is capable of producing a similar state of the mind and disposition. In the relating foot-note Hahnemann gives the following illustrations: "Thus, *Aconite* will seldom or never effect either a rapid or permanent cure in a patient of a quiet, calm, equable disposition; and just as little will *Nux vomica* be serviceable where the disposition is mild and phlegmatic; nor *Pulsatilla* where it is happy, gay and obstinate; nor *Ignatia* where it is imperturbable and disposed neither to be frightened or vexed."

§ 215-217

One-sided mental diseases are derived from corporeal diseases in which the corporeal symptoms decline more or less rapidly and at length become almost or entirely obscure, while the altered state of the disposition is increased and ultimately becomes completely one-sided, so as to appear like a local disease in the imperceptible subtle organ of the mind and disposition of the patient.

Diseases of acute character like puerperal state, or those of a different nature like pulmonary consumption, etc., change into insanity or a kind of hypochondria or into a

mania by rapid increase of the psychological symptoms, by which the corporeal symptoms decline to such a degree that their presence is completely obscured from usual observation. "The affections of the grosser corporeal organs become, as it were, transferred and conducted to the emotional organs which the anatomist has never yet and never will reach with his scalpel."

There is, however, a type of mental diseases that develops independent of corporeal diseases. They are of an inverse issue that originate and are maintained by emotional causes like prolonged anxiety, worry, vexation, disappointed love, unfair treatment, repeated occurrence of great fear or fright. In such cases the indisposition of the body is only slight in the beginning, but the psychological health is destroyed in course of time, often to a considerable extent. *The fundamental cause in such cases is also psora, and requires a thorough antipsoric treatment* in addition to the auxiliary mental regimen. Here also the greatest assiduity is demanded of the physician for finding out a remedy—a homœopathic force—"which, in its list of symptoms, displays, with the greatest possible similarity, not only the corporeal morbid symptoms present in the case of disease before us, but also especially this mental and emotional state."

WHAT ARE ALTERNATING MENTAL DISEASES ?

§ 218-220

Alternating mental diseases are those in which, at certain intervals, periods of apparent exaltation of physical and mental power may occur, which quite unexpectedly change into gloomy disposition and derangement

ALTERNATING MENTAL DISEASES

of other vital operations, e.g., melancholia alternating with gay insanity or frenzy, etc. When the new state makes its appearance, there is no perceptible trace of the former condition, or only slight traces of the previous alternating state may remain. In the investigation of mental diseases as advised in the preceding aphorisms it is of primary importance to get an accurate description of all the facts and manifestations of the previous so-called physical illness before it degenerated into this one-sided extension of the mental symptoms and developed into a full-fledged disease of mind and disposition. The physician should exert to obtain such details from the friends of the patient. Traces of the symptoms of the corporeal disease, though now less obvious, may be still found to continue during the periods of interval where there is a clear though brief abatement of the mental disturbance and it should provide the physician with a good clue to probe into the now obscure physical ailments of his patient. These linked together will constitute a complete picture of the disease.

§ 221-223

Hahnemann now proceeds to describe the different types of emotional and mental diseases and their treatment.

(1) A patient ordinarily of quiet disposition may, through fright, vexation, abuse of spirituous liquors, etc., be suddenly attacked with *acute* insanity or mania. Investigations will reveal internal psora, even in these cases. Such cases, though brought about by sudden explosion of the slumbering internal psora and its transference from the physical to the subtle psychic organs, *must not immediately be treated with*

antipsoric : but their acute excitement should be subdued with commotional remedies like aconite, belladonna, stramonium, hyoscyamus, mercury, etc., in highly attenuated homœopathic doses by which the exploded psora will temporarily revert to its former latent state. The physician should then treat the patient with a prolonged course of carefully selected antipsoric medicines suitable for the individual case, in order to effect radical cure, at the same time the proper diet and regimen being faithfully followed. Neglect of this antipsoric treatment will cause relapses of the mental disease even from a much slighter cause than in the first attack, becoming more and more intensified in severity and duration, until the disease assumes a periodic or persistent form, which is then difficult to be helped in any way.

(2) Mental diseases arising from defective education, bad practices, moral corruption, neglect of mind, superstition or ignorance, etc., are not uncommon ; such cases usually improve and abate by sensible affectionate advice, consolations, earnest arguments and rational suggestions. Association with persons of vile character, books of fiction on amorous or exciting subjects must be avoided by such patients.

§ 224-227

Mental and moral diseases, *depending upon any bodily disease*, would be quickly aggravated by any attempt of the physician towards mental representations. "The melancholic would become still more dejected, querulous, inconsolable and reserved ; the spiteful maniac would thereby become

still more exasperated, and the chattering fool would become manifestly more foolish." Such a patient appears to feel the truth of moral exhortations while his body, for its diseased condition, is incapable of abiding by his wishes and therefore reacts upon the mental faculties, thus making the mental condition still worse for the advices. This may often be of great service to the physician in detecting obscure physical derangements.

The treatment of cases revealing physical derangement must be based upon the totality of symptoms, to be followed by an appropriate antipsoric treatment, in order to prevent relapse of mental morbidity, psora being the root cause of the entire trouble.

Emotional diseases of recent origin and before they have done any considerable damage to the physical condition of the patient, may be quickly remedied by *psychical treatment*, such as, "a display of confidence, friendly exhortations, sensible advice, and often by a well disguised deception." The physical condition will also improve with appropriate diet and regimen.

A radical antipsoric treatment must, in all these cases, be employed for preventing relapses of such mental diseases. In the mental and emotional state of these patients, nature bountifully supplies every industrious physician with striking symptoms for easily selecting the most appropriate homœopathic medicines which yield gratifying results in no very long time.

§ 228-230

Hahnemann gives definite rules to be observed, by way

of auxiliary mental regimen, for behaving with lunatics and patients suffering from emotional diseases.

a. The physician and attendants must always pretend to believe such patients to be possessed of reason.

b. To furious mania, show a cool, firm resolution and placid courage.

c. To piteous mournful frettings, assume a mute look of pity and concern.

d. To foolish talks, oppose a silence not wholly inattentive.

e. To shameless, abominable conduct and conversation, oppose total inattention.

f. Everything must be so arranged as to prevent damage and destruction of the surrounding objects, *without reproaching the patient for his acts.*

g. Corporal punishments and tortures must be strictly forbidden as being extremely pernicious modes of treating these most pitiable patients.

h. External disturbing influences on their senses and disposition, such as particular pictures, objects or persons, should be removed.

i. Deceptions must be carefully performed, since their detection exasperates such patients and aggravates their complaint.

The homœopathic system of treatment has one great advantage in the smallness of the dose of its appropriate medicine which never offends the taste, and therefore may be given in his drink without his knowledge, thus eliminating the necessity of any compulsion or coercion. It is easily comprehensible from the above rules that treatment

INTERMITTENT AND ALTERNATING DISEASES

of the violent maniac and melancholic can be better managed in an institution than within the family environments of the patient.

In emotional and mental disease, the principal symptoms of the patient are so striking and unmistakably perceptible that they never escape the observation of a physician's unflagging research, and with accurately employed antipsoric medicine the most striking improvement manifests within a very short time, a result that cannot be achieved by purging the patient to death with frequently repeated heroic doses of unsuitable medicines or loading him with mighty soporifics of the other systems of treatment.

NON-FEBRILE INTERMITTENT DISEASES

§ 231-234

THE INTERMITTENT DISEASES are such maladies that recur *at certain periods*, like intermittent-fevers at intervals, and these require a special consideration of the physician. There is another variety of such diseases, demanding equal attention of the physician, and they are called alternating diseases.

ALTERNATING DISEASES are those in which certain disease conditions alternate *at uncertain intervals* with a different kind of morbid state; e.g., pains in the legs of a persistent nature may occur immediately on the disappearance of a kind of ophthalmia, and the latter reappears as soon as the pains have passed off for the time being. This variety is called "Double alternating diseases" because two different morbid states alternate with each other. These

are very numerous, but they all belong to the class of chronic diseases.

Another variety of it is called "Three-fold alternating diseases" in which a common habitual ailment alternates with a disorder of a greater import, and when this latter morbid state has gone off, a third kind of indisposition makes its appearance, e.g., habitual constipation may alternate with severe diarrhœa which suddenly gives place to rheumatic condition of the heart.

Alternating diseases are of numerous varieties. In some cases a new morbid state entirely conceals the former indisposition, while in other cases a few symptoms of the first state on the appearance and during the continuation of the subsequent one; we find again only slight traces of the former alternating state on the appearance of a new one.

All alternating diseases belong to the class of chronic diseases, and indicate *a manifestation of developed psora alone*; these are to be cured by the pathogenetic similitude of antipsoric medicines. Infrequently, however, the psoric basis of these diseases may be complicated with syphilitic miasm; and in such cases the antipsoric medicines will require alternation with antisiphilitic remedies.

Hahnemann now directs our attention to the *non-febrile typical intermittent diseases* and their method of treatment.

These intermittent diseases are non-febrile affections of unvarying character (aph. 231) which come and go in a periodical manner, that is to say, they recur at fixed intervals while the patient appears to be in good health, and disappear also at an equally fixed period. They do not

INTERMITTENT FEVERS

appear sporadically or epidemically, but always in one single individual at a time, and ever belong to the chronic diseases of purely psoric class. They seldom complicate with syphilis.

Non-febrile typical intermittent diseases are successfully treated by dynamic medicines of the greatest similitude. Occasionally it requires the intercurrent use of a small dose of potentized *China* for completely extirpating its intermittent type.

INTERMITTENT FEVERS

§ 235-244

Intermittent fevers appear in numerous varieties and manifest important differences among them. They prevail sporadically or epidemically. It is a blunder to call them only *ague* and classify same as *quodidian*, *tertian*, *quartan*, etc., only in accordance with the different intervals at which paroxysms recur. In the foot-note relating to aphorism 235 Hahnemann observes: "But there are much more important differences among them than what are marked by the periods of their recurrence; there are innumerable varieties of these fevers, some of which cannot even be denominated *ague*, as their fits consist (1) solely of heat; others again, (2) are characterized by cold alone, with or without subsequent perspiration; yet others, (3) which exhibit general coldness of surface, with a sensation of heat on the patient's part, or whilst the body feels externally hot the patient feels cold; others again, (4) in which one paroxysm consists entirely of a rigor or simple chilliness, followed by an interval of health, while the next

consists of heat alone, followed or not by perspiration ; others again, (5) in which the heat comes first and the cold stage not till that is gone ; others again, (6) wherein after a cold or hot stage apyrexia ensues, and then perspiration comes on like a second fit, often many hours subsequently ; others again, (7) in which no perspiration at all comes on ; and yet in others, (8) in which the whole attack consists of perspiration alone, without any cold or hot stage, or in which (9) the perspiration only is present during the heat ; (10) there are innumerable other differences, especially in regard to the *accessary symptoms*, such as headache of a peculiar kind, bad taste in the mouth, nausea, vomiting, diarrhoea, want of or excessive thirst, peculiar pain in the body or limbs, disturbed sleep, deliria, alteration of temper, spasms, etc., before, during or after the cold stage, before, during or after the hot stage, before, during or after the sweating stage, and countless other varieties. All these are manifestly intermittent fevers of very different kinds, each of which, as might naturally be supposed, requires a special (homœopathic) treatment. "It must be confessed that they can almost all be suppressed (as is often done) by enormous doses of *bark* and of its pharmaceutical preparation, the *sulphate of quinine* ; that is to say, their periodical recurrence (their *typus*) may be extinguished by it, but the patients who suffered from *intermittent fevers for which cinchona bark is not suitable*, as is the case with all those epidemic intermittent fevers that traverse whole countries and even mountainous districts, are not restored to health by the extinction of the *typus* ; on the contrary, they now remain ill in another manner, and worse, often much worse,

MARSH INTERMITTENT FEVER

than before ; they are affected by peculiar cinchona bark dyscrasias, and can scarcely be restored to health even by a prolonged treatment by the true system of medicine—and yet that is what is called *curing*, forsooth !”

There are innumerable different physical and mental accessory symptoms as well *during* *apyrexia*. The duration of each paroxysm varies in different cases. Epidemic intermittent fevers always have the psoric miasm in the background.

The type of intermittent fever located endemically in marshy districts, is more appropriately called MARSH INTERMITTENT FEVER. It has definite noxious marsh miasm as its causative factor. Young healthy persons observing proper regimen and not debilitated by want, fatigue or pernicious passions, may become immune to marsh fever, or may have an attack only on his first arrival, which can be easily cured by one or two very small doses of highly potentized solution of cinchona bark.

Hahnemann now proceeds to advise on the proper mode of treatment to be employed in cases of common intermittent fevers, and the proper time for administering remedies in these cases.

In the first instance, a medicine from non-antipsoric general class should be selected which corresponds to the characteristic symptoms, the peculiar alternating state belonging either to the cold, hot or sweating stage. “The patient’s state of health during the intervals, when he is free from fever, must be chief guide to the most appropriate Homœopathic remedy.”

The very best time for administering medicine in these

cases, is soon after the termination of the paroxysm, when the patient has somewhat recovered from its effects. At the commencement of the apyretic interval and when there is yet a long time for the overtures of the next paroxysm, the condition of the vital force is in the most suitable state to be quietly altered by the remedy and restored to its normal healthy state.

In cases where the stage of remission is very short, the homœopathically selected remedy should be administered when the perspiration or the closing phenomena of the expiring paroxysm begin to subside.

Frequently, a single dose of the appropriate medicine restores health. In the majority of cases, however, it requires to repeat the medicine a few times after each attack, increasing the dynamization of each successive dose with 10 or 12 succussions of the vial containing the medicine.

A return of the intermittent fever after a healthy interval of several days, is only possible when the noxious principle that caused the first attack still lingers in the patient's constitution, as invariably happens in marshy places.

EPIDEMIC INTERMITTENT FEVERS

Epidemics of intermittent fever in places where the endemic type does not exist, are of the nature of chronic diseases, composed of single acute paroxysms. "Each single epidemic presents a peculiar uniform character common to all individuals attacked." Thus, the common totality of symptoms found in all cases guides the physician to the selection of the homœopathic remedy which serves as

EPIDEMIC, PSORIC, PERNICIOUS INTERMITTENT

a specific for all cases in a particular epidemy, except for patients suffering from chronic psora.

In cases where the first paroxysms of an epidemic intermittent fever have been left uncured, or the improper allopathic treatment has weakened the patient, the inherent psora hitherto existing in a latent state becomes developed and adopts the type of intermittent fever and continues to play its new role in utter disregard to the medicine which would have been effective in the first paroxysm. The case has now been converted into a *psoric intermittent fever* only and requires a small and rarely repeated dose of Sulphur or Hepar sulphuris in high potency for its destruction.

PERNICIOUS INTERMITTENT FEVER attacks a single person in a locality, not necessarily a marshy district. It should also be treated in the first instance, as all diseases, with the medicine most suitable to the totality of the symptoms; and if recovery be deferred, the physician should know that he is dealing with psora on the point of development, and now only antipsoric medicines can effect a radical cure.

Hahnemann now proceeds to delineate the proper mode of treatment for marsh intermittent fever.

Marsh intermittent fevers, attacking persons on their first arrival are easily cured by one or two small doses of the highly potentized solution of China, provided the patient observes the proper regimen and has not been debilitated by poverty, fatigue or pernicious passions. Where this treatment fails, the physician must know that psora is at the bottom of the disease and is now trying to develop itself. Such cases cannot be cured without

antipsoric treatment. It may sometimes be necessary to send such patients immediately out of these marshy regions to dry and mountainous places, when the fever leaves them, unless the psora has already fully developed in their system and cannot therefore return to its dormant state. Perfect health can only be re-established by a proper course of antipsoric treatment.

In the relating foot-note Hahnemann observes : "Large, oft-repeated doses of cinchona bark, such as the *sulphate of quinine*, have certainly the power of freeing such patients from the periodical fits of the marsh ague ; but those thus deceived into the belief that they are cured remain diseased in another way, frequently with an incurable Quinine intoxication". More of his dissertation regarding this matter when we come on to aphorism 276.

REMEDIES AND THEIR MODE OF EMPLOYMENT

§. 245-246

It is not only the proper mode of employing the remedies that concern the physician, but the proper regimen to be observed during their use should also receive his equally strict attention if he wishes the desired result. We shall study Hahnemann's advice in respect of *diet and regimen* in aphorisms 259-263.

Hahnemann gives four precautions in respect of administering medicines :

- (1) The medicine must be perfectly homœopathic to the case.
- (2) The patient should receive the medicine in proper small dose of highly potentized medicine, dissolved in

EMPLOYMENT OF MEDICINES—PRECAUTIONS

water. By "highly potentized" qualification Hahnemann apparently means the 30th. potency, as recommended in aphorism 270.

