

The Integral of the Chronic Miasms

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Abstract: There are many explanations of the chronic miasms. Two major categories divide the many interpretations. Either physical explanations or metaphysical theories include most of the ways of understanding miasms. Another article addresses the physical interpretations including physics, pathology and microbiology ideas. This paper discusses religious, philosophical, symbolic, psychological and generalized theories of miasms. In the place of all of these concepts, a descriptive, phenomenological approach is offered that does not ignore the actual words of Hahnemann.

Keywords: chronic miasms, miasms and original sin, miasms and karma, miasms and archetypes, psora, syphilis, sycosis

Introduction

The approaches to understanding chronic miasms include the physical explanations and metaphysical explanations. The physical interpretations of chronic disease rely on the physiology and pathology of cells and tissues; chronic illness is attributed to a microbial or pathogenic cause. Specific names are assigned to diseases that have a specific cause. Even physics contributes to the supply of different physical, mechanistic explanations of Hahnemann's natural chronic miasms. Another article discusses these concepts and offers a counter proposal involving the model of fractal qualities.(1)

Another type of explanation for chronic miasms may be called a metaphysical category. These interpretations include religious and philosophical beliefs as well as symbolic or mythological metaphors. Psychological theories, such as archetypes, are part of this category as well as some theoretical generalizations about body functions. Examples of this metaphysical approach will be discussed further.

Besides the physical and metaphysical interpretations, another way exists. This approach is descriptive, experiential and phenomenological. It seeks to avoid the rocky shoals that break the chronic miasms into analytical pieces on the one hand, and it bravely tries to steer away from the drowning whirlpools of theoretical concepts on the other hand. Most importantly, the integral wholistic description of chronic miasms does not ignore what Hahnemann actually wrote.

Metaphysical miasms

A segment of homeopaths believe that the meaning of miasms should be found beyond the physical world. Here is an example: "Certain bacterial and viral illnesses as well as chemical poisonings may be energetically carried in the auric field and higher spiritual bodies as vibrational patterns are referred to in homeopathy as miasms. A miasm is not so much an illness as an energetic tendency toward illness."(2) Further statements following these ideas propose that the primary mechanisms involved in miasms are subtle energetic rather than molecular in nature.(3) These explanations go way beyond the direct sensory experience of most people and so enter the realm of imagination or fantasy.

This way of thinking is not just an issue of imaginative thinking that goes beyond the frontiers of current mainstream science. Behind the theory is a strong belief system that rivals any religion: "Miasms and their 'dis-ease' producing tendencies may be related to the struggle of the human spirit to recognize its own divinity through the expression of particular illnesses at the physical level."(4) The purpose of disease and suffering is an important question, but the practicing homeopath should not assume that he knows the answer. If the homeopath assumes that he knows why a person is sick, his case taking becomes full of judgments and prejudices instead of exact detailed symptoms as they really are.

Another quote says: "There are important symbolic patterns to the kinds of illnesses and miasms to which people have become susceptible. The mi-

asms represent key issues or learning experiences which impede humanity's progress."(5) Here it is assumed that the symbolism is more important than the actual individual symptoms. The unstated belief here is that the thinking mind is more important in knowing disease than the direct sensory perceptions of the body. The hierarchal assumption that the intellectual mind takes precedence over the sensory mind is unfounded in the holism of homeopathy. What is important in the disease of each person cannot be judged before the symptoms are all known.

"Miasms are a crystallized pattern of karma"(6) is a modern declaration of belief, but it is not so different than a comment made by a homeopathic editor a century ago: "As it would be absurd for a philosophical Christian to reject the doctrine of original sin, so it is absurd for any one who professes to have a clear perception of homoeopathy to reject the doctrine of hereditary morbidic miasm. Both of these doctrines must stand and fall together."(7) Spiritual or religious beliefs here imply value judgments of good and bad. The morality may or may not be correct, but it has no place in the exacting practical methodology of homeopathy where prior beliefs can unduly influence the perceptions of the case taker.

