

THE KEYNOTE OR CHARACTERISTIC INDICATIONS OF THE MATERIA MEDICA

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Professor H.N. Guernsey, who first coined the apt word "Keynote" explains in the following article what exactly he meant, and how that "Keynote Prescription" really follows the master's advice of searching for peculiar, identifying and guiding symptoms, both in the patient *and in the remedy*.

It is the Keynote that made our vast Materia Medica workable and usable at the bedside.

Not one "Keynote Prescriber" prescribes on only one single symptom. Most of the masters insisted on at least three peculiar symptoms to guide them to prescription.

See what Dr. Boyce testifies about Dr. Hering; "I consulted Dr. Hering with reference to my life after making careful and critical examination, he invited me to his private study.... In the course of that investigation, he remarked to me, "Let us apply the triangular test, and if we find three important characteristic symptoms, pointing to one remedy, let me assure you that we can prescribe it with utmost certainty. I have tested its application in hundreds of cases, and when clearly defined, it seldom fails, to fulfill its mission."

We give a sample of the Guernsey's system with his study of Aconite. He continued his studies of other important remedies in the "Hahnemannian Monthly." They were, later published as "Guernsey's Keynotes" a wonderful book for studying Materia Medica.

N.B. But our method of potentizing and using the medicines makes them so powerful and versatile that no one can limit their description or scope, neither Guernsey, nor H.C. Allen nor Kent.

How can we explain the cures of serious. Acute Nephritis by "Common" Aconite of the "Domestic Chest"? Verily it is our great luck to possess such great tools.

Let us learn to use them.

—S. P. Koppikar.

I have been urged frequently, and by quite a number of my professional brethren, by letter, and otherwise, to publish what I consider to be characteristic symptoms or keynotes of our remedies. Judging, therefore, that it might be of some benefit to the profession, I partially yield to the flattering request, and propose to publish, from month to month, in the columns of the Hahnemannian Monthly, the more striking points or features of pathogeneses, which govern me—to a great extent—in the selection of the properly homoeopathic remedy. These I shall jot down from memory, as I sit, in moments of leisure, at my desk. I cannot hope to make a complete work, as there are, doubtless, many points that would come to me at the bed-side and in special cases, which memory will not bring to me as I may wish to write, and hence, I shall fail to transcribe them. I shall, at the same time, refrain, as far as possible, from repeating what has been already given as characteristics or key-notes of remedies, in my recent work on obstetrics.

When a characteristic symptom or key-note presents itself in a given case, it means that the whole case is to be studied with reference to the remedy which correspondingly has that symptom or condition. Not that the totality of the case is to be disregarded, but that the characteristic presented is a key or key-note to the remedy that is almost certain to exhibit, in its pathogenesis, the tout-ensemble of the given case. Still, there are cases of so much urgency, that if the key-note presents itself fully, we may venture to prescribe with a very great degree of certainty, upon that indication alone ; e.g. in a case of uterine hæmorrhage, if we observe that the patient is in a condition of great fearfulness—becomes desperate through fear—we might say *Aconite* is indicated, and prescribing it, we would find that the hæmorrhage ceases, the mental anguish is relieved, and all the disordered condition will be removed, inversely as it has appeared. I have made it a rule, upon observing a marked improvement in the key-note symptom or condition, or that it entirely passes away, to not repeat the remedy or make a new selection, but to quietly await for a greater or lesser period, the result.

I shall take up the remedies in alphabetical order, commencing with *Aconite*, and shall continue, if I receive any encouragement to do so until my small store is exhausted.

ACONITE

This is, probably, by far the most frequently indicated of all the remedies of the *Materia Medica*, for suddenly appearing and violent inflammations, particularly if occurring in cold weather.

It will also be found curative in all chronic affections, as catarrhs, coughs, dyspnoea, spitting of blood, pains in the chest, etc., if these can be distinctly traced as resulting from a chill in dry, cold air, as from being in a dry, cold room for some time, or from a long drive on a clear, cold day.

An important characteristic indication for this remedy is that the patient is manifestly and continuously in the influence of fear. He is afraid to go out, to go where there is any excitement or many people, or to cross a street. His life, in fact, rendered miserable by this all pervading fearfulness. The countenance exhibits strong and unmistakable expression of fear.

Vertigo on assuming an erect position. (Also *Opium* and *Glonoine*). If the patient sits up in bed, he immediately falls over in consequence of vertigo, and he is afraid to rise again lest the same trouble should recur.

Cramp, or sensation of pressure, at the root of the nose (glabellum) ; a source of much distress.

Sensation as if the hairs of the head were standing on end ; the scalp is sensitive to the touch.

Eyes are in a condition of irritation ; much inflamed and painful ; resulting from foreign bodies having got into them or from reflected light, as when walking in day-time over the snow.

