



Acute Prescribing in Children

ABSTRACT: Often parents come to us with their restless and aggressive children. Especially in these consultations, our observation skills are very important to come to the right remedy. We have to listen to the parents but we have to see and feel for ourselves what the main theme for this child is.

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Dr Hahnemann, in his Organon, mentions that in every case of a disease the change in disposition has to be noted very accurately by the observing physician. This is because every disease brings in some or other change or deviation in the normal mental of the patient. Hence careful observation and noting down the changes in disposition are of utmost importance in Homoeopathic practice when treating children with acute diseases.

We will look at the most prescribed remedies for children in Homoeopathy. We will not give importance to the label of the diseases whether it is malaria, tonsillitis or for that matter any disease.

BELLADONNA: "AN ANGEL WHEN WELL AND A DEVIL WHEN SICK"

The mental symptoms of *Bell* are delightful to study, but dreadful to look upon. Excitement and Violence run all through the mental symptoms. There is no passive delirium in *Bell*. He is wild: striking, biting, tearing things; doing unusual, strange things; doing unexpected things. He is in a state of excitability. Remember the violence, and with it, if you go to the bedside where there is this violent delirium, keep in mind the aggravation from heat, redness and burning.

Full of imaginations. Sees ghosts and spirits and specters and wild things. Again, these mental states take the form of acute mania, the patient will bite the spoon; will bark like a dog; will do all sorts of violent things; even jump out of the win-

dow. He has to be restrained, put in a strait-jacket. The face is red, the skin is hot, and the patient, at times says that he burns all over or that the head burns, and the head is very hot. During all this time the feet are cold. Head hot, feet cold or feet and hands cold as ice. It seems all the blood is gushing to the head. All sorts of delusions and hallucinations are mingled with the acute mania; ghosts; horrid monsters; strange things and deformed subjects. Fear of imaginary things and wants to run away. In the delirium of *Bell*, he wants to jump out of the window, wants to run and get away from his attendants. He thinks they are doing him injury. Throughout the acute mania and delirious state, all the manifestations partake of violence. Destructiveness. The *Bell* patient in the most acute state must be watched, controlled, handled and sometimes tied. In the text it describes these states as "rage, fury." He wants to do violence. Moaning. Instead of eating, bit wooden spoon in two, gnawed at a plate and growled and barked like a dog. A boy violently sick ran around the room laughing immoderately. He has an insane laughter. A loud, boisterous laughter. "A piece of bread, he took to be a stone and threw far from him. He turns and rolls in bed in a perfect rage. Aversion to noise and company." Aversion to light; is better in the dark.

The main theme of *Bell* children is hyperesthesia at all levels. These children are active like *Veratrum* or *Tarentula*. They like fighting, kicking, striking,

biting, not knowing their own strength and power. It is not out of maliciousness, but just being over-active and liking these games. They look plethoric with red faces. Besides fighting, they like to clown making all kinds of strange noises. They like to hug and can also be very sweet. They are very obstinate, going their own way. They do everything with a lot of power, hugging, fighting, talking etc. They like to hide or escape especially when their parents are shopping. They run around stamping their feet and touching everything. Not one minute of calmness or quietness.

STRAMONIUM: "AN EARTHQUAKE IN ITS VIOLENCE."
When considering *Stram* the idea of violence comes into mind. One cannot look upon a patient who needs *Stram* or who has been poisoned with it, without wondering at the tremendous turmoil, the great upheaval taking place in mind and body. Full of excitement, rage; everything is tumultuous, violent; the face looks wild, anxious, fearful; the eyes are fixed on a certain object; face flushed, hot raging fever with hot head and cold extremities, violent delirium. In his anxiety he often turns away from the light, wants it dark, is aggravated especially if the light is bright. High fever with delirium; the heat is so intense that it may be mistaken for *Bell*, but it is usually a continued fever, only at times remittent, while the intense fever of *Bell* is remittent always.

The mind is in an uproar, cursing, tearing the clothes, violent speech, frenzy, erotomania, exposing of the person. It is useful in mania that has existed for some time; attacks of mania coming on in paroxysms, appearing more or less suddenly, so that a single attack would look like *Bell* but the history differentiates. *Bell* would hardly be more than a palliative in the first attack and the second exhibition of it would do nothing.