Symbolic and psychological miasms

Some homeopaths seem to assume that chronic illness results from wrong thoughts, and not just heredity, social circumstances or environmental occurrences. Each of the three miasmatic chronic diseases is assigned a belief system. People with psora believe that "the world is a harsh place and we eke out our existence by the sweat of our brow." A sycotic person considers that "shame is the natural human condition and we cope as best we may, by concealing it or washing it away." A person with syphilis thinks, "I am alone in a destroyed planet, surrounded by the flames of civilization. I cope with it by rebuilding my empire by whatever means are necessary"(8) The author does not mention what a healthy person should believe. It is an unfounded assumption that people with the same chronic miasm have the same mental state. There are no mental portraits mentioned in the original description of miasmatic syphilis and sycosis, and the mental symptoms listed with psora do not include the broad generalization quoted above.

Other homeopaths do not agree with the above interpretation. One author says that the inception of psoric miasmatic illness is basically selfishness and loss of spiritual ideals replaced with excessive materialism.(9) Another author says that the psora mindset is a distraction from your deepest and most

authentic inclinations by the appeal of what you see others doing — in other words, of itching to do what isn't really you. Sycosis is ceaseless overdoing — too much eating, too much activity, seductive indulgences. Syphilis thinking is when energy and intent are withdrawn from the body and the body's structures deteriorate.(10)

Who is right? Why are they right? These theoretical mindsets are part of a personal religious or philosophical outlook on life. They are not part of the practical homeopathic methodology.

Some homeopaths believe that the miasms must fit into the larger framework of certain psychology systems: "The first position, the egotistic one, we say 'I.' It corresponds to the oral state of Freud, the Psora of Hahnemann, Eros for the Greeks... The second position, we say 'we.' It corresponds to the anal state of Freud, the Sycosis of Hahnemann, Philos for Greeks... The third position, we say 'us.' It corresponds to Freud's Oedipus Complex, Hahnemann's Luetism and the Greek concept of Agape."(11) The unstated presumption here is that psychology concepts are more important than the original description of the miasms. Any observations about chronic disease must fit into this author's predetermined belief system. It assumes that to be a good homeopath, one must understand Freud and Greek mythology.

Jung's psychology is probably more in vogue at the moment among some homeopaths. A homeopath who uses Jung's ideas has said, "What are the miasms, really?... We might consider them structural or archetypal fields of force, vortices of energy"(12) Jung's version of archetypes defines them as psychological principles — primordial organizing patterns of the psyche. Archetypes are not confined to the human brain, but operate from transcendental realms and exert influence on the psyche. The transcendental realms are hidden dimensions of reality. These hyperphysical realms, it seems, are found somewhere in the human mind. The recognition of universal principles assumes the existence of a Cosmos that is intelligent and interconnected. If a homeopath does not believe in the Universal Mind, does he fail to understand miasms? Does homeopathy need a grand metaphysical theory that connects chronic disease with a superconscious reality? The original miasms are not an invention of a psychology or philosophy. They are the direct sensory perceptions of clinical experience. They are not dependent on the whims and fancies of various branches of psychological thinking that come and go.

Generalizations of the miasms

One type of homeopath looks for the cause of chronic illness in microbiology, physiology or phys-

ics, as discussed in another paper. Another type of analytical homeopath looks for a common thread in all the symptoms listed for each chronic miasm. Each miasm is explained with a general theme. Psora is categorized as hypofunction, atrophy, weakness and inhibition. Sycosis is defined as hyperfunction, hypertrophy, overactivity and expansion. Syphilis is listed under dysfunction, dystrophy, ataxia and destruction.(13)

This type of thinking sifts through the symptoms and searches for properties that remain consistent or unchanged in a seemingly random group. It is a search for a general idea to tie thoughts together and tidy up the disorder of the actual symptoms. It finds commonalities and ignores individualities. The names used, like hypertrophy, refer to bodily function, but are general enough to include mental activities. These neatly arranged categories conveniently define miasms while ignoring the actual, concrete symptoms that do not fit.

The Nature of Chronic Diseases lists over 815 symptom sentences for psora.(14) There is no simplified scheme like "deficiency" that links all the signs of psora. The old school names used to describe psora include cancer of the uterus, fistulas of the rectum, epilepsy and suicidal mania.(15) These illnesses do not fit an underlying generalization of psora. Ideas conceived in the labyrinth of the intellect do not illuminate the coherent unity of psora.

