

## ANTERIOR POLIOMYELITIS

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Where from the very beginning of the initial fever, the indicated homoeopathic remedy has been given, the whole aspect of anterior poliomyelitis has been very much modified and often the disease has been nipped in the bud. The treatment can be started at once without waiting for a diagnosis of the name of the disease, which in the case of poliomyelitis can unfortunately be done only when the paralysis actually manifests itself and *the stage for prevention is already over*. Thus Homoeopathy has a distinct advantage in the treatment of this much dreaded disease.

On the whole, the remedies most commonly indicated in the early stages may be from amongst : *Acon* ; *Apis* ; *Ars* ; *Bell* ; *Bry* ; *Caust* ; *Cocculus* ; *Dulc* ; *Gelsemium* ; *Lach* ; *Lathyr. sat.* ; *Merc sol.* ; *Natrum mur.* ; *Natr. sulph.* ; *Nux vom.* ; *Opium* ; *Phos.* ; *Rhus tox.* ; *Sulphur*.

*Aconite*, *Belladonna* and *Gelsemium* are most likely to be the indicated remedies for the first stage in 95 per cent of cases. The physician seldom sees the patient early enough to be able to use *Aconite*, but if the sudden onset, rapid pulse, characteristic restlessness, anxiety and thirst be present, *Aconite* would do a lot to cut down the violence of the attack.

**Belladonna.** If the onset be rapid, with high fever, throbbing carotids, red face and eyes, with *dryness* of eyes, nose and throat (opposite of *Gels.*), severe throbbing headache, with aggravation of the patient's condition by touch, jar, motion and noise, it does not take long to discover that *Belladonna* is the simillimum,

**Gelsemium.** According to Dr. George Royal, is the leading remedy for this disease, having a marked affinity for the cells of the motor nerves, producing first congestion, and later destruction, causing paralysis. It nicely covers the symptoms of flushed face, drowsiness, sneezing, irritation in nose and throat, and watery discharge from the nose, in addition to the high fever. The onset is not as sudden as with *Aconite* and *Belladonna*.

**Rhus Tox.** When getting wet or exposure to dampness is the exciting cause. It is a much praised remedy for paralysis of the lower extremities in acute as well as chronic cases. Marked pain and restlessness would be important indications.

**Dulcamara.** It is in many respects similar to *Rhus tox.*, though not so suitable in chronic cases.

*When the Disease has passed the acute stage, and ultimated in chronic paralysis,* the remedies to be specially looked into are : *Alum.* ; *Alum-m* ; *Baryta carb.* ; *Baryta mur.* ; *Calc.* ; *Caut.* ; *Latgyr. sat.* ; *Natr. carb.* ; *Natr. mur.* ; *Phos.* ; *Pic-ac.* ; *Plumb.* ; *Silic.*, *Sulph.*

**Plumbum** has been very much extolled for the later stages, and indications for it should be closely examined. The symptomatology of *Plumbum* strikingly reveals a general paralytic state, preceded by sluggishness and paresis ; the symptoms develop slowly and insidiously. Progressive muscular atrophy ; progressive paralysis ; paralysed or painful parts wither. There is paralysis of both extensors and flexors, but it usually begins with the extensors, giving us the wrist drop. *Plumbum* has an elective affinity for the upper extremities, and Bayes has gone so far as to say that he has not seen any beneficial results from it in paralysis of lower extremities. Paralysis may be preceded by tremor. Constipation with hard lumpy stools may be a high ranking symptom. Retention or suppression of urine may be present.

**Phosphorus.** If and when the symptoms agree, should come in for consideration, as it has an elective affinity for the brain and nerves and cause destruction (fatty degeneration) of those tissues.

**Alumina** has paralysis of the lower extremities, especially of *spinal origin*. Constipation requiring much straining to pass even a soft stool ; formication of limbs ; patient brushes his face as if trying to remove a cobweb.

**Lathyrus Sativa**, presenting as it does a most striking picture of typical infantile paralysis "symptomatically, pathologically, and clinically", should be considered to be a most effective *prophylactic* against the disease. Dr. A.H. Grimmer claims that clinical application of this remedy as a prophylactic in many thousand cases over a period of thirty years in many epidemics has registered one hundred per cent success. For the purposes of immunizing he suggests a dose of the remedy in 30th or 200th potency given about once every three weeks during an epidemic. *Curatively*, its indications are : Increased reflexes ; tremulous tottering gait ; spastic paralysis; excessive rigidity of legs; cannot extend or cross legs when sitting ; knees knock against each other when walking ; toes do not leave the floor, heels do not touch floor ; tips of fingers numb ; urination frequent, involuntary if he does not hurry up.

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