When the delirium is not on, the patient has the appearance of great suffering, forehead wrinkled, face pallid, sickly, haggard. In head-pains this anxious look, indicative of intense suffering from meningeal involvement.

"Delirium bland, murmuring; violent, foolish, joy-

ful, loquacious, incoherent chattering with open eyes; vivid; merry with spasmodic laughter; furious, raving, wild; attempts to stab and bite; with queerest notions; with sexual excitement; fear as if a dog were attacking him."

He sees animals, ghosts, angels, departed spirits, devils, and knows they are not real but later he is confident of it. He has these hallucinations especially in the dark. At times he has an aversion to a bright light which is painful and again he must sit and look into an open fire, but this may cause cough and other symptoms.

"Sings amorous songs and utters obscene speech. Crazy with distress, jumps out of bed, acts as if the bed were being drawn from under him. Screams until he is hoarse or loses his voice. Screeches and screams day and night with fever, with forms of mania. Hasty, hurries with all his might if he wants to go to another place." Violent laughter with sardonic expression on his face.

"Child awakens terrified, knows no one, screams with fright, clings to those near."

TARENTULA: "FOXY, CRAFTY AND CUNNING"

Great irritability. In the hysterical symptoms she is better from music. Her motions are ludicrous and she is even lascivious in her conduct. Great excitement from music; she sings until she falls with exhaustion. Fox-like cunning, deceitful, and destructiveness. Paroxysms of insanity with restlessness of legs and threatening words. When questioned she does not answer. Frequently imagines that she has been insulted. Dementia with great sadness. Excitement with singing, dancing and weeping. She sees monsters, animals, faces, insects and ghosts. She sees strangers in the room.

Tarentula patients feign all sorts of sickness, especially fainting. They not only imagine themselves sick, but they pretend to be sick when they are not. Aversion to red, green and black and all striking colors. She pulls her own hair and presses her hands upon her head. Constantly complaining and threatening; threatens her nurse and her attendants; she strikes her head with her hands; she strikes her body; strikes her attendants and her



best friends. Violence is a strong feature of the remedy. Violence with anger. Tears his clothing. Consolation causes weeping.

TUBERCULINUM: "DESIRE FOR CHANGE"

Sensitive to music; every trifle irritates; Fits of violent temper; wants to fight; throws anything at anyone even without a cause. Dissatisfied; always wants a change, wants to travel; does not want to remain in one place long, wants to do something different or even to find a new doctor, weary of life. Aversion to mental work. Reckless. Fear of animals; of dogs. Whines and complaints with very little ailment. Desire to use foul language, curse and swear. Changing moods. Confusion everything in the room seems strange. Nocturnal hallucinations, awakes frightened. Children awake screaming, with restlessness. Anxious. Hopeless. Loquacious; during fever. Contradictory; mania and melancholia; insomnia and stupor.

HYOSCYAMUS : THE LASCIVIOUS ONE

The mental state is really the greatest part of *Hyoscyamus*. Talking, passive delirium, imaginations, illusions, hallucinations; talking, rousing up and talking with a delirious manifestation and then stupor. These alternate through complaints. And during sleep talking, crying out in sleep; but, talking and mumbling and soliloquizing. Then, there are wakeful periods, in which there are delirium and illusions and hallucinations all mingled together. Sometimes the patient is in a state of hallucination and the next minute in a state of illusion. Suspicion runs through acute sickness; it runs through the mania in insanity. Suspicion that someone is going to poison him; that someone is untrue to him. Suspicious of everybody. "Refuses to take medicine because it is poisoned." "Imagines that he is pursued, that the people have all turned against him, that his friends are no longer his friends. He carries on conversations with imaginary people." Talks as if he were talking to himself, but he really imagines that some one is sitting by his side, to whom he is talking. Sometimes he talks to dead folks; recalls past events with those that have departed. Calls up a dead sister, or wife,

or husband, and enters into conversation just as if the person were present.

"Thinks he is in the wrong place. Thinks he is not at home. Sees persons who are not and who have not been present. Fears being left alone. Fears being poisoned or being bitten." These phases sometimes may come from that suspicion that was spoken of; He imagines these things are to take place and hence he is suspicious of all his friends.

There is another phase running through the insanity, which is salacity, and it is violent at times, so violent that nobody but the old doctor can form any conception of the awfulness and the dreadfulfulness of its effects upon those in the room. With a woman, a wife or a daughter, this state of salacity is manifested in this way: she exposes her genitals to the view of everybody coming into the room. There are instances where in violent attacks of salacity a woman has gathered her clothing up under her arms to expose her genitals to the doctor as he walked into the room.

