

A CONTRIBUTION ON THE RELATION OF HOMEOPATHY TO THE SCIENCES

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Our Materia Medica is growing, perhaps not as rapidly as in the days when fewer remedies were in use, for the very good reason that our needs are not as pressing as those of our forefathers. They builded well, albeit not as extensively as might be wished; but then one or two generations could not do everything, else had they made us idlers and good for nothings, and we have enough such weighing us down now.

Most of the later remedies have been experimented with in a very desultory fashion, and theft pathogeneses abound in meaningless generalities that lead nowhere and are often worse than useless; such things do not work to our advantage, but they rather encourage idle speculation and guesswork. The only thing that has saved this work from total oblivion is the fact that it comes more or less under the eye of an immeasurably larger number of clinicians than was formerly the case, and if the fragmentary provings contain a grain of truth, however small, it is sure to be found and used. But consider the tremendous waste of time and effort and the immense number of useless, if not harmful, prescriptions that are involved in this very tedious process, which after all differs from the allopathic procedure only by a hair's breadth. If such be our methods all excuse for separate existence has vanished, and it were better to return to the empirical methods that palliate acute diseases, and in lieu of curing chronic ones consign them to the hygienist.

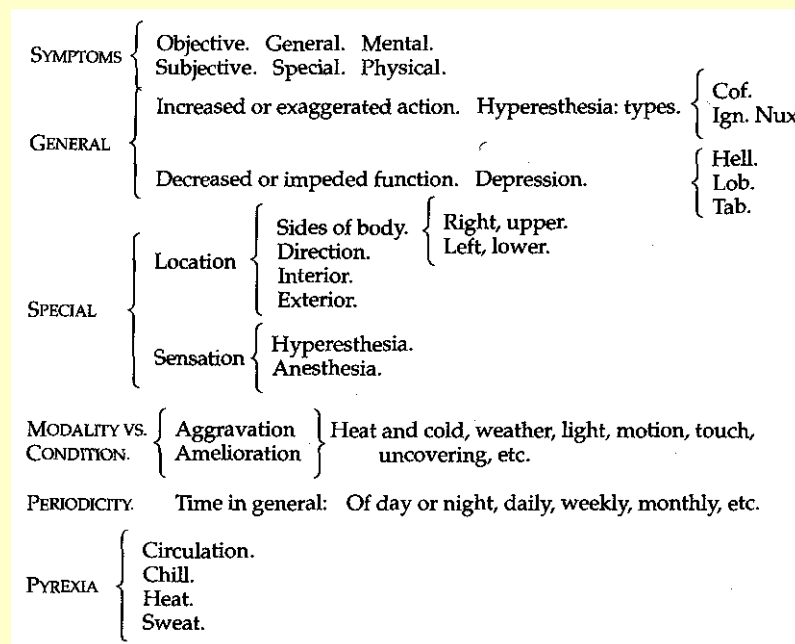
Of course, all of us resort to the general storehouse of medical knowledge for various things we may need, and these fragments come in to fill the small niches in our practice in many ways. But I am much afraid that from occupying a very subordinate place in the homeopaths work they have, among a very large class advanced to the first position and have gradually supplanted the legitimate application of the law of similia, greatly to the detriment of the patient and the demoralisation of the physician.

It may be accepted as a general proposition that such practices are patch work and seldom strike at the fundamental disease, to say nothing of eradicating the underlying miasms, which is, of course, entirely beyond their sphere of influence. For this purpose it is necessary to fall back on the antipsorics, whose number is as yet somewhat limited and their scope therefore not what in the future I hope it may be. The time is ripe for a further extension of deep acting pathogeneses, and such as have given us a hint of their possible future usefulness should be thoroughly proven.

It is quite possible that we have had enough of generalisations and the spreading of a little knowledge over a vast surface, and it is high time that a little deeper work be done. We should not stop until we have proven a few medicines as carefully as Natrium -mur. and Sulphur, for instance, not that I would imply that the well proven remedies are now commonly prescribed to their limit, for such is not the case among the general run of practitioners, who, alas, it seems, seldom look into our textbooks on Materia Medica after leaving college. This is in part due to the glamour and glitter of surgical achievements, which lure many an incompetent into a field where talents of the highest order only can hope to arrive at even a measurable success; it is perhaps easy to say that such material will yield even less honour to Homeopathy; but this can, in the nature of the case, be but partially true, as their devotion to our school, if consistent, would at least have the negative merit of not destroying their patients by poorly considered cuttings, and would leave them in a position to make many incidental cures

In making provings a definite and systematic method should be followed, in order that the finished work may, by its symmetry, appeal to the trained mind as something in itself the result of care and thought. As a suggestion I will illustrate the matter with a rough diagram,

intended as a guide by which the symptoms may be systematised for study, or it may be used as a guide in following an analytical study of a given case through the repertories.



Now, all these are distinct groups around which certain symptoms revolve in a more or less orderly manner, expressing themselves as an individual phase of the disordered life force; and right here is where the specificists fall down by treating these isolated groups as though they constituted the whole disease, because perchance they are most in evidence. No greater mistake could be made. But this is digressing somewhat. The concrete expressions of each group naturally fit into each other, forming the separate pieces which go to make the whole mosaic of the disease and lacking parts mar the picture in proportion to their absence or indistinctness.

Now as it happens remedies are just like diseases, the more completely they are proven the more certainly will they cover whole sicknesses so that we may even at times say such and such a remedy is the genus epidemicus, because it covers all the symptoms which that particular epidemic is capable of producing. But some one will say that no remedy has been proven to the extreme limit as is shown every now and then by the cure of disease by an empirical prescription which may at present not have even one of the so cured symptoms in its pathogenesis. But as remedies can only cure symptoms similar to the ones they are capable of producing this objection falls to the ground.