The carefully collected experiential data recorded by Hahnemann is only a "speculative hypothesis"(16) according to the opinion of one homeopath. This statement is inaccurate and uncalled for. Hahnemann condemned speculation throughout his homeopathic career.(17) To accuse Hahnemann of speculation is to say that he did not believe what he wrote or that he did not practice what he taught. The commenting author attempts to paint Hahnemann in his own colors, but Hahnemann was not so limited in his thinking. Hahnemann's science is "based only on the observation of natural phenomena and experiment."(18) Hahnemann's thinking does not involve hypothesis either. He does not propose a mechanism, and he makes no suppositions based on assumptions. Instead, he puts forth as complete a description as possible from years of exacting observation, and he leaves room for more experience.

This same commenting homeopath then describes the concepts of another current homeopath as if they add benefit to the development of homeopathy. This homeopath with some type of help from a computer, reinterpreted miasms and was able "to identify a new one, the 'acute' miasm."(19) Of course, Hahnemann has already explicitly defined acute miasms, acute diseases, chronic miasms and chronic diseases.(20) Has this current homeopath

not bothered to read the *Organon* or has he ignored Hahnemann to pursue his own agenda? This current homeopath "found several more" miasms, it seems, with more mysterious manipulations of the computer. One "found" miasm is called the leprosy miasm. However, Hahnemann clearly mentions this disease name as an important manifestation of psora in history.(21) These so-called new findings rely on creations of the imagination and "scholastic reasoning"(22). They confuse and obscure the original definitions of homeopathy. They do not follow from the observations of direct sensory phenomena. They are manufactured in the mind, and they lead to the dissolution of the homeopathic scientific method.

The Phenomenological Whole of Miasms

Recap

So far, I have outlined a few interpretations of miasms. Some require a belief system in philosophy, religions or spiritualism. Other interpretations depend on the belief systems found in psychology and mythology. Still other explanations of miasms summarize with general categories extracted from common denominators of miasm symptoms. In another article, I discuss how miasms are explained with the mechanism approach. Various theories about microorganisms and pathology categories are hypothesized. Even theoretical physics is used to rationalize miasms.

Purpose

I propose a different emphasis on the meaning of miasms. It is not another analytical mechanism, and, hopefully, not just more abstractions that are theoretical. It is not a new law of nature. It is nothing with an impact like a new mechanism of science. It is only the words of Hahnemann himself reiterated in my language of today.

Method

This method of finding meaning in the miasms is a descriptive method. It does not look for mechanistic causes, nor does it seek to reduce observations to common generalizations. Instead, this descriptive method hopes to reveal the "surprise of the actual."(23) Fractal geometry is an example of this descriptive method found within the field of mathematics. The originator of fractals says, "Little good can come when a science yields to the social pressures that reward modeling and theorizing while scorning 'mere' description without 'theory'."(24)

The method of finding meaning of miasms in this article is not meant to "merely describe," but to clarify the integral wholeness that is a chronic

miasm. Rather than searching for explanations to the question of what miasms are through analytical mechanisms or in theoretical belief systems, a good phenomenological description will become the explanation.

Hahnemann's words

A like process of development unifies true natural chronic miasms. All the miasms have three important moments: First, the instant of dynamic contagion; Second, the penetration of the disease throughout the entire person; Third, "the breaking out of the external ailment."⁽²⁵⁾ This coherent process is named by the word miasm. This consistently observed process does not explain miasms, but describes them clinically.

Dynamic contagion

The miasmatic chronic diseases are dynamically contagious. They require direct contact. To begin the infectious process of syphilis and sycosis for example, "there is required a certain amount of friction in the most tender parts of the body... as in the genital organs, unless the miasma should touch a wounded spot. But the miasma of the itch needs only to touch the general skin, especially with tender children."⁽²⁶⁾ Hahnemann watched people who were without disease and subsequently became diseased. He accurately recorded the observed process.

Social intercourse and sexual intercourse

Natural chronic miasms can only begin by direct touch between people. One type of direct touch is casual touch. It occurs, for example, with a business interchange completed with a handshake. Or friends may exchange touch with a hug touching cheek to cheek. Family may lightly kiss each other. A doctor may take a patient's blood pressure without wearing gloves. The "general skin" touches that occur between people begin psora.

Touch of a more prolonged and forceful nature between mutual mucus membranes or wounded areas lead to the venereal miasms. We begin miasmatic chronic disease only by physical contact. The infectious microorganisms found associated with these diseases cannot survive outside the living bodily tissues for any length of time. In modern parlance, we cannot get a sexually transmitted disease from a toilet seat. The process of the venereal miasms begins with sexual intercourse, and psora starts with social intercourse.