Red face, with feeling as if it had grown larger.

Everything—except water—has a bitter taste. Water tastes naturally. Burning sensation extending from the mouth, throughout the entire extent of the oesophagus, to the stomach (also *Mer. corr. sub.*).

Cutting, lancinating, burning and tearing pains in the abdomen, with anguish and fear.

Incarcerated hernia with bitter taste, or bilicum vomiting.

Bilious diarrhoea of infants, with colic, which no position or circumstance relieves. The colic is removed, and the diarrhoea is speedily checked, even after a single dose.

Retention of urine. from cold, particularly in children, with much crying and restlessness. After a single dose, the distress is soon relieved, and the urine subsequently flows freely and naturally.

Aconite often restores the menses of plethoric women, after their suppression from any cause.

Constant, short and dry cough, with sensation as if suffocation would occur ; every inspiration seems to increase the difficulty.

Stitches in the chest, hindering respiration. He cannot breathe freely in consequence of a sensation as if the lungs would not expand. He frequently takes a deep respiration, in consequence of this, which, however, is rather unsatisfactory.

The patient fears death, and predicts the day of its occurrence. An erect posture causes deathly paleness of the face.

Aconite is indispensable in cases of scarlet fever, where there is dry skin and very great restlessness and distress ; the patient is frequently obliged to sit erect in bed, in consequence of dyspnoea. Here it is sometimes necessary to repeat the remedy, in water, every two or three hours.

[*Courtesy* : The Hahnemannian Monthly, 1868.]



ACONITE IN ACUTE NEPHRITIS WITH HAEMATURIA

(80) **Case I.** Joseph L., aet. two and half years ; face pale, febrile movement ; languid and fretful, something unusual for him. He was having a profuse diarrhoea of frequent watery stools, with very little pains or distress, for which he had *Merc. Dulc.* Urine scanty. Two days later there was marked anasarca, particularly of the face, hands and feet. Feverish, with thirst for small quantities. It was impossible to secure any of his urine for examination at this visit, but that which was examined the next day had an abundance of albumin. At the fifth visit—eight days from the first visit—the urine was the colour of blood, and microscopical examination confirmed the appearance. The anasarca had steadily increased, and it was with difficulty that he could stand or walk. The blood was intimately mixed up with urine, no clots. *Tereb.*, *Sec. Cor.* and *Dig.*, as seemingly indicated, had no effect. The anasarca of the face and eyelids rendered him nearly blind. His whole body was bloated almost beyond recognition. There was no diminution in the quantity of blood or the amount of albumin in the urine, and he was apparently near dissolution. This was his condition on the fifteenth day of his sickness, when *Aconite 3x* was prescribed to be taken hourly when awake. At the next morning visit there was a marked improvement in the appearance of the urine. At the end of forty-eight hours there was hardly a trace of blood and a great improvement in the anasarca. He took *Aconite* four days longer, at intervals of three or four hours, and had no further trouble from the haematuria or anasarca, and was discharged cured on the seventh day of the *Aconite* treatment. There was no change in his diet, neither was there any adjuvant treatment.

(81) **Case II.** Mr. W., aet, about forty, of stout habit, rode thirty-five miles over rough country roads one windy day in April. The following day he was chilly and had a feeling of malaise and ill-defined distress in the epigastric region, with some nausea, but set out on his homeward ride. The epigastric distress increased followed by a severe chill, vomiting and intense pain, which compelled him to call at a physicians for relief. The medicine had no effect, although taken at frequent intervals. He arrived home late in the evening and was seen soon afterward. His flesh was cold and covered with a cold perspiration ; there was considerable nausea, and intense pain in the whole epigastric region. The second night after he passed nearly a quart of very bloody urine. There were no clots, and the urine and blood were thoroughly mingled. There was considerable fever, *Aconite 3x* was prescribed, to be given at frequent intervals. There was a decrease in the quantity of blood before evening, and by the evening of the next day all traces of blood had disappeared from the urine, nor was there any return of the same during the remainder of his sickness. (Courtesy : NORTH AMER. JOUR. OF HOMOEOPATHY.)

(83) **Lachnanthes.** Dr. Ghosh, of Calcutta, relates a case which seemed to be phthisical, in which after the failure of iodide of Arsenic, he was led by the accompanying stiffness of the neck to give *Lachnathes*. The *3x dil*, did nothing, but under three drop doses of the mother tincture, improvement ensued in a week and went on to complete recovery. He has since used it in three similar cases with good results. He gave the remedy also in eight cases of stiff-neck. In three only did it prove curative, and in these there was concomitant cough, without chest symptoms. All three patients, moreover, perspired in hands and feet freely, and their stiff neck and throat cough (with burning of the palms and soles) came on or increased whenever such perspiration was checked.

[*Courtesy : Homoeopathic Recorder, June 1893.*]