(3) For obtaining the quickest result, it should be repeated at regular intervals, care being taken that each succeeding dose must be modified in its degree of dynamization, that is to say, the dynamization degree of every dose must deviate somewhat from its preceding and succeeding dose.

The vital-principle will thus be purposefully subjected to a similar medicinal disease to counter the natural disease, yet not to the extent that there may arise any reaction and revolution in the system of the patient. Every dose of medicine creates an alteration in the morbid state, and therefore it requires an alteration as well in the potency of the medicine in every dose of it when repeated.

By this new dynamization method, the medicine may be commenced with a lower degree of dynamization and pushed on, so long as a change of medicine itself is not warranted for any new condition of the patient. This method differs from what Hahnemann taught in the fifth edition of *Organon*, but he now asserts that the undesirable reactions of the vital energy and other difficulties of like nature experienced in the past, are now wholly solved by this new changed but perfected method. While discussing aph. 248, we will be acquainted with the details of this new method of dynamizing the doses.

(4) Repetition must be completely stopped immediately a definite amelioration is perceived and during its progress,

otherwise all the good results effected by the medicine will be spoiled and artificial (medicinal) disease will set in.

§. 247-248

The activity of a homœopathically selected remedy does not depend only on its being attenuated (diluted), but depends very much more upon its being potentized (*succussed* and *trituated*). We have already seen that every potentized dose of a homœopathic remedy unfailingly effects a change in the morbid condition of the vital principle, and, therefore, it certainly stands to reason that in its altered condition after the first dose of the medicine the vital principle is incapable of concurring with the unchanged degree of dynamization of the same medicine in its subsequent doses ; hence, disturbances like a medicinal aggravation (Aph. 156-164) and other accessory troubles have to be encountered. The very first dose attacks and commences its task of annihilating the disease symptoms of similarity at their seats in the patient's organism, and the subsequent dynamically *unchanged* dose will rouse the vital principle to a violent reaction ; also the other symptoms of the remedy which are not similar to the original disease, will now actively develop (as on the occasion of a proving), making the condition of the patient more sick than he originally was. Therefore, it is neither a practical nor a wise performance to repeat the same unchanged dose of a remedy even once, let alone its frequent repetition and at short intervals, in the wild expectation of hastening the cure.

MODIFICATION OF THE DOSES

We should not give a patient a second or third dose of a homœopathic medicine, even one small globule of the same potency, to be taken dry on the tongue. Likewise, when dissolved in water and its first tea-spoonful proved beneficial, a second or a third tea-spoonful or even a smaller quantity will no more be beneficial, will rather be harmful, if the contents of the phial had not been potentized with at least *two* succussions. This succussion modifies every dose in its degree of dynamization, and thus would not be harmful if the doses be repeated more frequently, "even if the medicine be ever so highly potentized with ever so many succussions". Hahnemann, in the relating foot-note, goes so far as to say. "It almost seems as if the best selected homœopathic remedy could best extract the morbid disorder from the vital force and in chronic diseases to extinguish the same, *only if applied in several different forms, i. e., potency.*"

The doses are to be prepared and given to the patients in the following Hahnemannian method :

Take a clean vial of four-ounce capacity and put about three ounces of water, with the addition of a little alcohol for purposes of preservation. Put one small medicinal globule in it and dissolve with thorough succussion. Take a tablespoonful from this phial and put in a glass containing about four ounces of water and stir it thoroughly with a clean spoon or a glass rod. This is the prepared glass of medicine which the patient should take in teaspoonful doses at such intervals as the urgency of the case demands. For hypersensitive patients, a teaspoonful of this solution may be put in a second glass of water, and

if necessary a third or a fourth glass may be similarly prepared. *Each of such* medicinal solution must be prepared every day from the four-ounce phial originally prepared and preserved with the addition of alcohol, and each time when taking out of it a tablespoonful for preparing solution for the daily doses, the vial must be thoroughly succussed.

Where *alcohol* is not available, a piece of charcoal may be substituted in order to preserve the first solution; the charcoal is to be suspended by means of a thread in the vial, and should be taken out when the vial is succussed.

It hardly requires more than one small globule to make the first solution. It may be given to the patient crushed in a small quantity of sugar of milk, to be put in a phial and dissolved in the required quantity of water, with the addition of a little alcohol, and from this the glasses of medicinal solutions may be easily prepared. In the event of repeating the same medicine, so long as it continues to be the most similar to the case, *the solution in the phial must be modified in its degree of dynamization by means of thorough vigorous succussions daily* and administered in repeated doses until the case is cured or any altered condition of the patient demands another more homœopathically related medicine.

Now, with the advantage of this new method of progressively increased degree of dynamization, Hahnemann recommends that the patient may be given a dose or several teaspoonful doses, in long-lasting diseases daily or every second day, in acute diseases every two or six hours, and

PUSHING UP POTENCY OF EVERY DOSE

in very urgent cases every hour or oftener. In this way, in the treatment of chronic diseases, even with the correctly chosen homœopathic medicine of quite a long duration of action, the dose may be repeated daily for months with ever increasing success.

If the first solution in the phial be used up in a week or a fortnight and the same medicine be still found indicated on a new inspection of the case, one globule of a *higher potency* should be used for preparing the next solution of the same medicine, taking due precaution as regards the succussion, and we should carry on its administration as advised in the preceding paragraphs so long as the patient continues to improve. But, when the patient confronts any complaint that he never experienced before in his life, the case should be studied anew in regard to the remnant of the original disease grouped together with the altered symptoms, and then a more homœopathically covering remedy must be selected in place of the last remedy and administered in the same repeated doses, strictly abiding by the instruction of modifying, i. e., increasing the degree of dynamization of every dose with thorough vigorous succussion.

When treating the three great miasms (recently grown itch, the recent chancre and the figwart), it is necessary, so long as their external manifestations continue, to commence with large doses of their specific medicines and raise their dynamization degree higher and higher every day, and if required several times daily. This procedure does not involve any danger of causing chronic medicinal disease, since the physician has the advantage

of observing the progress of the treatment day to day, until the disappearance of these lesions convince him of a perfect cure.

There may appear towards the end of the treatment of chronic disease some of the remaining symptoms of the patient apparently called homœopathic aggravation, but in fact it is only the medicinal disease simulating the original disease-symptoms caused by the excess of the homœopathic medicine. Under such circumstances the doses must be further reduced and repeated at longer intervals, or the medicine stopped altogether for some time, while it should be carefully watched if the convalescent patient did not require further medicine.

In the event of administering medicine by *olfaction*, one small medicinal globule is dissolved in a dram of alcohol, and smelled through both nostrils for a few minutes, every two, three or four days. Before each olfaction the phial must be thoroughly succussed 8 or 10 times.

§. 249-254

Hahnemann now proceeds to advise how a physician should deal with *aggravations*, and what should he do when no effect is perceptible after applying a medicine.

Where, after administering a medicine, the existing symptoms of a disease increase it indicates that the dose has been too large and strong. Further doses must at once be stopped until the symptoms have disappeared, after which the patient should be examined again and suitable medicine administered in smaller doses of the lowest

potency, with increasing degree of dynamization as advised in aph. 248.

Where, upon administering a medicine, new and troublesome symptoms, not belonging to the disease, are produced, it indicates that this medicine is unsuitable. If these new symptoms be violent, the physician must at once give the proper antidote for neutralizing the action, and then proceed to give another remedy having the greatest similitude, and in the smallest possible dose. Should the new symptoms be, however, not violent, the physician may immediately give his next remedy in place of the previous inappropriate one, which will re-establish order and health throughout. *A careful physician hardly needs the help of an antidote in his practice.*

The types of aggravation which may be observed are as follow :

“1. A prolonged aggravation with subsequent decline of the patient. This means either that the patient is incurable or that he has been overwhelmed by the turmoil ensuing on too high a potency. This usually occurs in cases of marked pathology, yet where vitality is able to emit symptoms. Under *the second prescription* we will take up what to do in such exigencies, but the doctor must be sure before resorting to a second prescription that he truly has an aggravation of the first and not the second type.

“2. This second type is a long aggravation followed by slow improvement. This means a serious case on the border of incurability but caught just in time.

“3. The third type of aggravation is quick, brief and

vigorous, followed by speedy relief of the patient. This type is much to be desired and is a sign that the improvement will be of long duration, and that structural changes are in non-vital organs. Abscesses and suppurating glands appear at times in these cases as part of the aggravation. This is a good sign and should not be interfered with.

"4. The fourth type is where there is practically no observable aggravation and yet the patient recovers steadily. This is ideal and shows that there is no great organic disease and that the potency chosen exactly fitted the case, especially if during recovery the symptoms follow Hering's laws, which will be discussed later.

"5. The fifth type is where brief amelioration comes first and aggravation afterwards. This means either that your remedy was only palliative and did not touch the true constitutional state of the patient, or else that the patient was incurable, or else that some deeper miasmatic remedy is needed like a mordant to enable the indicated remedy (or dye, to follow out our simile) to take hold. For example, a *Silica* case of ours would be markedly ameliorated for a week or ten days and then slip back, nor did a change of potency hold longer; however, *Tuberculinum* took hold and kept it, and since then other remedies.

"6. Another type of aggravation is where the symptoms developed turn out to be a proving of your remedy. This may be due to an idiosyncrasy to the particular drug on the part of your patient or the patient may be an oversensitive who proves everything given him. These patients need the medium low potencies and are often incurable.

VARIOUS TYPES OF AGGRAVATIONS

"7. Another apparent form of aggravation is where new symptoms appear after the administration of a remedy. This suggests that the prescription was incorrect and will be dealt with under the *second prescription*.

"8. There is a type of aggravation in which the patient himself feels better. This is often followed by old symptoms reappearing in the reverse order of their coming (Hering's laws of cure). This is highly favourable. The physician must note the direction of the appearing symptoms. If they go wrongly, *i. e.*, from without inward, it is dangerous ; if from within outward it is favourable.

"Another variant, which is without actual aggravation, is too short relief of symptoms without any special aggravation. This is very similar to the fifth and causes the physician to cast about for a miasmatic remedy.

"Sometimes there is a full time amelioration of symptoms without any special relief of the patient himself. This shows a case that is only open to palliation, the vital force cannot make the grade of cure.

"An unnecessarily severe aggravation is caused by too high or too low potency. A well chosen potency will give, as above, either no aggravation or a quick short one. Too prolonged an aggravation may be caused by giving too low a potency or by repeating. In the aggravations after high potencies, such as CM in curable cases, the patient feels distinctly better even during the aggravation, as it is the characteristic symptoms and not the disease or the patient which are aggravated.

"A very feeble vitality may not be able to throw out an aggravation, and such must be given a single dose of a really

high potency and watched for the minutest signs. On the other hand a strong vitality may have marked tissue changes which will produce a violent aggravation, so that the physician must bear in mind the two factors, the vitality of the whole and the pathological changes, and balance these carefully in his choice of potency.

"If there is no aggravation in cases of vigorous vitality, it is probable that your remedy was only partially similar (the ideal cases of recovery without perceptible aggravation are usually not those with especially marked vitality). In acute diseases an amelioration without a slight initial aggravation often means that your remedy is not deep enough and another dose of it will probably be needed".

—[Elizabeth Wright Hubbard, M.D.]

Medicines having *alternating actions* like belladonna, ignatia, rhus tox, etc., often suffer delay in producing effects. In acute disease, where such medicines, being homœopathically applied, do not produce rapid effect, the physician will gain his object by repeating it in the smallest dose within a few hours. In other cases, the usual repetition of doses will effect the improvement which the medicine is capable of producing.

§. 252-256

In chronic diseases, especially psoric, when the physician finds that his accurately selected remedy, given in the smallest doses, does not produce an improvement, he must take it as a sure sign that the maintaining cause of the disease is still there, and that there must be something in the patient's mode of life or environments which

PATIENT'S DISPOSITION AND Demeanor

stand in the way of improvement, and which must be removed before the cure can be effected.

In the event of our selected remedy being not strictly homœopathic, the patient may tell us about some new contingencies or important symptoms, yet he may, even for sake of courtesy, hearten us that he feels better. But his aggravated condition and his newly set in symptoms, so perfectly apparent to the observing physician, can never warrant him to take the assurance of the patient as true. In the case of patients suffering from pulmonary phthisis, especially with lung abscess, the physician must always be extremely cautious in coming to a judgement about improvement; for, even the good-naturedly disposition of such patients are often deceptive; and a physician giving a hasty prognosis frequently becomes overwhelmed with perfectly apparent aggravation setting in very soon.

The signs of amelioration or aggravation in all diseases, especially in those of an acute nature, though not perceptible to every person, most certainly manifest themselves first in the patient's state of mind and his whole demeanor, and this is quite instructive to the physician. A greater degree of comfort, an increased calmness of conduct, affability, high spirits, etc., show that he is returning to the normal state. On the other hand, the opposite condition manifests with the slightest commencement of aggravation, to be found in all his gestures, postures and actions, in his whole deportment, all these do not escape the notice of the observing physician, though cannot be expressed in words.

In the relating foot-note Hahnemann observes that the improvement in the disposition and mind may be

expected soon after the medicine has been taken, only when the dose has been *sufficiently minute*, i. e., as small as possible ; an unnecessarily larger dose of even the most suitable homœopathic medicine acts too violently, and at first produces too great and too lasting a disturbance of the mind and disposition obscuring any improvement in them. "I must here observe that this so essential rule is chiefly transgressed by presumptuous tyros in homœopathy, and by physicians who are converted to homœopathy from the ranks of the old school. From their old prejudices these persons abhor the smallest doses of the lowest dilutions of medicine in such cases, and hence they fail to experience the great advantages and blessings of that mode of proceeding which a thousandfold experience has shown to be the most salutary ; they cannot effect all that homœopathy is capable of doing, and hence they have no claim to be considered its adherents".

The physician at times finds to his perplexity and annoyance that his patient is incapable of appreciating or explaining any amelioration or aggravation. Some will deliberately not admit it. Let the physician now refer to his notes of the disease recorded in his case-taking journal and go over all the symptoms, one by one, and ascertain if his patient complain of any new and unusual symptoms or if any of the old symptoms has increased. Should there be no such contingencies apparent, and an improvement is observed in the patient's disposition, the medicine must be regarded to have positively abated the disease, or will soon do it if sufficient time be allowed. "If now the improvement delay too long in making its appearance, this depends

BEWARE OF MAKING FAVOURITE MEDICINES

on some error of conduct on the part of the patient, or on other interfering circumstances". Such obstacles must be removed forthwith.

§. 257—258.

Hahnemann warns homœopathic physicians against making favorite medicines. Some physicians have the weakness for making favourite remedies of medicines which they have had the opportunity of using frequently with good results, while they neglect other medicines which gave them disappointment or unsatisfactory results due to erroneous selection. "He must bear in mind the truth that, of medicinal agents that one alone invariably deserves preference in every case of disease which corresponds most accurately by similarity to the totality of the characteristic symptoms, and that no paltry prejudices should interfere with this serious choice".

Unfortunately junior practitioners are prone to get into the habit of blindly adopting any favourite prescription of a senior whom he invites for consultation, basing on pathogenetic name of the case, but without having the courage or taking the trouble of testing the symptom-similarities of the patient and the remedy chosen by his senior, and indiscreetly applies this remedy in other cases of a similar nomenclature, mentioning the authority of the senior whose reputation he thus unwittingly compromises.

DIET & REGIMEN

§. 259—265.

The action of the minute doses of homœopathic medicines is disturbed and destroyed by ingestion of articles having

medicinal and irritating properties. The relating footnote explains it in a metaphoric style: "The softest tones of a distant flute that in the still midnight hours would inspire a tender heart with exalted feelings and dissolve it in religious ecstasy, are inaudible and powerless amid discordant cries and the noise of day".

Errors in diet and regimen are often overlooked by physicians, but the baneful influences of such neglect, unwitting or deliberate on the part of the patient and his nurse or relations, seldom fail to aggravate the disease and form a positive obstacle to cure. None-the-less do they constitute the exciting or maintaining cause of a disease. The reader should refer to discourse under aphorisms 7 and 8.