"He is violent and beats people. Strikes and bites. Sings constantly and talks hastily. Erotic mania, accompanied by jealousy. Lascivious mania. Sings amorous songs. Lies in bed naked, or wrapped in skin during summer heat." Not because he is cold, but because of a fancy. Complaints involving any of these mental phases may come on in a young woman from disappointed affections, from coming to the conclusion that the young man in whom she has reposed her confidence has become wholly unworthy of her. It drives her insane, and she may take on any of these phases.

CINA AND CHAM: THE TOUCHY CHILD AND THE CANNOT BEAR IT CHILD

I think the outstanding mental distinction between the *Cham* child and the *Cina* child is that in *Cina* you have got a degree of obstinacy that you never meet with in the *Cham*. The *Cham* kid is always unstable; the *Cina* child can be obstinate as mule. I think that is the main mental distinction.

The next distinguishing thing about them is that both dislike to be handled, they both resent interference, but in the *Cham* it is much more mental

resentment, whereas the *Cina* child is definitely tender to touch. You will very often find that you get the same description of the two, that they will yell when you handle them, but you find that once you get over the preliminary discomfort for handling in the *Cina* children they are quite peaceful, they allow you to carry them about, it will quiet them down; where as in *Cham* they are wanting distraction all the time, if you stop walking about with them they are likely to strike at you. They are always wanting to be doing something new. You do not get that reaction in the *Cina*. But the *Cina* kid will want you to go on carrying it; in other words, the steady, passive motion does soothe them.

Then there is another distinguishing point in *Cina* which you do not get in *Cham*; the *Cina* children are very apt to be sick and so are the *Cham* ones, but you will commonly find that in the *Cina* children after they have vomited and almost immediately after, they are hungry. The *Cina* children cry out for more food immediately after a meal. And in the *Cina* child you are very likely to get a story of nightmares, night terrors, if the child had a late meal.

Then, another thing that will help you distinguish between *Cham* and *Cina* is their diarrhoeic upsets. They both get diarrhoea. The typical *Cham* green stool is noticeably absent in *Cina*. The typical *Cina* stool is white -a very white, watery stool. There is one constant characteristic about the *Cina* child, both in digestive upsets and others, and that is that

it gets relief by turning over on to its tummy. If being carried, it will turn over the nurses arm so as to get pressure on its tummy; if it is restless at night, again it turns over on to the abdomen and is at peace.

Then there is another thing that is worth remembering about the *Cina* children is that they all have a hyperaesthesia of the head, the head is sensitive to jarring, with a hyperaesthesia of scalp. So that if you are ever want to soothe a *Cina* child, don't go and stroke its hair, otherwise you will know that you have got a *Cina* kid!

There are pretty definite distinguishing points between *Cina* and *Cham* and you should not have to try one and then the other.

So we see that little Johnnies and Suzzies come to us with a variety of mental symptoms when their presenting complaints are physical in nature. Hahnemann has advised us to begin with a mission in mind to cure the sick, after which he tells us that the medicines we use should bring about the cure in rapid, gentle and permanent manner. He exhorts us to pursue and practice Homoeopathy only after gaining knowledge of the diseases, medicine and in application of it. Lastly he advices us to be free from prejudice, tactful, circumspect, and sincere in tracing the picture of the disease.

With such an excellent teacher we Dr Hahnemann, I am sure that we homoeopaths will never fail in treating our children and freeing them from the jaws of any disease.

Answers of Acute Prescribing Cases... from page 8

Rx: *Gelsemium* 200 QDS >³ in 4 days

Rx: *Acid-phos* 200 QDS: >³ in 3 days

Rx: *Aethusa* 200 TDS: >³ in 5 days

Rx: *Carb-veg* 200 TDS: >³ in 2 days

Rx: *Nux-vomica* 200 QDS >³ in 1 day

Rx: *Rumex* 200 QDS: >³ in 5 days

Rx: *China* 200 TDS: >³ in 7 days

Rx: *Ratanhia* 200 QDS: >³ in 3 days

Rx: *Myristica* 200 QDS >³ in days

Rx: *Sabadilla* 200 QDS >³ in 3 days