Gross tells us in the first volume of the Allg. Hom. Zeitung, page 15, that Hahnemann obtained his antipsoric symptoms only from doses of the primary sort almost exclusively and as primary symptoms stand in the front rank for curative purposes far outclassing the secondary ones, the way is plain and it only remains for us to follow it.

The above schema is not put before you as a new idea, but rather to present certain facts in a light which gives a point of view from which Homeopathy may be looked upon as a true science in that it is necessary to follow out a true and only individual remedy, the similimum. In going over the large divisions it will be noticed that the number of remedies present in all the lists in a given case is so great that it leaves the searcher in a maze of doubt as to the true similar, here the rubrics on Modality and Pyrexia come in as a welcome clarifier of the situation. After they have eliminated the inharmonious remedies with precision and rapidity, their numbers will be found very materially reduced. This is particularly true of the concomitants of Pyrexia; thus leaving the characteristics or very peculiar manifestations which must finally decide the choice.

Most prescribers in these later days have followed the reverse method, that of picking out the individual's peculiar symptoms among which they hope to find some well known key-note; this method has always had the disadvantage of not being strictly inductive and of limiting the physician's activities to the number of key-symptoms known to him or of which he may readily avail himself through the literature at hand, thus a case presenting unknown individual peculiarities at once leaves him at sea with a compass to be sure, but one sadly out of order. In its way it answers very well for most acute diseases, but in chronic cases leaves very much indeed to be desired, therefore he that would do the very best and painstaking work must perforce wade through the generalities down to the specific indications by a systematic method having the data of the special disease manifestations for its basis. This in a large measure was the method of Bönninghausen and its extension is slowly being made possible by the accumulated clinical evidence contained from time to time in our journals.

Even by this method it not infrequently happens that the last stage of the analysis leaves us looking for the peculiar symptom in vain and a careful search of the repertories and large parts of the materia medica show that provings have never elicited it or if they have, it stands unsupported by any symptoms harmonising with its own. This necessitates a close scrutiny of all the generalities in order to be certain that no important contraindication still obscures the choice as well as an inspection of the localized symptoms comparing them region by region, remembering that the most recent manifestations, the anamnesis and the general mental state will most certainly lead to right choice. Most brilliant cures have been made in this way, during which the idiosyncratic symptom has faded away along with others, which were to be placed in the clinical list awaiting further confirmation.

It has been my fortune through reading and otherwise to observe quite a few as pathogenetic symptoms which were formerly classed as exclusively clinical. Such observations should be carefully collected and added to our general fund of observation; among others the following are deserving of special mention:

1. Nails ridged transversally: Arsenicum.
2. Seems to be endeavoring to get pieces of body together: Baptisia.
3. Gums tender, blue and inflamed: Borax.
4. Yellow vision: Calendula.
5. Feeling as if the head were opening and shutting: Cannabis.
6. Aggravation from gentle touch: Chin. The remainder of this symptom which is expressed by "amelioration from hard pressure," is already contained in our text-books as a true pathogenetic effect.
7. Purple weals: Chin. Sulph.
8. Constriction about heart: Coca.
9. Uncontrollable jumping of legs below the knees, after every dose of the 30 of Digitalis.
10. Varicose veins and thrombi have been caused by Fluoric acid.
11. Deep seated drawing, gnawing pain in forearm: Gelsemium.
12. Head feels as though the scalp would lift, with giddiness on turning and an intense irritability, always provoked by any noise: Hydrastis.
13. Sweet taste, Iris versicolor.
14. Despondency: Kali. iod.
15. Body covered with large welts: Kali. iod.
16. Alkaline taste: Kalmia.
17. The right leg feels too short and is numb after repeated doses of Mercurius 30; the patient insisted that it was the medicine that made it feel so.
18. The palms of the hands are tender as though denuded: Merc. cor.
19. One pupil is dilated: Nat. phos.
20. Tremulous contraction of flexors supplied by the ulnar nerve, like an electric shock: Nux. Aggravation of head symptoms when lying down in the dark: Onosmodium.
21. Gnawing in stomach, food seems to sicken him: Sulphuric acid.
22. Rapid and continued sneezing, also warm biting feeling in mouth: Veratrum viride.

23. Chest symptoms are better from deep breathing: *Verbascum*.

Hahnemann in paragraph 153 of the *Organon* says; "In this search for a homeopathic specific remedy, that is, in this comparing of the symptom complex of the natural disease with the symptom array of known medicines, in order to discover one with a corresponding sick making power similar to the disease to be cured, the more striking, singular, uncommon, and peculiar (characteristic) signs and symptoms of the disease attack are chiefly and almost solely to be kept in view; for these principally must correspond to very similar ones in the symptomatology of the desired medicine, if it is to become the most suitable one for a cure. The more general and undefined, anorexia, headache, debility, restless sleep, discomfort, etc., when they are not more accurately defined deserve but little attention because of their universality and vagueness, as we are apt to see generalities like these in almost every disease and medicine."

It is especially noteworthy that Hahnemann limits these "characteristics" to those of the disease attack and not those which the patient possesses as a constitutional idiosyncrasy. This makes another of his paragraphs more lucid. I refer to the one in which he speaks of the necessity of a full and complete knowledge of disease effects in order that we may at once see and grasp any irregularity which may come up in the course of a malady. This departure from the usual course naturally individualise cases and should be the guide to the knowing healer of the sick as distinguished from the routinist; it is always important to call attention to the fact that he says these symptoms "must correspond to very similar ones in the symptomatology of the desired medicine", and does not say they must agree with the characteristics of the drug, which one might infer from certain modern methods of procedure, which have often gone more or less under the title of "key-notes."

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