Hahnemann gives a comprehensive list of articles under this category: (1) Coffee; (2) fine Chinese and other herb teas; (3) beer prepared with medicinal vegetable substances unsuitable for the patient's state; (4) so called fine liquors made with medicinal spices; (5) all kinds of punch; (6) spiced chocolate; (7) odorous waters and perfumes of kinds; (8) strong-scented flowers in the apartment; (9) tooth powders and essences and perfumed sachets compounded of drugs; (10) highly spiced dishes and sauces; (11) spiced cakes and ices; (12) crude medicinal vegetables for soups; (13) dishes of herbs, roots and stalks of plants possessing medicinal qualities; (14) asparagus with long green tips, hops and all vegetables possessing medicinal properties, celery, onions; (15) old cheese, and meats that are in a state of decomposition, or that possess medicinal properties (as the flesh and fat of pork, ducks and geese,

or veal that is too young and sour viands); these should be kept away from the patients, and they *should also avoid* all excesses in food, and in the use of sugar and salt, as also spirituous drinks undiluted with water, heated rooms, woollen clothing next to skin, a sedentary life in close apartments, or the frequent indulgence in mere passive exercise (such as riding, driving or swinging) prolonged suckling, taking a long siesta in a recumbent posture in bed, sitting up long at night, uncleanliness, unnatural debauchery, enervation by reading obscene books, reading while lying down, onanism or imperfect or suppressed intercourse in order to prevent conception, subjects of anger, grief or vexation, a passion for play, overexertion of mind or body, especially after meals, dwelling in marshy districts, damp rooms, penurious living, etc. "All these things must, as far as possible, be avoided or removed, in order that the cure may not be obstructed or rendered impossible. Some of my disciples seem needlessly to increase the difficulties of the patient's dietary by forbidding the use of many more, tolerably indifferent things, which is not to be commended".

It is safest to avoid meat and fish, especially in cases of skin eruptions. Soups of beef, mutton or chicken and fish may be allowed in some cases, but spices and onions must be strictly avoided in the preparation of same.

Preserved fruits, jams and jellies are harmful. Sour fruits are forbidden. Fresh ripe fruits of the sweet varieties may be eaten either raw or cooked.

Pure water is the best drink and beverage for use of

patients, but it should be boiled and cooled before giving to them.

Cow or goat milk first boiled, whey, barley water, sago porridge, oatmeal gruel are allowed.

There is no prescription as to the quantity of food or drink to be taken, since the wants and inclination of the patient in this respect provide the correct standard. Caution, of course, should be observed in respect of delirious and mentally defective patients who have abnormal cravings.

In chronic diseases, the physician should very closely observe the desires and aversions of the patient in respect diet and regimen, supplying where necessary, and prohibiting where it stands as obstacle to recovery. Innocent moral and intellectual recreation, active exercise in the open air in almost all kinds of weather (daily walks, slight manual labour), suitable, nutritious unmedicinal food and drink, etc., should be directed.

In acute diseases, where no delirium or mental perversion exists, the patient's urgent desires in the way of food or drink indicate the want of the unerring internal sense of the vital principle, and such things should not be refused. Neither should the patient be persuaded to take anything of an injurious nature.

Proper regimen for patients will mostly depend upon their individual requirement, and it is not difficult for any intelligent physician to enjoin and regulate sanctions and restrictions. As a regular rule the following may be taken as proper regimen for the patients :

The patient should not be placed in a heated room. No

fumigation should be allowed, but the room should be well ventilated and kept scrupulously clean.

Warm foot-baths, mustard or herb baths, fomentations, pastils and lozenges, the smell of camphor, snuff must be guarded against, as they suppress nearly all medicines. Tooth powder, mouth washes, toilet vinegar, scented hair oil should be avoided. Persons accustomed to smoking tobacco need not give it up altogether, but it will be well to moderate the use of it.

Rings, ear-rings, necklaces of amber, coral or substances of medicinal virtue must be discarded.

The Indian habit of chewing betel with lime, araca nuts and spices, is positively harmful and spoils the good action of homœopathic medicines.

The clothing of the patient should be comfortable. Woollen clothing next to skin must be forbidden. The cloths and bed linen should be washed daily with soap and boiling water, and the bedding sunned every day for several hours.

“With respect to mind and spirit, everything passionate and straining is injurious, and should be carefully avoided. Not only vexation, grief, fright, anger, etc., but also excessive joy and other pleasant affections act in a disturbing manner. So also every strenuous exertion of the mind through reading, especially through card playing, are forbidden; and also ennui, which induces all manner of thoughts about the state of health”.

The chronic patients should take moderate exercise in open air, as sedentary life in close apartments stands in the way of improvement.

Physicians practising in India should get themselves acquainted with the medicinal virtue of the numerous vegetable articles of diet which are commonly used in various forms of diseases as traditional accessory remedies in particular cases. These must be forbidden during the course of homœopathic treatment. For instance, the expressed juice of leaves of *Ægle mermelos*, and decoction of the dried fruit in dysentery ; the juice of *Adhatoda Vasica* with honey or the juice of Basil with honey in respiratory affections of children ; decoction of *Boerhavia* and *Terminalia Arjuna* in dropsy and œdema ; infusion of *Tribulus terrestris* (गोकुुर) in urinary troubles ; infusion or decoction of *Triphola* (*Terminalia Chebula*, *Phyllanthus emblica* and *Terminalia Bolerica*) as purgative ; senna leaves, rose-patel and sugar rubbed into a paste as laxative ; these should be strictly forbidden, while ingesting homœopathic medicine.

Plantago ovata is an excellent innocuous nonmedicinal laxative to be used in preference to Petroleum emulsions. Likewise, linseed tea is a harmless diuretic without medicinal action. These two substances do not interfere with the action of homœopathic remedies.

PHARMACY

§ 266—268

We now come to the Pharmacy part of Hahnemann's Organon of Medicine.

To save the humanity from the grip of sickness the conscientious physician should provide himself with genuine medicines of unimpaired strength. He should be able to judge of their genuineness and must give the patient the

correctly chosen medicine *prepared by himself*. Thus it becomes necessary for the physician to possess knowledge of Botany, Mineralogy, Zoology, Biology, Chemistry and Pharmacy.

Homœopathic medicines are obtained from six different kingdoms, namely :

1. From the vegetable kingdom, e. g., Aconite, China, Hyoscyamus, Cannabis Indica, etc.

2. From the animal kingdom, e. g., Agaricus muscarius, Ambra grisea, Apis mellifica, Lachesis, Lac caninum, etc.

3. From the mineral kingdom, e. g., Antim crude, Aurum met., Ferrum met., Sulphur, and include Chemical compounds, e. g., Hepar sulph., Ammon carb., Antim tart., Calcarea carb., Mercurius iodatus, etc. ; elements, Salts, etc.

4. From Imponderabilia, including magnetic forces, electricity, sun force, etc.

5. From Nosodes : virus of diseases, e. g., Diphtherinum, Medorrhinum, Syphilinum, Tuberculinum, etc.

6. The Sarcodes which are remedies prepared from healthy animal tissues and secretions, such as uric acid, Thyro-Iodine. This also includes endocrine remedies.

In homœopathy, medicines are used in the forms of tincture and trituration. Small globules saturated with tinctures are mostly used in actual practice.

Hahnemann gives the following instructions for preparing medicines :

1. While collecting green plants, they should not be laid one above the other. For, by transudation the greatest part of their medicinal properties are lost.

2. Indigenous drugs, in fresh state, should be pressed

for extracting their juice which should immediately be mixed with equal part of alcohol of 87 per cent strength. This mixture should be put in a closed stoppered bottle and allowed to stand 24 hours for depositing the fibrinous and albuminous matter. The superincumbent fluid is then decanted off for medicinal use. The presence of alcohol in this fluid will prevent it from fermentation. It should then be put in well corked bottle with wax capsule to prevent evaporation, and kept excluded from sunlight. In this condition the medicinal power of the vegetable juice remains perfect and uninjured for an indefinite length of time. Some plants contain thick mucus, e. g., *viola tricolor*, *Æthusa cynapium*, *solanum nig.*, etc., and these require a double proportion of alcohol, so that the alcohol may combine with the drug and extract the juice which may then be easily pressed out.

In aphorism 271 Hahnemann over-rules this procedure and advises that the physician may use the fresh plant itself, taking only a few grains of it in a mortar and triturating it with sugar of milk until $1/1000.000$ is reached. It should then be dynamized with alcohol according to the prescribed process.

3. Imported plants, barks, seeds, roots and animal substances should be finely powdered and dessicated before storing them. This is done by spreading out the powder on a flat tinplate with raised edge and placing it on a waterbath. Keep stirring the powder until it becomes so dry that the particles do not stick together and all the lumps crumble into fine sand, separated from each other, and can easily be crushed into dust. These powders should

TRITURATION AND SUCCUSION

be kept in air-tight bottles and protected from day light. They will thus retain their full original medicinal power, without ever being damaged by mould or insects.

DYNAMIZATION.

§. 269—270.

Hahnemann now explains his process of *dynamization*. This is done by regularized trituration and succussion, under the condition of employing an *indifferent* vehicle in certain proportion. Before his time, changes were known to have been brought about in different natural substances by means of friction, warmth, heat, fire, etc., which developed only physical and chemical alterations. But by Hahnemann's unique process, the individual crude substance develops its inherent medicinal properties, a process and effect never dreamt of before Hahnemann, and even now is wilfully unrealized by the dominant school of medicine, whose adherents cannot have faith in the magical curative powers of the minute doses of medicines prepared according to homœopathic rules.

Some physicians whose sciolism does not step beyond the orbit of materialism, scoff at the idea of Hahnemann's process of attenuation and potentization activating even inert substances and unfolding their curative virtue. Record of the experiments by the modern and eminent scientist Dr. E. Kolisko, with other medical helpers, in the Biological Institute at the Goëthanum, Stuttgart, Germany, throws a flood of light on this subject and should dispel the cloud of scepticism of the wilful disbeliever. The report appears in Dr. (Madam) L. Kolisko's article "Research

into the Influence of the Infinitesimal", as appeared in *Homœopathic Herald*, vol. 1.

The occasion that led to the discovery, rather confirmation of Hahnemann's experience of potencies, was a severe epidemic of foot and mouth disease that broke out in the year 1920 among the cattle of Wurtemberg in Germany. To fight this disease, a remedy was suggested by Dr. Rudolf Steiner, the renowned founder of the Anthroposophical Movement in Germany. This remedy was prepared at Madame L. Kolioko's laboratory, and with the consent of the Government it was tried on cattle on an extensive scale, thousands of cattle being treated and observed. The first difficulty of finding the right method of making the remedy was surmounted, but their next difficulty was to find *the right dilution* to employ. Here again Dr. Steiner's advice was sought for a reliable method of determining a correct degree of dilution for giving injections to the infected cows. In answer the Doctor said: "The best way to proceed would be to observe the effect of different dilutions of the substance upon seed germination. By this means you will get a curve that will be a reflection of the vital process that work in the body of the cow."

In 1920 Dr. Kolisko started testing the effects of various dilutions of the substance upon germination of seeds. Seeds of various plants were selected for treatment, good seeds only being used, dead and sterile seeds being thrown away. At each stage of diluting he doubled the dilution strength, so that the range ran as 1, $\frac{1}{2}$, $\frac{1}{4}$, $\frac{1}{8}$, $\frac{1}{16}$, $\frac{1}{32}$, and so on. On treating the seeds it was, however, observed that no germination at all took place over wide sections of

LATEST CONFIRMATION OF OUR POTENCIES

the range of dilutions; the seeds lay dormant and covered with mould. It then occurred to the Doctor that the differences in the degree of dilutions might be too slight, and it became very inconvenient to carry on calculation with vulgar fractions. So, in his next experiment he adopted decimal ratio in his dilutions, the ratio now running in fractional series as 1 in 10, 1 in 100, 1 in 1000, 1 in 10000, and so on. His second set of dilutions, therefore, represented decimal potencies. Dr. Kolisko was unconsciously treading the path of Homœopathy. His experiments gave him a clue to its understanding.

After three years of unbroken work to study the effect of highly diluted substances on plant growth he published the first results in 1923, and the second publication appeared in 1926. Dr. Kolisko was able to give a detailed report of this work to the International Homœopathic Congress held in London in the year 1927. He was highly congratulated on the careful and scientific way in which these experiments and investigations had been carried on.

Dr. Kolisko observes that it needs great exactitude together with a fundamental knowledge of the various factors that influence plant growth, such as light and darkness, electricity and magnetism, the influence of the seasons and so on. A faculty for selecting grains and seeds that possess approximately the same energy of growth—the energy of growth being not the same thing as faculty of germination, and a careful selection of seeds of similar character are indispensable for accurate results.

One of the methods of experiment followed by Dr. Kolisko was this: 10 gms of nickel sulphate (a green salt)

is dissolved in 100 cc of water, which is the first potency, i. e. a dilution of 1 in 10. This solution must be *carefully shaken for some time*, the exact time of shaking required by each substance had also to be found by a long series of experiments. Thirty selected wheat grains are then placed in a shallow glass dish and moistened with this 10% nickel sulphate solution. Other glass dishes, each containing thirty similar wheat grains and damped with water only, were used as control. The next process is to take one-tenth of the first potency and dilute it with 90 cc of water in carefully cleaned vessels and shaking as before. This gives the second potency, 1 in 100, and with this solution the wheat grains in the next dish are moistened. The process may thus be continued *ad libitum*, but Kolisko stopped at the 60th potency. All the dishes are now placed under the same conditions of light and warmth while the grains are kept moist with their respective potencies as the moisture evaporates.

After a few days he found that in the control grains—damped with water only, both sprout and roots were approximately 1 cm long. The grains exposed to the influence of the first potency, i. e., $\frac{1}{10}$, were swollen, but were beginning to germinate. The grains damped with the second potency, i. e., $\frac{1}{100}$, were a little more advanced, while with the third ($\frac{1}{1000}$) potency the roots could already be distinguished. With the fourth ($\frac{1}{10000}$) potency the growth was nearly equal to that of the water control, while the fifth showed an advance on that. The sixth potency retarded the growth a little, but the *seventh* ($\frac{1}{10000000}$), one part of substance to ten million parts of water

FORCE WITHOUT SUBSTANCE

stimulated growth to a great extent and produced a level of growth far beyond that of water control. Thus, it was found that the less the actual substance used the stronger was its effects. Contrary to the common thinking that force and mass are proportions, it was found here that the *less the substance the greater the force*.

Again, the effect of some higher potencies, e.g., the 41st, 42nd., 43rd potencies, was *twice as big* as the water control, whereas the 44th. potency showed again a retarded growth, while the 45, 46, 47th. indicated the beginning of a new maximum. The 49th. potency showed even a higher maximum than what was first observed at the 7th. potency. This highest maximum occurs at the 49th. potency, which is 7 times 7. By this time there is no observable trace of material substance left, for at these levels of dilution we should require the waters of all the oceans of the world to hold one observable atom of the physical substance. At these levels the experiment indicates the presence of a *force* that has no physical basis, *force without substance*.

It is thus demonstrated that at a certain point we reach the limit of the world substance and a leap must be made into another world which we may call *the spiritual world*, but it is just this leap which people hesitate to make, especially if they are scientists.

Dr. Kolisko says: "Similar experiments have also been extended to the animal kingdom when, with tadpoles for instance, we find that with potencies that produce the maximum growth in plants, abnormally large growth results. while with the potencies that retard plant growth, tadpoles die. With other animals, mice for instance, we find an

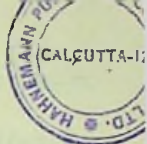
increase or decrease in powers of reproduction and certain illnesses occur."

"In these experiments we may say that we touch a *realm from which the immaterial and invisible can produce material and visible results.*" The researches point to the conclusion that the phenomena of force with matter provide direct proof of the influence of the spirit in the realm of the material.

Dynamization means the unfoldment of the latent conceptual spirit-like essence, the remedial power of medicinal substances, absolutely distinct from their chemical and physical properties, and even of such substances which in their crude state have not the slightest medicinal action on the human body. This is effected by mechanical action upon their minute particles by means of trituration and succussion through the addition of inert substances, dry or liquid, and carried to infinite extent, by which action the medicinal powers hidden within develop and manifest more and more, as if it spiritualizes the material substance itself. The process is called dynamizing or potentizing, and the products are called dynamizations.

Trituration means a product obtained by rubbing a crude substance with sugar of milk in definite proportions for a prescribed length of time, by a fixed method. The process is called triturating. It is adopted to dynamize medicinal substances, either dry or of oily nature.

The sugar of milk which is used as a vehicle for triturating, must be of special pure quality, crystallized on strings in the shape of long bars.



TRITURATION

To commence the process of triturating, you require 100 grains of sugar of milk and one grain of the powdered medicinal substance. The bottom of a glazed porcelain mortar should be dulled previously by rubbing with fine, moist sand. Divide the quantity of sugar of milk in three equal parts and place third of it into the mortar. Upon this put one grain of the powdered medicine, or one drop of liquid substance like quicksilver, petroleum, etc., For a minute, mix the sugar of milk and the medicinal substance with a porcelain spatula, triturating briskly for six to seven minutes, rubbing the pestle lightly. Then scrape the mass from the bottom of the mortar and from the sides of the pestle for 3 to 4 minutes, making the product homogeneous. Triturate this once more in the same way for 6 to 7 minutes and scrape for 3 to 4 minutes whatever adheres to the pestle and mortar. You have thus spent 20 minutes in these first two operations. Now take another third part of the sugar of milk, add this to the triturated product and mix with the spatula; triturate again for 6 to 7 minutes as was done in the first two operations, thus finishing the second part of process which also takes 20 minutes to complete. Now the last third portion of the sugar of milk should be added, mixed with spatula, and triturated 6 to 7 minutes as before, scraping 3 to 4 minutes, and again rubbed 6 to 7 minutes, finishing this third part of the process in further 20 minutes. The whole process, therefore, takes full one hour. The powder thus prepared should now be put in a phial, well corked, and protected from direct sunlight. It should be labelled with the name of the

medicinal substance and marked (100) to indicate the first degree of trituration. Each grain of this powder contains $1/100$ grain of the drug.