The infectious process can be interrupted with preventive methods like sanitation and quarantine, but killing microorganisms will never cure chronic disease. Viruses, bacteria, etc., are ubiquitous and

inseparable parts of life physiology. Exterminating a life form will not cure chronic diseases. The emphasis on only one mechanistic part of the miasmatic process will not lead to success. The whole disease cannot be known or treated without making the whole human and the wholeness of his life the center of study. The correct homeopathic remedy imitates the whole process of the disease, not just the life force of the involved contagious microorganism. The homeopathic process of seeing the integral person leads to success.

From the point of view of physics, touch is a physical phenomenon that includes a force and a motion.⁽²⁷⁾ One of the laws of motion in physics is that for every action there is a reaction. Every touch between people is a moment of instability where a reaction must result. The moment of touch is a threshold moment when the body's balance and health can become a mistunement or ill health. When body spheres collide or invade each other, a new balance, a different stability must be established. Even if the touch is not imposed, but desired, a transformation of energy patterns must occur. The dynamic acts of intercourse allow a new life order to begin or a renewal of the web of relationships.⁽²⁸⁾

Touch can be healing or disease producing. The wholeness of living includes constant change. Exchange and interchange must continue for life to continue. Life is renewed by social intercourse and new life is possible with sexual intercourse. Nothing new is created locally without something sacrificed or transformed. A new embryo lives because parents give up parts of their body. The physics law of conservation of energy says that nothing is created or destroyed in the universe.

To make a new child, to make life, some part of the life giver must die. Using the re-creating energies activates the process of death-dissolution of energies in counterbalance. Chronic disease results if the life force cannot renew and balance itself. A person can become diseased or untuned if they artificially avoid contact, in which case they become stuck in inertia. Chronic disease also results from an excess of contact in which case, boundaries are lost and dissipation results. Health is balance between the creative and destructive intercourses.

Acute miasms, chronic diseases and chronic miasms

Acute miasmatic diseases are, by definition, maladies that run their course rapidly and extinguish themselves or the person.⁽²⁹⁾ Many acute miasms do not require physical touch between people. For instance, the group of symptoms known by the name malaria may start after walking in the miasma or noxious influence of a swamp. An epidemic miasm

such as scarlet fever may be transferred from person to person through the air. In these acute cases, the life force of the microorganisms that touch people seems to have an effect in a qualitatively different way than the microorganisms contacted through direct intercourse.

Cases of chronic illness can result from contact with objects that produce trauma and injury. These are not the miasmatic or dynamically contagious diseases, but are defined as general chronic disease.

We can become sick from what a person says to us. This type of social discourse can make us chronically ill, but does not involve miasm or infection. Any experience of the senses — vision, audition, taste, smell or touch — has the potential to initiate illness. It is, by definition, only the experience of direct touch that brings forth the natural chronic miasms.

Descriptive, experiential, phenomenological

The original definitions of the natural chronic miasms are a description of an actual, verifiable, clinical process. This process was seen first-hand. It includes observable events and real signs and symptoms of disease. The chronic miasms are real experienced disease processes. They are not a postulate or a generating symbol in a philosophical system that constructs archetypes or styles. They are not an explanation that reduces chronic disease to chance mechanisms of physics or physiology.

Natural chronic miasms are described, not explained. No moral judgments such as original sin or karma or “a limited and distorted consciousness”(30) are needed. The integral description of chronic miasms is a portrayal “not of underlying reality behind appearances but of the intensive depth of the phenomenon itself, ‘a seeing embedded in the fullness of phenomena, not a theory abstracted from the phenomena.’”(31)

The question of what is a miasm comes first; then comes the question of when is it a miasm. These questions are of primary importance to the actual homeopathic methodology. It is only later that the natural curiosity of mind asks why there are miasms and what are the mechanisms of miasms.

The student must actually read and study the original definitions of natural chronic miasms before the homeopathic community can move forward in a meaningful way. If homeopaths cannot even agree on definitions, then there is nothing to build upon.

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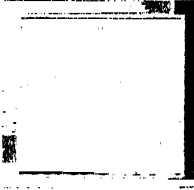
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