

Medorrhinum-animalcule*

INTRODUCTION

Medorrhinum, an attenuated preparation from the gonococcal discharge, which develops due to gonococci, is a far-reaching remedy of multi-miasmatic type often missed in practice. The statements: 'Nosode is not always a nosode' and 'it has in its stock, beyond the ken of anti-miasmatic and intercurrent usage, acute and chronic dimensions', aptly apply to *Medo*.

A nosode is a blend of disease-potential and host-response; hence, it represents the dynamic potential of germ, host and their inter-action to become the powerful and complex healing force to meet the inveterate morbid conditions. *Medo* is characteristic in a way that host-response is almost minimally represented in gonococcal pus from which *Medo* is prepared. Two aspects need to be mentioned here:

1. Congenital immunity to gonococcus does not exist in a human. A suffered disease also does not produce true immunity and a person may therefore be repeatedly infected with gonorrhoea. Different antibodies (complement-fixing, agglutinins, etc) appear quite rapidly in the blood in gonorrhoea, but they do not prevent complications or repeated infection. These antibodies evidently have no defense function and are 'witnesses' to an existing or previously existing infection (Ilyin).

2. Phagocytic immunity also fails to develop in gonorrhoea. The purulent secretions of patients suffering from acute gonorrhoea are usually found to contain many gonococci arranged in clusters both inside and outside the polynuclear neutrophils. Phagocytosis, however, is incomplete. The gonococci do not die in the phagocytes, but, on the contrary, they multiply. Such phagocytosis, therefore, does not protect the body from in-

fection, but protects the causative agents from the effect of specific immunity humoral factors (anti-bodies) and the natural resistance of the body.

SOURCE OF INFORMATION VIS-À-VIS MEDORRHINUM

Source of information is of paramount importance in perceiving essence of drug and *Medo* is no exception.

1. Neisser's gonococcus, which causes gonorrhoea, became adapted as a parasite mainly on mucous membranes covered with columnar epithelium.
2. The gonorrheal process is usually restricted to the urogenital organs and sometimes affects rectum and occasionally the conjunctiva. Only very rarely the infection acquires a generalized character.
3. The word 'gonorrhoea' comes from GK: *gone* seed, *rhot* flow and Galen (2nd century, A D) suggested this name in view of inflammation attended with discharge of pus.
4. According to WHO experts, no less than 150 million people contract gonorrhoea every year. In some developed countries (such as USA, France, Sweden and others) gonorrhoea incidence is second only to that of influenza among infectious diseases (the figures may be less today).
5. The clinical picture of gonorrhoea had undergone marked changes (pathomorphosis) in terms of increase in average duration of the incubation period, a mitigation of the inflammatory reaction and other signs (Ilyin), after introduction of antibiotics.
6. Gonococci come from the group of gram-negative diplococci. They are lentil-shaped about 1.5 mm long and 0.75 mm wide, arranged in pairs with their concave surfaces facing each other. Gonococci change their morphological and tinctorial properties under the effect of unfavorable factors to the point of becoming L-shaped.

* Hahnemann, very early in his career, coined this term for 'chronic miasms disease-parasites.'

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7. Like other causative agents of venereal diseases, the gonococci are strictly human parasites. Outside the human body, they perish rapidly.
8. In pus, gonococci retain their viability and pathogenicity only till the pathological substrate dries.
9. Since gonococci are extremely unstable outside the human body, infection usually occurs by sexual route.
10. Gonococci very rarely multiply in the bloodstream causing the development of sepsis.
11. In chronic inflammation the columnar epithelium sometimes transforms to stratified squamous epithelium with Keratinization. The infiltrate of lymphoid elements penetrates deeper, acquires a restricted local characters and may be replaced by cicatricial tissue. This information allows us to peep into homoeopathic perspective of *Medo*.

The Gonorrhoea is not a 'dry' infection and *Medo* has inflammation that is catarrhal in nature. The syctic stigmata that is preponderant in *Medo*, amply represents the behavior of gonococci and gonorrhoeal process. The gonorrhoeal process is restricted to uro-genital organs and in *Medo*, under the syctic dominance, one gets pathologies restricted to focal organs. Although pathologies are advanced, the person may remain plump and well nourished despite pretty long suffering, changing the morphological/ pathomorphological or tinctorial properties and becoming L-shaped on the part of the organisms, as also retaining viability and pathogenicity in pus reflect the survival instinct and the struggle. *Medo*'s viability is manifested well through its passionate and vivacious (we will deal with it later on) characters and through its plump constitution. The character of gonococci that they rarely multiply in the bloodstream and rarely cause sepsis typifies the non-suppurative syctic inflammations and comparatively little action over blood. Gonococci are human parasites. They have affinity for human species and they penetrate human body chiefly through the sexual route. *Medo* is the representative of the syctic miasm, which has 'prolif-

eration', 'hyperplasia', 'overgrowth', and 'exuberance' as the key words. And all these pathologies thrive on the vital energy of the system. Gonococci, *Medo* and sexual route then become the inter-link to explore the drug, as the drug is prepared from a sexually transmitted material.