To raise this to the second degree of trituration, take one grain of the powder (100), and carry on triturating three times with one hundred grains of sugar of milk divided in three equal portions, each time twice with a third portion of 100 grains, for 6 to 7 minutes, and scraping 3 to 4 minutes; thus at the end of one hour all the 100 grains of sugar of milk is finished, and now the powder is put in a well-corked phial with a label bearing the name of the substance and marked (2c., or 10000) to indicate the the second degree of trituration. Each grain of this powder contains $1/100000$ grain of the drug.

In the same way, raise it to the third degree of trituration, of which each grain will contain $1/1000,000$ grain of the drug. It is now in the proper state to be converted into liquid for commencing dynamizations of this medicinal substance.

The utensils, namely, mortar, pestle and spatula must be thoroughly cleaned before using them for another medicine. These should at first be washed with warm water and dried, subsequently put in a kettle of boiling water for half an hour. It would not be a superfluous precaution to place these utensils to the glowing heat on a coal fire.

POTENTIZATION.

The process of triturating (rubbing with sugar of milk) and of succussing (shaking with alcohol) develops the latent specific powers of the medicinal substances. The aid of the

PROCESS OF POTENTIZING

unmedicinal medium for attenuation is only a secondary consideration in dynamizing medicines. A grain of salt diluted with some water cannot develop any medicinal virtue, but will develop wonderful power by means of Hahnemann's process of dynamization. Hence, it is only idiotic to call homeopathic potencies as mere dilutions.

Hahnemann and his direct disciples always preferred and prescribed the centesimal scale of triturations and dynamizations. Later homœopathists, however, adopted the decimal scale, and the latest Official Homœopathic Pharmacopœia of the U. S. A. has discarded the centesimal scale, having *standardized* all tinctures and powders with $\frac{1}{10}$ drug strength. All such triturations and dynamizations are now marked with X after the numerical figure indicating the degree of potency. Thus 6x means the 6th degree of potency of the decimal scale.

In the foot-note to aphorism 267 Hahnemann advises that the alcoholic extracts of vegetable substances, when dried, may be triturated with sugar of milk up to the third degree of trituration ($1/1000000$), and then diluted and potentized.

The general process of potentizing is to put one drop of the *mother tincture* in a phial and add to it 100 drops of alcohol of the necessary strength, taking care that the size of the phial be such as to fill only two thirds of it with its contents, so that enough space will be left vacant for vigorous movement of medicinal molecules while succussing; give one hundred strong succussions with the hand against a hard but elastic body, e.g., on a leather-bound book. This is the *first* degree of dynamization.

ESSENTIALS OF HAHNEMANN'S ORGANON OF MEDICINE

Further potentizations were made, according to Hahnemann's earlier instructions, by taking one drop of the liquid of a lower potency to 100 drops of alcohol and giving to it 100 succussions for the next higher potentization. "The proportion of the vehicle of attenuation to the medicine to be dynamized (100 : 1) was found altogether too limited to develop thoroughly and to a higher degree, the power of the medicine by means of a number of such succussions without specially using great force, of which wearisome experiments have convinced me".

According to his latest instructions, one grain of the trituration of the *third degree* (1/1000000) is to be dissolved in 500 drops of vehicle containing one part of alcohol and four parts of distilled water. If permitted we may call this as our mother tincture. One drop of this is put in a phial and to this are added 100 drops of pure alcohol (the vial used for potentizing is filled only two-thirds full) and given one hundred strong succussions. We have now to moisten small globules of sugar and starch as per direction given below, and when dry keep these in a well corked phial with the sign 1 to indicate the *first degree of potency*. These globules are now fit to be given to the patient.

The homœopathic physician requires globules of such size that only one hundred of these will weigh only one grain. "A small cylindrical vessel shaped like a thimble, made of glass, porcelain or silver, with a small opening at the bottom, in which the globules to be medicated are put. They are moistened with some of the dynamized medicinal alcohol, stirred and poured out on blotting paper,

HOW GLOBULES SHOULD BE MEDICATED

in order to dry them quickly". This is Hahnemann's process of medicating the globules.

For further dynamization, one globule of the first potency is to be put in a second *new* phial with a drop of distilled water to dissolve it, and then 100 drops of alcohol added and dynamized with 100 strong succussions in the same way. With this medicinal fluid, globules are again moistened, spread on blotting paper and dried quickly; they are now put in a well corked phial, labelled with the name of the medicine and marked 2 to indicate the second degree of potency.

This process is continued until the 29th potency is reached. Now, one globule of this potency is dissolved in one drop of distilled water to which is added 100 drops of alcohol with 100 strong succussions, and thus we obtain the thirtieth potency. Globules moistened with this medicinal fluid receive the thirtieth dynamization degree.

We thus see that in these progressively prepared dynamizations the material part of medicine is lessened with each degree of dynamization, but it increases in power, in the development of its true, inner medicinal essence, to an incalculable high degree.

The spirit-like medicinal power of these medically prepared globules manifest the curative effect all the more when dissolved in water before being administered to the patient. When one such globule is taken (of which 100 weigh one grain), and dynamized with 100 drops of alcohol, we have a proportion of 1 to 50,000 and even greater, because 500 such globules can hardly absorb one drop for their saturation. With this extravagantly higher ratio

between the medicine and the diluting medium, many successive strokes of the phial filled two-thirds with alcohol can produce a much greater development of power than in the proportion of 1 drop of medicine to 100 drops of alcohol. In fact, it produces medicines of the highest development of power and mildest action which, however, if well chosen, touches all suffering parts curatively. Here Hahnemann observes : "In very rare cases, notwithstanding almost full recovery of health and with good vital strength, an old annoying *local trouble* continuing undisturbed, it is wholly permitted and even *indispensably* necessary to administer in increasing doses the homœopathic remedy that has proved itself efficacious, but potentized to a very high degree by means of many succussions by hand. Such local disease will often then disappear in a wonderful way".

In regard to his last method of dynamization as described above, Hahnemann says, "In acute fevers, the small doses of the lowest dynamization degrees of these thus perfected medicinal preparations, even of medicines of long continued action (for instance, *belledonna*) may be repeated in short intervals. In the treatment of chronic diseases, it is best to begin with the lowest degrees of dynamization and when necessary advance to higher, ever more powerful but mildly acting degrees".

PHYSICIANS SHOULD PREPARE HIS
OWN MEDICINES

§. 271—274.

Ultimately Hahnemann enjoins that in order to save men from sickness the physician should personally prepare

HOW TO ADMINISTER A DOSE

his homœopathic medicines. Where he does not require the expressed juice for purposes of healing, the method of preparation is very simple. He may use the fresh plant itself, as it requires only a little of the crude article. He has to triturate just a few grains of the drug either of dry or oily nature, with 100 grains of sugar of milk three distinct times, as advised, until he reaches the third degree (i. e. one millionth) trituration. He will then convert a small portion of this trituration into liquid by means of shaking with a medium consisting of 1 part of alcohol and 4 parts of distilled water. Next he saturates his globules and carries on further potentizing.

Be it noted that these small medicated globules retain their medicinal virtue for *many* years, if protected against sunlight and heat.

DOSE AND HOW TO TAKE.

§. 272—274.

For a moderately recent case of illness, one such globule placed dry on tongue is one of the smallest doses; the medicine thus touches only a few nerves. But when this globule is crushed with some sugar of milk and dissolved in a good quantity of water, as advised under aphorism 247, and stirred briskly before taking every dose, it yields a far more medicinal power for the use of the patients for several days. In such form, every dose, however minute it may be, touches every nerve.

Some undrilled homœopathic practitioners have the weakness of administering to their patients two or three medicines alternately every hour or even every few

minutes. It is irrational, unnecessary and not permissible ; further, it is quite inconsistent with nature to prescribe a mixture of several differently acting drugs. Only a *single* medicine at one time in a disease, is the *sine qua non* of homœopathic treatment. It is absolutely not allowed in homœopathy, the one true, simple and natural art of healing, to give the patient *at one time* two different medicinal substances."

Of course, Homœopathy has such medicines as Calcarea phos., Natrum sulph., etc., and unblushing insurgents may cite these chemical compounds in support of their lawless prescribing of two drugs (e. g. Calcarea and Phosphorus) simultaneously. Here Hahnemann checks them with the following observation : "Two substances, opposite to each other, united into neutral Natrum and middle salts by chemical affinity in unchangeable proportions, as well as sulphuretted metals found in the earth and those produced by technical art in constant combining proportions of sulphur and alkline salts and earths, (for instance, natrum sulph. and calcarea sulph.) as well as those others produced by distillation of alcohol and acids, may, together with phosphorus, be considered as *simple* medicinal substances by the *homœopathic* physician and used for patients. On the other hand, those extracts, obtained by means of acids, of the so-called alkaloids of plants, are exposed to great variety in their preparation (for instance, chinin, strychnine, morphine), and can therefore not be accepted by the homœopathic physician as simple medicines, always the same, especially as he possesses, in the plants themselves, in their natural state (Peruvian bark. nux vomica, opium)

COMPOUND AND COMPLEX REMEDIES PROHIBITED

every quality for healing. Moreover, the alkaloids are not the only constituents of the plants."

Is it not, therefore, wise to use simple medicines, singly and uncombined, whose artificial disease producing effects have been proved beyond all doubts and whose homœopathic power to completely vanquish and eradicate natural diseases are absolutely dependable and established? Hahnemann reminds us of the wise maxim that "it is wrong to attempt to employ complex means when simple means suffice." None can, indeed, anticipate in what way *two or more* medicinal substances, when compounded, would act on the human body, obstructing and changing each other's effects. Even if by using single simple remedies "in strict conformity to the similarity of symptoms", such contingencies as the evolution of accessory or generic symptoms take place or new symptoms show themselves in a case, this will be to our advantage so far as to add to our knowledge of the medicinal substances as therapeutic agents. We overthrow such a great advantage when we employ compound remedies. Hahnemann says that let the *rational* physician chose the perfectly homœopathic medicine for the well-considered case of disease and administer it internally, leaving to irrational allopathic routine the practice of giving drinks or fomentations of different plants, of injecting medicated glysters and of rubbing in different ointments and liniments.

PROPER DOSE OF HOMŒOPATHIC MEDICINES.

§. 275—279.

In any given case of disease the propriety of a medicine does not depend entirely on its accurate selection upon

homœopathic similarity, but equally depends on 'the proper size, or rather smallness, of the dose.' If given in *too strong a dose*, it will, for its magnitude, prove injurious by producing too strong impression through the vital force by virtue of its homœopathic similarity of action, by affecting the most sensitive parts of the organism which are mostly grasped by the natural disease. Thus, every dose of the homœopathically selected medicine, when too large and too strong and in higher potency, proves more harmful and injurious than the equally large dose of medicine that is not homœopathic to the case. There are advocates of large doses in the ranks of homœopaths, who use only the very low dynamizations of medicines or their selections are not accurately homœopathic and therefore do not touch the sensitive parts of the morbidly affected organism.

When too large doses are administered, especially in frequent repetitions, as a rule they create a good deal of trouble, rendering the disease almost incurable or endangering the life of the patient; if selected accurately, the very moment the strong dose is taken it will, indeed, play its part and remove the morbid sensation of the life principle derived from the original disease, but the patient will in consequence become more ill and suffer from a similar yet more violent *medicinal disease* which is most difficult to cure. This result is quite obvious in the allopathic treatment of intermittent fever by pushing Quinine daily in very large doses in those cases where the medicine is homœopathically indicated. Here "one very small dose of a highly potentized china would unfailingly help in marsh intermittents and even in persons who were not affected by

PROPER DOSE OF HOMŒOPATHIC MEDICINES

any evident psoric disease." By the heroic treatment with mighty and oft-repeated doses of cinchona preparations "a chronic china malady (coupled at the same time with the development of psora) is produced, which, if it does not gradually kill the patient by damaging the internal important vital organs, especially spleen and liver, will put him, nevertheless, suffering for years in a bad state of health. A homœopathic antidote for such a misfortune produced by abuse of large doses of homœopathic remedies is hardly conceivable".

The more its dose is reduced to the degree of minuteness suitable for a gentle remedial effect the more salutary will be the cure from an accurately homœopathic medicine, and the world will marvel at its efficacy.

Now, how small must be the dose of each individual medicine, the most suitable degree of minuteness, to effect the best cure, is a question that causes no small perplexity to a beginner. Hahnemann himself observes that, to solve this problem is not the work of theoretical speculation; we cannot expect to come to the solution of this problem by fine-spun reasoning, by specious sophistry. Thus says Hahnemann, "It is just as impossible as to tabulate in advance all imaginable cases. Pure experiment, careful observation of the sensitiveness of each patient, and accurate experience can alone determine this *in each individual case*".

The homœopathically selected and highly potentized remedy, even in chronic and complicated diseases, *in its smallest possible dose*, will not fail to produce artificial disease stronger than the natural disease of the patient:

it will overpower the natural disease and extinguish it, effecting the gentlest and most rapid cure, provided that the disease be not obviously depending upon a considerable degeneration or destruction of some important internal organ.

§. 280—283.

In the matter of repetition of doses, Hahnemann has clearly advised in aphorism 247 and its subsequent aphorisms. Every repetition of dose must be administered in *gradually ascending* degree of dynamization, and may thus be continued until, *with the general improvement*, the patient experiences *new* troublesome symptoms or he begins to feel the return of one or the other old original complaint. The management of such contingencies have been delineated in aphorisms 248—250.

When in a case of chronic disease, after having continued the medicine in the method advised above the patient begins to feel in a mild degree the return of one or more of the old complaints, it denotes the approaching cure through these gradually ascending doses, modified every time by the process of succussion, and it is an evidence that the patient does not require further medication. He should now cease to take any medicine for a week or ten days or even for a fortnight, so that the physician may be convinced of the cure, while giving the patient only a few powders of sugar of milk and keeping a watch on his condition. If these last few mild symptoms be due to the stimulating action of the medicine on the old original disease, they will disappear within these few days of recess ;

of course, the patient meanwhile must continue observing strictly the good hygienic regulations. On the other hand, if by the close of that period marks of the previous morbid symptoms should make their appearance, the physician must take them to be the fragments of the original disease not completely exterminated, and he must proceed to treat the case with renewed higher potencies of the medicine as directed before, the first small doses being raised in gradually ascending higher potencies. To effect an uneventful cure, the medication should be less and more slowly administered to patients of an irritable mind and nerve than to those less susceptible, the latter tolerating a more rapid advance to higher dosage. The ratio of impressionable patients to the unsusceptible ones, as observed by Hahnemann, is 1000 to 1. Here is Hahnemann's stringent caution for physicians to be zealously observant of a patient's susceptibility, so as to be able to determine the appropriate dosage for every individual patient.

Be it noted that when, during treatment of a disease (particularly chronic disease), after the first few doses of a medicine or after each repeat-dose in modified degree of dynamization, every time by succussing, a distinct increase of the original disease symptoms first observed by the physician is apparent, this must be taken as indubitable sign that the doses were altogether too strong. To avoid such mischiefs, the conscientious homœopathic physician will prescribe the most accurately selected medicine suitable in respect of smallness of the dose as well. The troubles created by the use of an unsuitable (wrongly selected)

medicine which is not wholly homœopathic to the disease, are very soon overcome and may also be antidoted by opposing medicines as instructed in aph. 249.

An exception to the above instructions is taken in the treatment of the three great miasms, namely, psora, syphilis and sycosis, while they still flourish on the skin. Hahnemann says, "These not only tolerate, but indeed require from the very beginning, large doses of their specific remedies of ever higher and higher degrees of dynamization daily (possibly also several times daily). If this course be pursued, there is no danger to be feared, as is the case in the treatment of diseases hidden within, that "the excessive dose, while it extinguishes the disease, initiates and by continued usage possibly produces a chronic medicinal disease." In these externally manifested diseases the physician has very great advantage of daily observing and judging as to what extent the large dose removes the sensation of the disease from the vital principle day to day (see discourse under aphor. 248); disappearance of these three miasms will then convince the physician that the disease has been cured and that there is no longer any further need of these medicines.

INTAKE OF MEDICINES.

§. 284—285.

There are different methods of administering medicines to the patients, namely :

1. By the tongue, mouth and stomach ; this is done by dissolving medicated globeles in water and making the patient drink out of it.

METHODS OF ADMINISTERING MEDICINES

2. By olfaction of medicinal fluid and by inhalation through the mouth. For this purpose one small globule is to be dissolved in a clean vial two-thirds filled with alcohol and succussed with 100 strong strokes, well corked and kept away from heat and light of sun. Before every olfaction and inhalation the vial should be newly succussed as advised above.

3. Through the sound skin of the back, arms and extremities, by means of rubbing inunction of the same medicine given internally, avoiding parts affected with pain, spasms or eruption.

4. To the infants at breast, through the milk of the mother or the wet-nurse. The rightly chosen medicine given to the mother in moderate doses, more easily and unfailingly reach the child through her milk. Mothers suffering from chronic (psoric) disease, if put under a mild antipsoric treatment during pregnancy, have been known to give birth to healthier and stronger children free from congenital chronic diseases.

BATH, DIET AND REGIMEN.

§. 291.

In acute disease, as well as in convalescence of cured chronic patients, Hahnemann recommends baths of pure water for restoring health. The temperature of the bath, its duration and repetition should be clearly directed by the physician, in consideration of the patient's health.

Luke warm bath given *mixed with coffee* proves not only palliative but often sufficiently active in rousing the

sensibility of benumbed nerves, also in certain hysteric spasms and infantile convulsions.

Persons medically cured of chronic diseases and deficient in vital heat, derive immense benefit from cold bath. The temperature of the bath should be gradually reduced. A full plunge at once and followed by repeated immersions restore the tone of exhausted fibre. For this purpose the bath should not be a too short one. The action of baths being only physical, the physician need have no apprehension of any positive reaction.

The proper diet and regimen for patients under homœopathic treatment have been delineated in aphorisms. 259—263.

ELETRICITY, GALVANISM, MINERAL MAGNET.

§. 286—287.

Hahnemann, the most conscientious scientist, did not adopt the use of electricity and galvanism for want of positive proving of these on healthy human body.

The north pole and south pole of the magnet were proved and have been incorporated in his *Materia Medica*.

MESMERISM.

§. 288—290.

Hahnemann recognizes animal magnetism by which the strong vital energy of the healthy mesmeriser can act dynamically upon a sick person and effect cure. He calls it to be a marvellous, priceless gift of God to mankind.

MESMERISM AND MASSAGE

It is not the mechanical passes of a mesmeriser upon a sick person that is effective, but *the strong will of a well-intentioned person* upon a sick one by touch or without touch and even at some distance that acts dynamically.

Irritating nervous disorders, local diseases such as ulcers, amaurosis, paralysis of single organs, are known to have been cured by mesmerisers endowed with this great natural power, the power of his commanding good will to the recipient, and of concentrating his humane intention on his sick subject. But the mesmeriser *must be* in full vigor of vital energy, philanthropic and self-sacrificing, with great kindness of disposition and perfect physical powers, and above all he should have a *very moderate desire for sexual intercourse*. In fact, he should train himself in severe abstinence as an ascetic, and employ all his fine vital spirits in the preparation and conservation of the semen.

Hahnemann also recognizes the abuse of it. Success achieved in a few performances creates a dangerous self-conceit, and the good mesmeriser soon degenerates into a low imposter practising outrageous vagaries.

MASSAGE.

This, to a certain extent, belongs to the category of mesmerism. Care should be taken that the masseur is a person of pure character and healthful body.

“The mermeric influence of this procedure is the chief feature and it-must not be used to excess in patients still hypersensitive”.

Hahnemann recommends that it is good for a chronic invalid who, though cured, still suffers from loss of flesh, weakness of digestion and lack of sleep due to slow convalescence. The muscles of the limbs, breast and back, separately grasped, moderately pressed and kneaded arouse the life principle to reach and restore the tone of muscles, blood vessels and the lymph vessels.

HOMŒOPATHIC SYSTEM OF TREATMENT.

RECAPITULATION

Let us now recapitulate the distinguishing features of the homœopathic system of medicine. These are :

1. The totality of the symptoms of a given case of disease is the only diagnosis.

2. A single medicine, whose pathogenetic symptoms bear the closest similitude with the disease symptoms, must be employed quite by itself, not mixed or in alternation with any other medicinal substance.

3. The medicine must be employed in the smallest possible dose, and there must not be any hurry in repeating the dose before allowing every dose to finish its action.

HAHNEMANN'S CITADEL OF HOMŒOPATHY RESTS UPON FIVE PILLARS. THESE ARE :

1. In every case of disease, the totality of symptoms is the sole indication of the disease.

2. Disease can only be transformed into health by exciting an artificial derangement in the patient with the help of a medicine whose sole curative power consists in altering man's state of health, and this power of medicines can only be ascertained by testing them on healthy human body.

3. Disease cannot be cured by medicines which produce derangements of health dissimilar to the natural disease condition.

4. The antipathic and palliative treatment is absolutely inefficacious in long-standing (chronic) diseases.

5. The only true art of healing is the homœopathic method in which a medicine is employed which is capable of producing symptoms similar to those manifested in the totality of the symptoms of the natural disease, in suitable doses as will dynamically produce a stronger similar morbid irritation in the life principle and thus overpower and cure the disease rapidly, gently and permanently in its whole extent.

DENOMINATIONS OF SYMPTOMS.

ACCESSORY SYMPTOMS : When in a case of disease, a medicine is administered that meets only a portion of the symptoms not characteristic of the disease, the medicine cannot effect a complete and undisturbed cure ; but, with the first dose of the medicine some symptoms of this inappropriate remedy appear which were not previously manifested in the disease. These new symptoms excited by the remedy are called accessory symptoms.

ALTERNATING SYMPTOMS : In the proving of some medicines many symptoms are, partially or under certain conditions, produced which are directly opposite to the other symptoms that appeared in the previous or subsequent provers. These opposite symptoms are not always to be taken for the reaction (secondary action) of the vital force, as they often represent the alternating manifestations of the various overtures of the primary action of such medicines.

CHARACTERISTIC SYMPTOMS : A characteristic symptom is one which individualises a drug. Strictly speaking, it should belong to one drug only. It is also called the *guiding symptom* or the *key-note* symptom.

CLINICAL SYMPTOMS : A symptom that has not been observed in the proving of a remedy, but which, as a distinct symptom of a case of disease, disappears on the employment of that remedy, is said to be its clinical symptom. A clinical symptom has always a subordinate position in *Materia Medica*.

GENERIC SYMPTOMS : Those symptoms which are common to a number of drugs, e. g., headache, weakness, loss of appetite, etc., are called generic symptoms.

GUIDING SYMPTOMS : See characteristic symptoms.

KEY-NOTE SYMPTOMS : See characteristic symptoms.

OBJECTIVE SYMPTOMS : These are morbid signs and phenomena perceived by the physician and those around the patient.

PATHOGENETIC SYMPTOMS : These are the phenomena, subjective and objective, produced by testing drugs on healthy human body, on different individuals and both sexes, in varying doses, and they include the toxic symptoms.

PATHONOMIC SYMPTOMS : These are symptoms characteristic of a disease.

PECULIAR SYMPTOMS : These are what we find to be peculiar to the patient, as distinguished from those that are common to the disease.

RARE SYMPTOMS : Symptoms that seldom appear and only in few experiments in proving, are called *rare symptoms* ; yet according to the eternal law of nature, these rare symptoms are actually impressed upon all the provers, though not with the same degree of clearness in all. These rare symptoms do not fail to effect a rapid and permanent cure of a natural disease when employed with symptom similarity.

SUBJECTIVE SYMPTOMS : These are what the patient feels himself and relates to the physician.

RETROSPECTION.

In the first part of this volume we have studied Hahnemann's precepts of Homœopathy, in regard to its theory and practice. These may be condensed into five fundamental rules.

I. The art of case-taking for comprehending the diseased condition of individual persons.

II. The proving of individual medicinal substances for eliciting its health-deranging qualities which, indeed, are its health restoring power.

III. Selection and employment of such proved remedies according to the law of *similia similibus curantur*.

IV. A single remedy (No alternation or adjuvants).

V. The minimum dose.

Each of these apparently facile fundamentals, however, involves a colossal job for a conscientious physician. The difficulties of correct prescribing in Homœopathy and of steering the patient through to uneventful cure can hardly be realised by indolent and superficial doctors and by those in the profession who crave only to increase the daily number of their patients without being able to devote sufficient time for the individual patient to study his case adequately and prescribe accurately.

With apologies I reprint the article on *The Dangers of Homœopathic Prescribing* by the facile and erudite author Dr. Elizabeth Wright Hubbard, M. D., as Appendix A, and Dr. R. Gibson Miller's article on *Comparative value of Symptoms* as Appendix B, for enlightenment of my readers.

APPENDIX A.

THE DANGERS OF HOMŒOPATHIC PRESCRIBING.

ELIZABETH WRIGHT HUBBARD, M. D.

The greatest danger of any homœopathic physician is that he shall not be a true Hahnemannian homœopath. Mongrelism defeats not only the doctor and the patient but the cause of homœopathy. The specific pitfalls most frequently met are as follows :

1. The physician does not bear in mind his homœopathic philosophy.

2. He fails to take a complete enough case from which to deduce the true remedy. He omits the mentals, the profoundly important generals, or fails to elicit the modalities of the particular symptoms.

3. He lacks patience. Having given the remedy he forgets that he must WAIT and WATCH. He repeats the remedy, in unwise zeal, before the definite slump comes after the improvement which has followed his remedy. More of a good thing does not mean a better thing in homœopathic prescribing.

4. He fails to look for the action of Hering's three laws of cure : That the remedy works *from within outward, from above downward, and in the reverse order of the symptoms.* (This never happens, except under the action of the curative homœopathic remedy.)

5. He omits to make use of the "second best remedy", i. e. Sac. lac. Thereby, he sometimes loses the patient's confidence, especially that of those who are accustomed to taking much medicine.

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6. He fails to make sure that the patient has actually taken the remedy. (Wherever possible always administer the dose yourself). Or, he fails to find out what other remedies the patient may be taking or what dietetic interferences there are. The physician must be cognizant of what substances interfere with the action of our different remedies, as, coffee with *Nux vom.*, or acids with *Acon.*

7. He does not search out the psychological and sociological deterrents to cure, and teach the patient how to evade and overcome these.

8. He sometimes does not recognize soon enough when the remedy is not working, and is then often too busy to revise the case and try again to find the most similar remedy.

9. He permits himself to give minor remedies for trivial or temporary ailments incident to chronic treatment, when *Sac. lac.* or sensible adjuvants such as hydrotherapy would suffice.

10. He changes remedy *because* of the out-cropping of other symptoms due to idiosyncrasy, and symptoms returning under the chronic remedy (which the patient may never recall having had before) and actual new symptoms which occur because the remedy was only partially similar; and finally, symptoms of some discharge—such as coryza, leucorrhoea or perspiration—which represent a curative vent and are due to the action of the remedy.

11. He gives the wrong potency of the right remedy. (If sure of the remedy, it is well to try another potency, or, first,—three doses of the original potency at two or four hour intervals.)

N. B.—Always instruct patients to stop taking the remedy as soon as appreciable amelioration sets in, and to switch to the "Second remedy", i. e., *Sac. lac.*

12. He gives too high a potency in an incurable case, or one with marked pathological changes, and so induces an aggravation with which the vital force cannot cope. (If he has done this and the patient is going down hill, he must antidote).

13. He gives a profound constitutional remedy to a case which is too sick to stand it and would have merely a related palliative remedy. For instance, in incipient tuberculosis it is dangerous to give *Sulph.*, *Sil.* or *Phos.* at least in high potency. A single dose of the thirtieth (30th.) is as high as he should venture. If the case is far gone in tuberculosis, these remedies must not be given, but rather a palliative for the most distressing symptoms, such as *Rumex*, *Sang.*, *Puls.*, or *Seneg.*

14. He must remember that certain remedies are dangerous to mishandle. For instance, *Kali carb.*, especially in cases of advanced arthritis ; or *Sil.*, where an abscess, if suppuration were brought on, would break in a dangerous location, as in the lungs ; or some of the nosodes, like *Psor.* which, in deeply psoric cases, say of asthma, may induce terrific aggravation ; or *Lachesis*, whose improper repetition may engraft a permanent unfavorable mental state on the patient. *Arsenicum* is another dangerous remedy. When apparently indicated in the last stages of an acute disease, say pneumonia, it may hasten demise although it will make the death tranquil, but it will not rally the patient as one might expect. In the terminal stages of chronic

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disease, where cure is impossible, it will sometimes bring the patient back long enough to sign a will or see the family, and will ultimately induce euthanasia.

15. He will often be surprised to find that certain symptoms or groups of symptoms are relieved by his remedy and yet the patient feels worse or develops more deep-seated trouble. In this case the prescribing has been superficial and suppressive. Suppression is perhaps the greatest danger of ordinary medicine from the point of view of homœopathic philosophy, and the deep homœopath must be constantly on his guard not to produce suppression with his remedies. If he has given an acute remedy for an apparently superficial trouble which is relieved but the patient feels badly, he should do the chronic case at once, and the deep acting remedy will right matters.

16. He may give remedies in the wrong order or inimical remedies in succession, thereby aggravating the patient and mixing up the case.

Throughout his practice the physician must tell the idea of homœopathy with brief but helpful explanations to the patients in order to insure their co-operation. He must himself have the character to sit tight when he knows what he is doing and not spoil his cases by unnecessary and harmful prescribing. Above all, he must consider each patient as an opportunity for service not only to the individual and the community but to Homœopathy and to the race.

The Homœopathic Recorder, Vol. XLVI, No. 4.

APPENDIX B.

COMPARATIVE VALUE OF SYMPTOMS IN THE SELECTION OF THE REMEDY. *

ROBERT GIBSON MILLER, M. D.

It is a common experience to find cases reported in our journals, presenting large and complex masses of symptoms, to which, as a whole, no remedy in the materia medica corresponds, no reason being given why the remedy that proved curative was selected in preference to many other competing ones. We can learn little or nothing from these cases. Even when we study some of the model cases reported by masters in homœopathic prescribing, we are often utterly at a loss to understand the rules that led them to give a preference to certain symptoms and to relegate others to a very secondary place.

Hahnemann advises us to base the selection of the remedy upon the totality of the symptoms presented by the patient, as they are the outwardly reflected image of the internal and invisible disease, and the only means by which we can truly apprehend this internal distunement of the bodily forces.

I do not at this point propose to go into the observations and arguments that led Hahnemann to advise that the choice of the remedy should depend almost entirely upon the symptoms, to the practical exclusion of pathology. If these symptoms are to be our guides, what do we include in this term ?

**The Homœopathician*, April, 1912.

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Every deviation from perfect health experienced by the patient, or observed by others, including all disturbances of functions and sensations, all alterations in the external appearance of the patient and also all probable causative conditions.

As a rule, in acute disease there is little difficulty in determining the totality of the symptoms, for the deviation from health is usually sharp and well defined. As an acute, supervening disease never forms a complex with a chronic one—the latter being suppressed until the former has run its course—care must be taken, when ascertaining the symptoms of the acute disease, to exclude from consideration the symptoms of the now latent chronic disease. According to Kent, at times some symptoms of the chronic disease may persist, and be active during the acute disease. Such symptoms are *peculiar*, because they have not disappeared, and are not often guiding in the choice of the remedy for the acute disease.

But when we come to deal with chronic diseases, the problem is more complicated, for we have to take into account not only the present symptoms, which often show only a very partial picture of the disease, but must also include many former symptoms that are not now active; for even in those patients that have suffered for very long periods, and from many apparently diverse troubles, *there always is method and order running through all their illnesses* if we can find the clue.

While, theoretically, we should consider all the symptoms experienced by the patient since his birth, excluding those due to acute disease, yet the task is a very

difficult one both for patient and physician, and we can only make very cautious use of these bygone symptoms. Even if we could trust to the accuracy of the memory of our patient, or his friends, these old symptoms can be used only with the greatest care, for so many of them may have arisen from faulty environment, the abuse of drugs, or the acquisition of some other miasm, that they would not truly indicate the course and progress of the disease. This is also very often the case when no such question of old, bygone symptoms is involved ; and those who are guided in the selection of their remedies mainly by the symptoms are in special danger of overlooking such causes, and have to be perpetually on guard lest they fall into the error of ascribing to disease what is really due to other causes.

Dunham, in *The Science of Therapeutics*, gives many instances where such mistakes have been made, and only a wide knowledge of drugs, of the habits of the people, and the special conditions under which any occupations are carried on, will enable us to avoid these errors.

Such, for example, was the case of a young lady who, for a very considerable time presented a perfect picture of the classical symptoms of *Sulphur*, and upon whom that remedy, in all potencies (to say nothing of other remedies), failed to produce the slightest effect. It was finally discovered, that she was in the habit of using sulphur to cleanse her teeth and upon this being stopped the symptoms at once ceased.

A maker of crucibles for casting steel ignots, who had suffered for seven years with all the symptoms of *Graphites*

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gastralgia ; for him that remedy did no good, until it dawned upon me that I had somewhere read that plumbago was now being used for making these moulds.

When we have excluded all symptoms due to such causes, there is the vast number remaining which can be ascribed only to disease proper, and it is with these in particular I wish to deal tonight.

SELECTION IN CHRONIC CASES.

Theoretically, we endeavor to find a remedy whose symptoms correspond exactly—as regards both character and intensity—to those experienced by the patient. This can rarely, if ever, be done ; and in chronic cases, at any rate, we have, as a rule, to make a selection from amongst the mass of symptoms, and to base the selection of the remedy mainly upon these. If it were necessary always to select a remedy that correspond perfectly to every one of the symptoms, our already vast materia medica would be utterly inadequate, and we should require at least 10,000 more fully proven drugs. Who would care to undertake the task of searching for a *simillimum* in such a labyrinth ? It is quite bad enough as matters are at present, but we must think of our remedies as complex tools, capable of doing many very different pieces of work, which to the uninitiated would seem to require many diversely shaped ones.

Who have made finer cures than the old masters in homœopathy, with their very limited number of fully proved remedies ? But they *knew each one through and through*, in a way that few of us do nowadays, and in their hands a

comparatively few medicines were, in the majority of cases, sufficient for all their work.

It was because they were able to comprehend not only the spirit of each remedy, but also those symptoms that characterized the patient. Following in their footsteps, we also must endeavor to learn to grade the symptoms according to their respective values, and not to act as mere symptom-coverer, an opprobrious name that has at times been only too well deserved.

In every case of disease there are always two classes of symptoms :

First, those that pertain to the disease—that is, the common or pathonomonic ones ; and

Second, those that pertain to the patient ;

And in all advanced cases, a third class that pertains to the ultimates or results of disease.

To attempt to select the remedy in accordance with the first and last of these alone, is simply to court failure in the majority of cases ; for so many remedies will be found to correspond more or less closely to the first, at any rate, that unless we have some other means of individualizing, we shall be quite unable—except by good luck—to select the correct remedy. Still less can we hope to find a sure basis if we depend upon the pathological condition ; for very few drugs have had their provings pushed forward enough to elicit such effects, and consequently we should have to depend mainly upon such cases of accidental poisonings as happened to be available.

Dunham, writing upon this subject, points out that the

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drugs varying according to the size of the dose may produce three sets of symptoms, *viz.* :

(1) The chemical.

(2) The mechanical, or revolutionary, consisting chiefly in violent efforts on the part of the organism to eject from its cavities the offending substance ; and

(3) The dynamic, contingent on the vitality, or resulting from the relation of the peculiar properties of the drug to the susceptibility of the living healthy organism.

He still further subdivides the dynamic ones into the *generic*—or those common to all members of a certain class of drugs—and the *specific*.

As an example of the former, *Arsenic*, in certain doses produces vomiting, diarrhoea, cold perspiration, cramps in the limbs ; but *Cuprum*, *Veratrum*, *Antimonium tartaricum*, which belong to the same group, produce identical symptoms.

The specific ones are those that are peculiar to one remedy and serve to distinguish it from its relatives.

In the vast majority of poisonings, little else is produced than the first two classes—*viz.*, the chemical and mechanical ; and the symptoms obtained therefrom are of little value in the large majority of cases we are called upon to treat. Our main reliance must ever be placed upon the symptoms that signify the patient ; and Hahnemann directs that we should be particularly and almost exclusively attentive to those symptoms that are peculiar to, or characteristic of, the patient, and not to those that are common to the disease. Kent, after many years' experience,

states that he regards this advice of Hahnemann's to be the strongest thing that the master ever wrote. *Organon* S. 153.

In acute disease, there is not much difficulty, as a rule, in recognizing the symptoms that are peculiar to the patient ; for the symptoms usually appear in an ordinary manner, and the common or pathomonomic ones are well known. When we deal with chronic diseases, our difficulties are largely increased, for they are often so complex in nature that it is not easy to separate the symptoms that are peculiar to the patient from those that are common to the disease. *Organon*, S.S., 82, 152.

In many old-standing chronic cases, especially those that have been long under allopathic treatment, these peculiar and characteristic symptoms have so completely disappeared, or have been so utterly forgotten, that our difficulties are thereby increased. Nay, it is even the case at times that the characteristic symptoms may never have existed except in the patient's ancestors, and under these circumstances cure is practically impossible.

It is as if, during the exploration of some old city, a coin were discovered, by which, if we could determine the year of the king during whose reign it was issued, we should be in a position to fix an important date. If the coin was well preserved, any skilled numismatist would promptly furnish us with all the information we desired ; but, if it were much worn and eroded, while we might, from the shape or composition of the metal, be able to determine the dynasty under which it had been issued, it would be

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utterly out of his power to state the individual king, to say nothing of the year of his reign.

PECULIAR SYMPTOMS

Let us take a few examples of the symptoms that are peculiar to the patient, as distinguished from those that are common to the disease.

The common or pathonomonic symptoms of dysentery are bloody mucous stools, pain, and tenesmus. From these alone we can determine the group of remedies that correspond in general to this disease, and in J. B. Bell's classical monograph on this subject over fifty remedies are mentioned; yet, from these alone it would be impossible to discover the individual remedy for the case under treatment. If, however the patient has

Much thirst, and

Every time he drinks he shivers, and

Each drink is followed by a loose stool

These symptoms, being unusual in the disease, and consequently peculiar to the patient, would guide to *Capsicum* as the remedy.

Dyspnœa, œdema, palpitation of the heart and albuminuria are the common symptoms of many kidney troubles, and from them alone we cannot determine the curative remedy; but if we find in addition that there is

A strong craving for fat,

Urine intensely strong, and

A sensation as if the urine were cold when passed,

Then these would be peculiar to the patient, and point to *Nitric acid* as the remedy.

Let us turn to characteristic modalities. In a case of spasmodic asthma, an aggravation from lying down is so common as to be valueless in the individualizing of the remedy ; but, if we find there is much relief from lying down, as in *Psorinum*, or from assuming the knee-elbow position, as in *Medorrhinum*, then these, being peculiar and characteristic, will be invaluable.

In hysteria we have an illustration of the danger of prescribing for the symptoms that are common to the disease, and hence not peculiar to the patient. It seems the most natural thing to gather up all the incongruous and peculiar symptoms that characterize this disease, and to prescribe for them. But when we realize that this incongruity is the very essence of the disease—in other words, is pathonomic of it—we then perceive that we have been prescribing for the symptoms that represent the disease, and not for those that characterize the patient. In such cases, the true guides to cure, if discoverable, are to be found in the *changes of desire*, the *aversions*, the *loves and the hates* ; and these are particularly difficult to find, for the hysterical patient conceals her real hates and loves and relates what is not true.

In the foregoing, stress has been laid on the supreme importance of paying the greatest attention to the symptoms that are peculiar to the patient, but it would be foolish to ignore the symptoms that signify the disease. They must, indeed, be taken into consideration ; but as subsequent to, and of much less value than those that are predicated of the patient.

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In a very large number of cases, no one remedy corresponds to all the peculiar symptoms, but three or four seem to have equal numbers of them, and of approximately the same value. In such a state of affairs, the remedy that has also the common symptoms best marked must prevail. It must ever be kept in mind that *there must be a general correspondence between all the symptoms of the patient and those of the remedy*, and that, however helpful the peculiar symptoms may be in calling attention to certain remedies, yet they are not the sole guides; for after all, it is the totality of the symptoms that determines the choice.

It is true that at times a brilliant cure has been made by a remedy that correspond only to those symptoms that were peculiar to the patient, and *was not known* to possess any strong resemblance to the common symptoms of the disease; but even in such a case, it is almost absolutely certain that further provings will reveal that the remedy has the common symptoms also.

RANK OF SYMPTOMS

When using these peculiar and characteristic symptoms as the main guides in the selection of the remedy, it is important to bear in mind that they must be *equally well marked in patient and in remedy*. In other words, no difference how peculiar and outstanding a symptom may be, either in the patient or in the remedy, unless it be of equal grade in both we must pay little heed to it.

For example, if a patient experiences occasional and slight heat in the soles of the feet at night in bed, this symptom would not be of much importance in selecting

Sulphur as the remedy, because in that drug this symptom appears in such a vigorous and outstanding way that the provers declare that their feet burn at night as if they had been on fire.

Take a case of rheumatism, markedly aggravated in dry weather and better in damp. In such a case, the selection of *Phosphorus* as the remedy could not be based upon this modality, for while *Phosphorus* has it, it is only in the lowest degree.

Even in a case with, let us say, ten peculiar and characteristic symptoms, of which one remedy has eight, but of a very low rank; while another has only five, but of high rank and corresponding to the rank of the symptoms as experienced by the patient, in such a case it is very improbable that the first medicine will prove to be the curative. The second is much more likely to be so.

It is this question of rank of symptoms that is the chief objection to the numerical method of selecting the remedy. It seems to have fascinated some minds, for while it is laborious in the highest degree, it seems to promise certain and exact results; but medicine—even homœopathic—is not yet an exact science, and it is extremely improbable it ever will be, even when we have perfected our armamentarium. Consequently, all such mechanical methods are to end in failure, for quality will ever be of infinitely more importance than mere quantity.

In opposition to this numerical method, some physicians have gone to the other extreme, and have been content to be guided in the selection of the remedy by one or two peculiar and outstanding symptoms, practically ignoring all

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the others, because they have overlooked the fact that, *unless there be a general correspondence between the symptoms of the patient and those of the remedy*, it is not reasonable to expect a cure.

This so-called 'key-note' system of prescribing is very attractive, as it seems so easy, and save all the laborious comparison of competing drugs that is involved in the numerical method and also because by means of it many brilliant cures have been made; but it is, from its very nature, a wrong method, and in a large majority of cases is doomed to failure, because it ranks one or two symptoms very high and practically ignores the others.

Having discussed the difference in value, so far as the selection of the remedy is concerned, between the symptoms that signify the patient and those that signify the disease, we would turn to the other great division of symptoms—*viz.* : the generals and the particulars.

GENERALS

The general symptoms are those that affect the patient as a whole, and, because of this very fact, they are naturally of higher value than the particulars, which affect only a given organ.

What the patient predicates of himself is usually general, as when he says, "I am thirsty", "I am sleepy"—thereby indicating that his whole being is so affected, and not merely one or two particular organs. So much higher may a general symptom rank that, if it be a strong and well-marked one, *it can overrule any number of even strong particulars.*

Let us take a case of gastric catarrh, with

Semi-lateral headache.

Roaring in the ears.

Greasy taste.

Aversion to fat and butter which aggravate greatly.

Fullness and pressure of the stomach after eating.

Flatulence.

Chilliness.

Vomiting of the food.

So far *Pulsatilla* and *Cyclamen* compete equally. If we have in addition

Diarrhoea only at night.

Nausea from hot but not from cold drinks.

Palpitation when lying on the left side.

Then the balance will turn towards *Puls.*

If we find that

The patient has the greatest aversion to the cold open air

It is always aggravated by the least cold

Then this one strong, general symptom would overrule the marked particulars that *Puls.* alone had, and declare plainly that *Puls.* could not be the remedy, notwithstanding the fact that it alone had the three strong particulars.

On the other hand, a number of *strong particulars* must not be neglected on account of one or even more *weak generals*.

Let us take another case of gastric catarrh, with

Severe pain over the right eye

Bitter eructations

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Pain in the stomach

Worse from cold, and better from hot drinks

One cold and one hot foot.

So far *Lycopodium* and *Chelidonium* correspond about equally to the case. If there is in addition—

Constant pain under the inferior angle of the right scapula.

A yellow-coated tongue with indented margins.

Clay-coloured stools.

No one would hesitate to give the preference to *Chel.* If, on further examining the case we find that

The patient always feels worse all over—though not in a very marked degree—after eating.

That he feels better moving about than when sitting,

These generals would be against *Chel.* and in favour of *Lyc.* But they are *only weak and not strongly marked generals*, and consequently should not be allowed to overrule the *strong particulars* that indicate *Chel.*

1. Amongst general symptoms is to be included the mental state, which, reflecting the condition of the inmost part of man, is bound to be of the utmost importance, and—as Hahnemann so strongly insists—must always, if well marked, take the highest rank in the selection of remedy. These symptoms are naturally the most difficult to elicit, for people, as a rule, shrink from revealing their inmost thoughts and motives, their hatreds and yearnings, their evil tendencies, and their delusions, etc., and it requires the greatest tact and a full knowledge of human nature

to win the confidence of our patient, and so understand his deepest thoughts.

Of course, we are all aware of the value of the more common mental states, and these influence us, consciously or unconsciously, in the choice of our remedies. We all recognize, for example, the fastidiousness of *Arsenic*, "the gentleman with the gold-headed cane"; the irritability of *Brynia*, *Chamomilla*, and *Nux vomica*; the gentle, yielding, lachrymose *Puls.*; the ever varying moods of *Ignatia*; the hauteur of *Platina*; the lack of self confidence of *Silicea*; but there are many less apparent conditions which have to be deeply probed for, though when found are invaluable. Such are the presentiment of death of *Apis*; the lack of natural affection of *Sepia* and *Phosphorus*; the strange impulses to kill those dearest to them of *Mercurius* and *Nux*; the suicidal promptings of *China*—not open and obvious like those of *Natrum sulph.*, but hidden, shame-faced, and mixed with fear. These latter, in the early stages, few patients care to allude to, yet their value to us is inexpressible. Even amongst the mental symptoms there are various ranks and consequently they vary greatly in their value.

All symptoms of the will and affections, including desires and aversions, are the most important, as they relate to the inmost in man. Of less value are those relating to the intellect, while those of memory are to be ranked lowest of this group.

2. Amongst our other generals are the effects of sleep and dreams—such as the aggravation after sleep of *Lachesis*, and *Sulphur*; the aggravation from loss of sleep

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of *Cocculus* ; and the great relief from sleep of *Phos.* and *Sepia*.

Again, how often has the study of the dreams revealed the hidden key to the remedy ! For, in sleep man is off his guard, and his subconscious self can assert itself, and under such circumstances the veil is often lifted a little, so that we are able to apprehend in some degree the deep and hidden mysteries of that disordered life we call disease. Of course, such dreams must be regular and persistent to make them of value, and great care must be taken to eliminate the effect of all external influence.

I recall a case of aortic aneurism, giving rise to much pain and many other pressure symptoms. The patient had not the slightest idea what his disease was, yet he dreamed night after night, of pools and seas of blood, and so distressing was this that sleep was one wild nightmare. The other symptoms were valueless so far as the selection of the remedy was concerned ; but, taking the dreams as my guide I gave *Solanum tuberosum aegrotans*, which completely removed the dreams, and so relieved the pains that he went down to his grave in peace.

3. But one grand general, viz., the effect of different temperatures upon the patient as a whole—is often of the greatest service in calling our attention to special groups of remedies and excluding other groups, so that the labour of selection is thereby greatly lessened. It is by no means always an easy general to use—in fact, I am more careful in questioning patients with regard to this than with regard to anything else.

How often, in response to our question as to how they

are affected by heat and cold, they will reply : "Oh ! I can't stand heat !" But, on inquiry, you discover they hate cold, but cannot stand a close, stuffy place ; or perhaps they may say so because they are worse in summer—which is not necessarily the same as aggravation from heat, for summer, in this climate at any rate, means more than heat.

Another frequent source of error is the tendency to mistake any undue readiness to perspire as an indication that heat aggravates. On the other hand, many confuse an undue tendency to catch cold with aggravation from cold, but when we have eliminated these errors and find the patient markedly aggravated as a whole by heat or cold, we are greatly aided in our choice of remedy.

The question of temperature is often very valuable when the body as a whole is markedly affected by one temperature, and some special organ by the opposite ; for example, we find a general shrinking from cold under *Ammonium carb.* and *Carbo vegetabilis*, yet their respiration is relieved by cold air. *Cycl.* has the same aggravation, except for its cough and some headache ; *China*, except for its stomach symptoms ; *Phosphorus*. except for its headache and stomach symptoms ; as a patient suffering from headache and general rheumatism of the body remarked, if he could only have his body in a bath and his head in an ice-tub, he would be supremely happy.

Conversely, the general aggravation of heat of *Lyc.*, except for its stomach and some rheumatic symptoms ; of *Secale*, except for some headaches and neuralgias, illustrates the value of this general. The exquisite sensitiveness of the mercurial condition to both extremes of temperature, finding

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comfort only at a medium temperature, is doubtless known to all of us, and must often have served us in good stead when the other mercurial symptoms were absent.

4. There is little need to call attention to the general effect of the various weathers, but many a valuable hint is obtainable from them, not only in a positive but also in a negative way. In many conditions such as rheumatism, where we expect as a rule to have an aggravation from weather changes, the absence of such an aggravation becomes peculiar and characteristic, and enables us to throw out of consideration whole groups of remedies.

For example, where change of weather does not influence a rheumatism, we can safely exclude *Dulcamara*, *Nux moschata*, *Phos.*, *Ranunculus bulbosus*, *Rhododendron*, *Rhus.*, *Sil.*, *Tuberc.*; if wet weather does not affect, we can eliminate *Calc.*, *Merc.*, *Natrum carb.*, *Natrum sulph.*, and *Ruta*. Such negative conditions are not sufficiently used.

While the mere absence of particular symptoms that strongly characterize a remedy cannot be relied on as excluding that medicine, yet when strong generals that characterize the remedy are absent we can, with a fair degree of confidence, exclude that remedy, simply because each drug is a unity, and such characteristic generals are their very web and woof.

5. Amongst the generals must be included the influence of the various positions, such as the strong aggravation of most symptoms by standing, of *Sulphur* and *Valerian*; the aggravation of lying on the right side, of *Merc.*; the peculiar aggravation of *Phos.*, when lying on the left, yet aggravation of the head symptoms when lying on the right. To be of

any value as a general symptom, the patient as a whole must be markedly influenced by these, and if only one organ is so affected they take only low rank, being particulars.

6. The tendency of disease to affect particular parts of the body is often well marked, and may be a general of considerable value. Such, for example, is the semi-lateral nature of many illnesses that require *Alumina*, *Kali carb.*, *Phos. acid.* ; or, if the right side is mainly affected, *Apis*, *Bell.* and *Lyc.* ; or, if left sided, *Argentum nit.* *Lach.* and *Phos.* Again, how often has the oblique appearance of symptoms led to the choice of *Agaricus* or *Asclepias tuberosa* as the remedy, and even more frequently the appearance of symptoms on alternate sides has led to a cure by *Lac caninum*.

7. Let us consider how profoundly time influences our diseases, and how common it is to find the symptoms aggravated regularly at particular hours. Here, indeed, is a valuable and great general whose proper use will enable us many a time to decide which is the true remedy. It may be the morning aggravation of *Chel.*, *Natrum mur.* or *Nux*, or the evening one of *Bry.*, *Bell.* or *Puls.* perhaps coupled in the latter remedy with the exceptional aggravation of the stomach symptoms in the morning.

Or, if we find the cases characterised by periodic return of the symptoms whether it be daily, as in *Aranea* ; or on alternate days, as in *Chininum sulph* or *Lyc.* ; or every two weeks, as in *Ars.* or *Lach.*—we here, again, have a general of the greatest value. It is worthy of note that the less the disease, that happens to be under consideration, is itself normally characterized by periodicity, the more does

this periodic return of symptoms indicate special remedies which have this characteristic in a marked degree. This is well exemplified in the case of ague, which is normally characterized by the periodic return of paroxysms at fixed intervals, due as we are all now aware to the segmentation of each variety of the parasite at definite times. The mere fact that this periodicity is common to the disease, and hence not peculiar to the individual patient, has led the most successful prescribers for this disease to base their prescription on other factors that are present, rather than on the periodicity, though of course, by no means excluding it from consideration.

8. The various cravings for, and aversions to, various substances are as a rule general symptoms, for they depend upon some deep need in the body as a whole, and, if outstanding and definite, must always take high rank. It is easy to understand many of these, such as the aversion to fat of *Puls.*, for it also disagrees, or perhaps, also, the craving for salt of *Natrum mur.*; but the reason for many others is utterly beyond our ken at present.

For example, an intense craving for pork in a case of rheumatoid arthritis, which presented no symptoms beyond those common to this disease, put me upon the track of *Crotalus* and led to the cure of the case, though the patient had been bedridden for over six months.

9. One more of these general symptoms I would allude to—viz. : the influence of eating. Of course, so far as it affects the stomach directly, it is only a particular, and we do not, as a rule, find it to be of much help in the selection of the remedy; but when the man as a whole is thereby

influenced, and states that he feels better, or worse, all over by eating, then it becomes a general of high rank. Especially is this the case when symptoms in parts far distant from the stomach are so influenced, such as aggravation of pains in the limbs of *Indigo*, or the amelioration of *Natrum carb.* or *Kali bichromicum*.

The effect of special foods is at times general, affecting the man as a whole ; but as a rule, they affect only the digestive organs and in that case are merely particulars. It is through forgetting this distinction that all of us at times rank their influence too high, and are disappointed when remedies, selected more or less in accordance with them, fail to cure the case.

10. The special senses are often so closely related to the whole man that many of their symptoms are general. For example, when the patient states that the smell of food sickens him, this is a general, but if he only experiences a subjective, offensive smell in the nose, this would merely relate to the one organ and consequently would be only a particular, and of comparatively low rank.

11. General symptoms are not always recognized at once to be so, but examining a series of particular organs we find that a symptom or modality runs so strongly through them all that it may be predicated of the patient himself. Here we have general made up of a series of particulars.

For example, if we take a case in which, wherever the pain happens to be felt, whether in chest, or head, or limbs, there is relief from being on the painful side, this becomes so common as to characterize the patient as a whole ; or, if we find that in all organs and tissues affected the pains

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are boring from within outwards, as we find under *Asafetida*, then this symptom can be raised from being an ordinary particular to a general of low rank ; or, if the pains, wherever they may chance to be located, are always associated with numbness as in cases requiring *Plat*, or *Cham.*, then this may also be regarded as general, though, of course, of a comparatively low rank.

But there is a real danger in over-doing this dependence on generals in the selection of the remedy, and a glaring example of this is seen in Bœnninghausen's *Pocket Book*. In this he overdid the generals, for he generalized many rubrics that were only particulars.

For example, 'writing' is a rubric of particulars and in no instance is the patient himself worse from writing ; but in some cases it is the eyes, from looking ; in others the hand, from exertion ; or in others, the back from sitting bent. If we are searching for the remedy for a headache aggravated by writing, a rubric composed after this manner would be useless. But the rubric "aggravation from motion" is on quite a different footing ; for, if we have a case requiring, say, *Bryonia*, we find so many particulars aggravated by motion that it appears that the very patient himself is worse from motion, and consequently in this case motion is a general.

12. There is one other general—the greatest of them all—which I must not omit, for it is created by the blending of all the generals and particulars into one harmonious whole. For lack of a better work, we speak of, let us say, the "*Sepia*" constitution, meaning thereby that special diseased condition of the mind and body for which

that remedy has so often proved itself curative, that we come to look upon it almost as an entity. At times it is plainly discernable by all, and capable of being described in words, such as the leucophlegmatic constitution of *Calc.* ; the tall, thin narrow-chested one of *Phosphorus* ; or "the lean stooping, ragged philosopher", as Hering called the *Sulphur* patient. Far oftener it is something much more subtle, such as that of *Arg. nit.*, with its fears and anxieties and hidden, irrational motives for all it does.

To very few of us it is given to penetrate into these secrets, and to understand that almost indefinite something which often lies behind the mere symptoms, modifying and characterizing them all, and so becoming the governing element in the whole case. The masters in our art are those who have had power to understand this great general, and we stand amazed at their skill in penetrating right into the heart of the most complex cases and evolving order and consequent cure out of seeming chaos.

PARTICULARS.

While the general symptoms are of the highest rank, as a rule, simply because they relate to the man as a whole, we must on no account undervalue the particulars. In fact, many cases seem to be composed only of particulars, and have few or no generals of any importance. In such a case, where no one remedy corresponds to the case as a whole, we must base our selection upon those particulars that are most characteristic and peculiar ; for it must be borne in mind that both generals and particulars may be

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either characteristic and peculiar with, say, a vague aggravation from cold and damp, an indefinite depression of spirits, or an irritability without any qualifying conditions, or not of much intensity—then the characteristic particulars must lead.

1. There is one matter in connection with prescribing for the particulars that may give rise to a difficulty in selection of the remedy. In alternating complaints, such as of eye and stomach, we may find that, say, *Euphrasia* is more sharply related to the eye-symptoms than the deep acting remedy that best fits the whole case, and that *Puls.* corresponds to the stomach ones better than the deep-acting one does. We must ever remember that there is one deep-acting remedy that is more similar to the whole patient than these special remedies, because it corresponds better to the general symptoms.

I have previously quoted Hahnemann and Kent with regard to the importance of paying heed mainly to the symptoms that are peculiar, but this is only one aspect of the truth; for the highest rank of all belongs to those symptoms that not only are peculiar, but are also general.

A very good example of this is a case with a very high fever, let us say, of 105 degrees, yet without the least thirst. Here we have without doubt a very peculiar symptom, for the absence of thirst with such a temperature is a most unusual thing, and this thirstlessness is a general, for it is the whole man that is thirstless. Of course, if we had only temperature of, say 101 degrees, this

symptom would not be specially characteristic, and consequently of comparatively low rank.

2. Before we pass from the consideration of particulars, I would call attention to the fact that common particulars may in certain circumstances assume a comparatively high rank. Two common symptoms which, if they appeared alone, would be of little importance; when associated, at once become of considerable value—the coryza with polyuria of *Calc.* is a good example of this. In this connection it is worth noting that a remedy can cure groups of symptoms, even where they did not appear as concomitants in the proving; and this is the case even when the components of the group were observed by quite separate provers. Kent, in his great repertory, has left out the majority of concomitants and has retained only those few that abundant clinical experience has demonstrated to be frequently associated.

Other examples of this raising of the rank of common symptom are :—

Where the common symptom is associated with a peculiar modality, such as the chilliness of *Puls.*, worse near the fire.

Or a special localization may emphasize a quite common symptom, such as the aching pain at the inferior angle of the right scapula of *Chel.*

Or finally, the mere intensity of a common symptom such as the overwhelming sleepiness of *Nux m.*, gives it a value that otherwise it would not possess.

OTHER IMPORTANT CLASSES.

1. Ranking close behind, or even at times taking precedence of the peculiar and general symptoms, must be placed the last appearing symptoms of a case. These symptoms, to be of any real importance, must, of course, be outstanding and definite, and if so they are always of the first importance in the choice of the remedy. So much is this the case that, where no remedy can be discovered that corresponds to the case as a whole, it is at times necessary to be guided almost exclusively by them. When so prescribing, it is not to be expected that the remedy will influence the case very deeply, or cause any markedly curative results; but it will modify the symptoms and open up the way for other remedies.

The foregoing refers to the symptoms that have been the last to appear, before homœopathic treatment was instituted; but even when the appropriate homœopathic remedy has been given and modified the case, and new symptoms have appeared, the same law holds good. Hering, however, cautions us to note that these new symptoms will generally be found amongst the symptoms of the last-given remedy, but only of low rank, and not guiding in the choice of the second remedy.

These new, or last appearing, symptoms may be old ones which had disappeared many years ago, and have now returned through the action of the first remedy. Accordingly, before using them as guides in the selection of the second remedy, we must have patience and make sure that their return is permanent, and not merely a temporary reappearance while on the way to final extinction.

2. Another very important rule of Hering's, the observance of which will often prevent many mistakes and save much study, is: that the second remedy must bear a complementary relation to the first; and hence the last remedy that has *acted*, either homœopathic, or allopathic, forms one of the most important guides in the selection of the second. The knowledge of this rule is a great time and trouble-saver, for in the majority of cases, a reference to the tables of related medicines would enable us to select with ease the remedy that is to follow.

3. Toward the beginning of this lecture, I made passing mention of the value of old symptoms which had long ago disappeared, pointing out that, for many reasons, they are often of very uncertain value. While it is seldom advisable to give them any very high rank in the selection of the remedy, yet they are of the utmost value in confirming the choice of remedy, or in differentiating between competing remedies selected in accordance with the now active symptoms.

As an example of this, Kent mentions the case of a man who had long suffered from neuritis of the limbs, whose present symptoms did not point decisively to any one of five or six competing remedies. It was discovered that in infancy he had been affected by *eczema capitis*, very similar to that caused by *Mezerium*, one of the competing remedies, and on examination of the pains in the limbs produced by that remedy it was found that they closely resembled those now experienced by the patient. This remedy proved curative and reproduced the original eruption.

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Dunham's well-known cure of deafness by the same remedy is another example of this use of old symptoms.

4. In the cases just mentioned, the diseases cured were not characterized by any marked pathological changes, but in cases where these changes have become quite definite it is useless, in the majority of cases, to prescribe upon the symptoms that now present themselves. We must here also seek to discover the primitive symptoms that the patient experienced long before any definite pathological change took place ; and though the task as I stated, is difficult, yet we can often obtain enough data upon which to base our prescription.

5. I need hardly say that no one, even when he has been able to obtain the fullest and most accurate description of these old symptoms, expects to be able to cure diseases that have advanced so far as to lead to practical destruction of organs and tissues. It is only the beginnings of such processes that are amenable to medicines, so far positive cure is concerned.

Even in comparatively recent and uncomplicated cases of chronic disease, when the symptoms have been suppressed and the whole character of the disease changed, the symptoms that now present themselves must, in the great majority of cases, be our guides, though at times it may be necessary to select from amongst the competing remedies one that is known to have an antidotal relation to the suppressing drug. That is not, however, invariably the case, and it is at times necessary to give the original symptoms the higher rank and to be guided by them, to the exclusion of those now present.

As an example of this, an otherwise healthy young man, who had suffered for over a year from sciatica, presented himself with stitching cutting pains in the calf, worse at night, better from heat, worse in motion, relieved by flexing the limb. *Coloc.* and other drugs failed to give relief. It was found that the disease, which was originally located in the upper part of the nerve, had been vigorously treated by external application, with the result that not only was the situation of the pain altered but its character and modalities had been completely changed. The original pain was of a tearing nature, and was greatly aggravated by sitting—not quite so severely felt while walking—and there was almost complete relief when lying down. *Ammon mur.*, selected in accordance with these old symptoms, promptly cured.

7. Tonight I can make only passing reference to the so-called primary and secondary effects of drugs to which some good prescribers have assigned different value in the selection of the remedy. So far as my experience goes, it does not seem to matter in what order the symptoms may appear in a proving—if the remedy can produce them, it will also cure them, irrespective of their position in the disease, and consequently, so far as rank is concerned we cannot differentiate between them.

PATHOLOGY

I stated at the beginning of this lecture that Hahnemann insisted that we must be guided in the choice of the remedy almost exclusively by the symptoms to the practical exclusion of pathology ; but I think there is a good deal

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of confusion with regard to this matter. So far as I can see, Hahnemann did not object to the use of the pathological changes as guides for theoretical reasons, but only for practical ones.

It is true that to a limited extent it is practical to use pathology as our guide, and we all do so use it. Whenever we have to prescribe for eruptions or ulcers—which are, after all, pathological changes—we do not hesitate to be governed by anything that is peculiar or characteristic about them, such as their colour, shape and position, because by means of these peculiarities we can differentiate. But, when we come to deal with gross pathological changes in the deeper organs we meet with two difficulties.

In the first place, we are unable in the living patient to determine those minute differences, though doubtless they do exist, which, if discernable, would enable us to differentiate.

And, in the second place, very few of our remedies have had their provings pushed far enough to cause corresponding pathological changes.

These, I take it, are the practical reasons that led Hahnemann to ignore pathology; and, though our knowledge of this subject has enormously advanced since his day, his reasons still hold good.

But we cannot, even in the selection of the remedy—to say nothing of its absolute necessity in all questions of diagnosis and prognosis—ignore pathology, for without it we cannot understand the true course and progress of a disease. Only by means of it can we know the symptoms that are common to the disease, and hence those that are

peculiar to the patient. We also thereby know, at certain stages of some diseases, no matter how similar the symptoms produced by certain remedies may appear to those of the patient, yet that, owing to the superficial character of their action, it is not possible for them to prove curative.

For example, in pneumonia, in the stage of exudation, while the symptoms may apparently call for *Acon.*, we know that this remedy, owing to the superficial nature of its action, cannot produce such a condition, and closer examination will reveal that some deeper-acting remedy, such as *Sulphur* or *Lyc.* needed.

Pathology enables us to decide, when new symptoms arise, whether they are due to the natural progress of the disease or to the action of the remedy. We must clearly understand that *it is the patient that is curable*, and not the disease, and without a proper understanding of pathology we are liable to err.

Take a case of inflammation of a joint that has gone to ankylosis—the suitable remedy will cure the inflammation, but will be powerless to break down the adhesions, and surgical aid must be sought. The same holds good with regard to tumors, for when the patient is cured the tumor will cease to grow and perhaps may be absorbed, but very often it persists, and must be removed by the knife.

Pathology also warns us that it is dangerous to attempt to cure certain conditions of diseases, such as advanced phthisis, or deeply situated abscesses, or where foreign bodies are encysted near vital organs. In such cases, Nature can cure only by ulcerating out the foreign substance, and the exhaustion entailed by such an opera-

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tion is often fatal. Of course, in such cases, if a surgical operation is not deemed advisable, we can do much to relieve by means of short-acting remedies which have no tendency to excite Nature to get rid of the foreign body or dead tissue by suppuration.

CHRONIC MIASMS.

I now come to a matter which has given rise to the sharpest controversy in the past, and which many have absolutely rejected, viz., Hahnemann's doctrine of psora. I would not have alluded to it this evening, after having spoken of so many things that I cannot expect all to accept, unless it had been that the discussion of the comparative rank of symptoms would not be complete unless this matter was considered.

All are agreed, at any rate, on the existence of the two other chronic diseases, viz., Syphilis and Sycosis, and I would like to indicate, before closing, the views of the man who more than any one—even more than Bœnnighausen—has elucidated the course and progress of these diseases—I mean, of course, James T. Kent.

Kent holds that these chronic diseases may exist either in an active or a latent condition and may present themselves in three ways. viz.,

As a single miasm.

Two or three miasms co-existing or separate, but only one active at a time.

Two or three miasms forming a complex.

But, to come to the point we are interested in this evening, both Hahnemann and Kent teach that we must

attack the one that is uppermost at the time, and ignore the symptoms of those that are latent, except in the last monstrous phase, where two or three form a complex, which is a rare thing, seldom brought about except by the prolonged abuse of unsuitable remedies.

Where two miasms, say syphilis and sycosis, co-exist, it is not uncommon to find them alternating, though only one is active at a time. In such a state of affairs we naturally will select the remedy solely in accordance with the symptoms of the now active miasm and ignore those of the one that has become temporarily latent—in other words, only the symptoms of the active one have any value in the selection of the remedy that is required at the moment.

Such, gentlemen, is a very imperfect sketch of the rules that must guide us in determining the comparative value of the different classes of symptoms, a matter of the utmost practical importance in connection with the problem of the cure of complex chronic diseases.

And it is solely by our success in the treatment of this class of disease that we can hope to convince our brethren of the old school that the true and only law of cure is that of *similia similibus curantur*.

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APPENDIX C.

PRESCRIBING ; POTENCY SELECTION.

ELIZABETH WRIGHT, M. D.

After thoroughly digesting the first six lectures of this brief course and doing wide collateral reading and studying one should be able to select the most similar remedy. The most similar remedy, however, does not become the *simillimum* until the potency is adjusted to the plane of of the individual during his or her illness at the time of prescribing. Our philosophy teaches us that pathology, and even bacteria, are ultimates of diseases and that the true cause is far deeper and less material than these. In order to truly wipe out the cause of a so called disease one must administer the remedy on or near the plane of the cause. It follows that for mental distresses and disease of manifestly psychic origin the high potencies (10M and upward) would be employed, other things being equal ; and that for grossly material conditions, such as marked organic and pathologic changes, the lower or medium potencies would be selected. In general, then, functional diseases where the symptoms are subjective or physiological, where the vital force is tactile, respond well to high potencies ; and the organic conditions to lower ones. It makes some difference whether the conditions be acute or chronic. For instance, diphtheria has marked pathology, as has pneumonia, yet the pathology is recent and swift in pace, and the high potencies are suitable. In general, acute diseases respond well to high potencies, especially of acute remedies

(high potencies of deep acting chronic remedies, when these are indicated in an acute condition, may be dangerous). Certain acute crises, based on chronic trouble, such as cardiac asthma, would have to be treated with medium or low potencies because the high potency would stir up more than the vital force could cope with in the face of the advanced chronic pathology.

In chronic prescribing it is a safe rule to begin with 200th centesimal unless this is dangerous because of the nature of the remedy, the degree of the pathology, or the depth of the miasm. One great object in starting at the 200th in chronic cases is that you then have an ascending series of potencies to use as treatment progresses. The Kentian ideal being to exhaust the action of one potency (see section on Repetition below) and then to step up to the next, exhaust that, and so on, if no change of remedy is indicated, to the highest potency. (Hahnemann places the upper limit of potencies suitable at the end of a series in any given case at the last potency which will produce a very slight aggravation of the symptoms. In our experience you can usually use the highest known potency of the true *simillimum* and still get action, although at times action will cease with, say, the CM potency). When the top of the series has been exhausted and the same remedy is still called for you begin again at the 200th and repeat the ascending series.

Series of homœopathic potencies have been made by many famous persons, either by hand, as in the case of the Jenichen potencies, or by various machines. As a general rule it is best to stick to the potencies made by one man as

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you go up the series in any one case, as for instance, Kent's 200th, 1M, CM, etc. On the other hand, if a jolt is needed, although the same remedy is called for, a change from, say the Skinner to the Fincke potencies may whip up the case. For those who understand rhythms and cycles it may be well, after a patient has been through a course (ascending series) of a remedy from one source to change to one of the irregular potencies of the remedy from another source; for instance, we have seen Skinner's *Lyc.* 2M beneficial instead of Kent's 1M, or Fincke's 43M in place of a 50M. This change seems to start a new rhythm or cycle, it is as though the vital force became bored with the decimal system and responded with a renewed spurt to the alteration of potency. This is advanced doctrine.

In desperately ill cases, where the fight for life is active, in acute disease, the high potencies are indicated: also where the desperate illness is the terminal stage of chronic disease the very high potencies induce euthanasia. In chronically incurable cases, unless the vitality is very good and the pathology not yet too extreme, low or medium potencies are suitable, and usually the deep acting *simillimum* must here be avoided and a palliative drug given. If such a palliative be not too searching a remedy, *Sang.*, *Rumex*, *Puls.*, etc., may be given even to incurables in a fairly high potency.

The problem of potency selection to acute disease incident to chronic treatment is another snag. Patients long under correct chronic prescribing show less and less acute diseases, in other words their susceptibility is eradicated; however, explosions of latent psora do occur

sometimes, particularly when the vigor is increased by the proper chronic remedy, as a sort of vent or effort on the part of the vital force toward house-cleaning. The first problem for the prescriber in this connection is to determine whether the acute symptoms arising during chronic treatment are an aggravation following the remedy, and if so, whether they are an aggravation due to the reactive curative power of the body or a remedy-aggravation due to oversensitivity or to *wrong potency*. If either of these be the case and the aggravation is not too severe no remedy should be given, merely *Placebo*. If the aggravation threatens life or is unbearably painful (this may have to be an antidote) or for some social reason, particularly intolerable for the moment, an acute remedy may be given in the medium low potencies, preferably the 30th or 200th, and this will probably not interfere with the action of the chronic remedy. In acute exacerbations or explosions of active chronic disease you can often give the acute complement or cognate of your chronic remedy. In this case also the chronic remedy may continue to act undisturbed. In very severe acute diseases during the course of chronic treatment it will sometimes be better to give the acute remedy high, and after the acute condition has subsided *retake* the chronic case which will often show a new picture. The new prescription takes into account the original chronic symptoms but lays more stress on the recent developments.

In many conditions with marked tissue change, such as adhesions, chronic cardiac decompensation, very low potencies, even tinctures may be useful. Potencies as low as the 12th or even the 6th are occasionally invaluable in

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single dosage in such grave conditions as tuberculosis where even a 30th or a 200th of such a remedy as *Phos.* or *Sil.* might set the economy on the down grade.

From this brief outline of the possibilities of potency it will be seen that we uphold the use of the high potencies mostly. The question of *Potency* is the most moot point in all homœopathy and even in our rank today many strict homœopaths are so-called low potency men. These follow Hughes and are more pathological in their prescribing. The strict Kentians, almost without exception, are preponderantly high potency.

The degree of susceptibility of our patient also influences potency selection. Certain persons are over-sensitive (often owing to improper homœopathic treatment) and they will prove any remedy you give them ; they require, therefore, medium low potencies. Other patients are very sluggish (often owing to much allœopathic drugging). These will often take a very high potency to get any action at all or they may need a low potency repeated every few hours until favourable reaction sets in. A third type of patient is the feeble one where the vital force can easily be overwhelmed. Repetition is the greatest danger here. Acutely sick, robust patients will stand repetition of high potencies until favourable reaction commences, although the ideal is the single dose. Children take high potencies particularly well, and in general the very aged require medium potencies except for euthanasia. Some individuals have idiosyncrasies even to homœopathic potencies of certain substances. Some degree of idiosyncrasy to a remedy must be present or the patient will not be sensitive enough to.

be cured, but where this is extreme the law of medium potencies should be preferred. Where patients are habitually poisoned by a crude substance, as a general rule it is not advisable to give that substance in very high potency, it is better to give an antidotal substance high. For instance, patients long dosed with calomel are not relieved by high potencies of *Mercurius* but may be by *Hepar*. On the other hand exceptions to this occur as in chronic susceptibility to *Rhus* poisoning. *Rhus tox.*CM may eradicate the tendency. If not, a deeper antipsoric in accordance with the totality of the symptoms is indicated. Certain remedies are noted for their power to restore order after chronic poisoning with crude drugs, as *Natrum Mur.* after the misuse of quinine or silver nitrate. The very low potencies, such as the 3 and 6x are very dangerous in the hands of accurate prescribers. This may be mainly due to the customary repetition.

Great care must be taken in potency selection of certain very deep acting remedies in serious chronic cases. For instance, *Kali carb.* in gout, *Sulph.*, *Sil.*, *Tub.*, or *Phos.* in tuberculosis ; *Psor.* in asthma ; and *Arsenicum* and *Lachesis* in many conditions. These remedies should be carried in the 30th potency even by those who give almost entirely the higher degrees.

REPETITION

The single remedy is the third member of the essential homœopathic trilogy. The reason for this is obvious : only one remedy can be the most similar at any given time with the condition of any given patient. If the physician can

not decide between two remedies he has not gotten the totality of the symptoms, or the remedies which he has chosen are merely superficially akin to fragments or aspects of the case. Furthermore, the *simillimum* is a personality having a rhythm, one might almost say a permeating aura of its own, and in the fleeting instant of its administration it takes complete possession of the patient, thereby buoying up the vital force so that it can carry on the restorative process. To have two or more remedies would be to introduce two separate rhythms, partial and disharmonious factors. Moreover, if more than one remedy be used the doctor cannot know which element was curative and one source of future guidance is thereby obscured. Lastly, since only one remedy can possibly be proved at a time, so only one can cure at a given moment. Some mongrel homœopaths, when in doubt, give mixed prescriptions. This means that they are merely prescribing symptomatically, one remedy for one symptom or organ, and another for another. Each of these, if homœopathically chosen, may wipe out the fragmentary illness at which it was aimed but that which is profound, total, and primal, of which all these symptoms are but manifestations and will remain untouched and simply crop out through other channels as subsequent symptoms. Other halfhearted homœopaths, and even some with a wide knowledge of the materia medica but a relatively feeble grasp of the philosophy, alternate remedies. This practice can not be too strongly condemned as it seesaws the patient into temporary ups without real progress. Many modern French homœopaths give a main deep acting remedy and one or more so-called drainage

remedies with it, the chronic remedy in high potency and the drainage remedies in low potency, *the idea* being that the drainage remedy opens up an outlet for the exodus of the disease. These drainage remedies aim at the production of a discharge or the stimulation of the secretory organs, etc. This is a recent variant and does not appear in Hahnemann, the old masters, or Kent, and the self-styled purists of today do not approve of it.

The subject of the intercurrent remedy may well be mentioned here. Many pure Kentians hold that there is, or should be, no such thing, and that when, after a series of potencies of the same remedy, a new remedy is called for to stir up or develop the case, this is not an intercurrent but at that moment the *simillimum*.

There is some division of practice as to whether the single remedy should be given in one or more doses. The high potentists favor the single dose, although two, three or more doses of a high potency may be given at short intervals—every four, eight or twelve hours—especially in very acute cases with fever, as the increased metabolism, so to speak, eats up the remedy fast. In such slow diseases as typhoid high potencies may also be repeated close together, but in every instance *it is an absolute rule that when favourable reaction sets in the administration of the remedy must cease*. So long as improvement is visible in the patient himself the remedy should not be repeated. Not only there is no need of "more of a good thing" but a repetition of a remedy which is still acting successfully defeats itself and actually hinders cure. Very occasionally, however, we have found that when a certain potency is

aiding somewhat, a higher potency of the same remedy will lift the case to speedier cure. In this connection it is of interest to mention the theory of double dosage recently promulgated by Gordon of Edinburgh. Gordon gives his remedy in two doses, eight hours apart, the first dose of a lower and the second of a higher potency of the same remedy. For instance, *Phos.* 200 at bedtime and *Phos.* 1M on rising. This has not yet been sufficiently tried out for unqualified acceptance. Some of the masters use a lower potency after a higher one and claim good results. This seems in accord with the order of the progress of disease, from within and above, outward and downward. This has been even less used than the other method and we have no statistics as to whether these cases would have done as well or better on the lower potency originally.

Another method of multiple dosage which almost amounts to divided single doses is that of plussing. "Plussing" means dissolving your dose in a third of a glass of water, taking two teaspoonfuls, throwing away most of the rest, adding water up to the original quantity, stirring and succussing and again taking two teaspoonfuls as the second dose and so on. This raises the potency very slightly between each of the doses, gives somewhat widest range of plane, and is particularly indicated in stubborn and refractory cases. If very low potencies are used in ordinary acute illness, repeated doses are necessary until improvement sets in in most cases, for instance, a decompensated cardiac case calling for *Crataegus* might need two drops of tincture in water night and morning for a week. Where there is more pathology than vitality this might open

the case better than a single high potency dose of *Cratagus*, although this latter might follow later. *Bryonia* 3x should be given as pellets or in water at intervals of one to four hours according to the pace of the case, in acute cases calling for *Bryonia*, by low potency men. We would whole-heartedly advocate a single dose of *Bryonia* high under the same conditions. So much for the administration of the first dose or doses prior to the setting in of a favourable reaction.

Next comes the problem of when to prescribe again. *The rule here is never repeat or change the remedy while the patient himself is improving.* When the improvement has apparently ceased in acute diseases you may need to repeat the same remedy in the same or a higher potency or, if your remedy was not a true *simillimum*, you may need another remedy to round out the cure. You must be sure that the cessation of improvement is not due to the emotional, mechanical or hygienic cause or merely to the aggravation or out-cropping of single symptoms. In chronic work you should wait some time, from three or four days to two or three weeks or more, as the vital force has cycles even on the upward grade, and true curative action must not be interrupted until it is certain that the reactive force is exhausted. Kent admirably stresses this in his injunction "to watch and wait".

As to the interval, between repetition or prescriptions, this may vary from a few minutes to a year or more and is entirely dependent on the general amelioration of the patient. When you have had true improvement and particularly, if, in chronic cases, you have observed the

working of Hering's law of cure, sit tight. More cases are bungled by too frequent repetition than by anything else. In this connection it is of course necessary to know which are the long acting remedies, although we have known of the good effect of *Bryonia* 30 one dose continuing to years in a chronic condition. Every student should own the little pamphlet by R. Gibson Miller on *The Relationship of Remedies* which gives approximate duration of action, but the only true guide to the duration of action of any remedy in a given potency on any patient is the cessation of the patient's general sense of well being. In general, if you are a good prescriber, one dose, single or divided as above, should cope with brief acute diseases to be followed at the termination of the disease with a chronic to set the economy in order. If a change of remedy is indicated in acute disease there will often be a reversion or return towards the close of the disease to the primary remedy.

The subject of the second prescription and of aggravations will be taken up in the next lecture. It remains only to say a word here about the place of *Placebo* in prescribing. A famous doctor said that "*Sac. lac.* is the second best remedy". Patients who understand homœopathy deeply may often be content with a single dose at long intervals without *Placebo*, but it is good policy to give even these a single powder of *Placebo* at every visit. Most patients require medicine often, not only so that they feel that something is being done but so that they may have powders for emergencies and it is not only honorable but necessary to give plentiful *Placebo*. It is wise to train the patients to take powders or pellets as *Placebo* which are

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similar in appearance to the actual remedies, and not to give them the tempting brown, pink and green blank tablets.

Complicated as these elementary rules sound they are but the beginning of homœopathic wisdom. Every student should own and read at least once a year Kent's *Lectures on Homœopathic Philosophy* and should also be conversant with the writings of Stuart Close, Gibson Miller, John Weir, as well as the *Lectures on Therapeutics* by Dunham and by Joslin and, of course, with that keystone of our art—Hahnemann's *Organon*.

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