SEXUALITY

Sexual energy is one of the most important vital energy and in *Medo* we get early sexual awakening, precocity and early indulgence in sex. The animation, the romanticism, the vivacity allows the system to develop sexual relations without any barrier. The following rubrics demonstrate the sexuality in *Medo*:

- Homosexuality, men—*Medo*
- Homosexuality, women—*Medo*
- Lasciviousness, lustful—*Medo*
- Nymphomania—*Medo*
- Obscene—*Medo*
- Rape, ailments from—*Medo*
- Satyriasis—*Medo*
- Sexual abuse, ailments from—*Medo*
- Shameless—*Medo*
- Shameless, children, in—*Medo*
- Masturbation, disposition to—*Medo*
- Masturbation, children to—*Medo*
- Sexual desire, excessive—*Medo*
- Sexual desire, uncontrollable—*Medo*
- Sexual desire, insatiable—*Medo*
- Sexual desire, perverted—*Medo*
- Sexual desire, violent—*Medo*

Owing to anticipatory anxiety and restless attributes, *Medo* cannot enjoy the sexual act in a patient way. There is little foreplay, more hurry and finish! *Medo*, hence, is discontented and goes in for multiple partners. Regular visitors to prostitutes are often *Medo*. *Medo* is always better after discharges (like *Lach* who is also sexually oriented). Being passionate, he cannot keep off his sexual passion for long and go forward. They are able to impress upon others by virtue of their plump make-

up, high-flown language and a sort of heroic behavior! *Medo* girls are sensual, attractive and their body gestures often reflect the sexuality.

Is *Medo* representative of the confusion a male develops (and a woman is spared) owing to the single urethral tube and a single opening through which a man has to continue his journey for normal physiological excretion and for quenching sensual appetite? *Medo* does represent this confusion through shifting for the latter, through development of gonorrhoea and through the consequences of suppression of gonorrhoea.

EXUBERANT

The sycoptic stigmata produce the exuberance at mind and physical level. Merriment produces an attraction to the outer world and the motive is to live life fully (vivacious). Every remedy in *Materia Medica* is like a living, vibrating individual that represents aches and pains, bits and pieces, beer and skittles, the ins and outs and the thrills and spills and every remedy has two zones.

1. The normal zone where the personality traits are flexible, adaptive and creative and
2. The abnormal zone where the personality traits are inflexible, maladaptive and hence creative problems therefrom. Traits are "basic" to each individual, but understanding that it is only the extremes of personality that make a trait problematical and thus a "disorder" is essential. *Materia Medica* is a record of "pothos" and hence, it contains "disordered" state of the mind.

Medo's exuberance should be understood from the normal zone in that they are intuitive, artistic, curious, imaginative and freethinking. When taken to extremes, *Medo* moves into schizotypal personality disorder. He becomes an intuitive filled with magical thinking traits such as clairvoyance with the resulting social isolation (misanthropy), when, he thinks that he is odd and unusual. He becomes oversensitive to real or imagined criticism (sensitive, reprimands to, touchy, easily upset by a harsh word).

Medo often becomes an entertainer, actor, etc and be-

comes heavily involved in his relationships. He seizes the opportunity to become dramatic and seductive using emotional sensitivity to respond in an exciting manner. When driven to extremes, *Medo* becomes overly dramatic. This disturbs his IPR making him introvert, self-accusing, remorse and despondent. *Medo* is himself rude with others and at the same time sensitive to the rudeness of others.

Exuberance in *Medo* makes it 'materialistic'. 'Id' has greater dominance and *Medo* cannot go for platonic love (*Staph*). He has penchant for momentary excitements, fleeting adventures and shortsighted hedonism. Dilettante by trait, he falls in and out of love easily. He believes in "life, liberty and the pursuit of joy", chiefly his own! He demands a great deal, but surrenders little, particularly when it comes to his all-important freedom (selfish). He looks at life through rose-colored glasses, over indulging in pleasure principle. Apparently *Medo* gives the feeling of being sociable, confident, vivacious and self motivated. But careful interrogation allows a homoeopathic physician to know the innermost feelings and traits. When driven to extremes, *Medo* moves towards the 'narcissistic' personality (love, of her own sex with).

Medo needs to be compared with *Merc*. *Merc* has the 'use and throw' attitude. *Merc* has pathological detachment to family; no anxiety of conscience and no guilt. *Medo* on the other hand, develops guilty feelings and remorse. *Merc* is a real macho.

IMBALANCED

Medo cannot maintain a neutral state of mind. He is basically passionate and 'emotional intelligence' is lacking. He wants to be an adventurer, but he does not have that organizational and mature mind. Emotional push makes him hurried, harried and crazy. *Medo* actually suffers from 'chronic hurry sickness'. He has delusion that time passes too slowly and to get over this delusion, he jerks about like a water bug on a pond. When he eats, he gulps food like a hound dog. He finishes his entire meal before his companions are

through with the appetizer. The rapidity extends to all fields- thinking, moving, walking, and decision-making and also performing several things at once. *Medo* has a 'polyphasic' behavior and he cannot concentrate on doing one thing at a time. This results in 'confusion'. He is unable to finish one job in an efficient manner. This agitates him. Fussily, he bustles and makes mistakes to land into lack of confidence, despondence and frustration.

Medo presents the polarity, two opposing attributes, which pull the ego functioning to develop stress and consequent psychic and somatic manifestations.

POLAR OPPOSITES

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| 1. Absent-minded | 1. Active-minded |
| 2. High-strung | 2. Unstrung |
| 3. Timid | 3. Courageous |
| 4. Talkative | 4. Indisposed to talk |
| 5. Weakness | 5. Active memory |
| 6. Dull in morning | 6. Bright in evening |
| 7. Cross, depressed,
or prostrated during day | 7. Exhilarated and playful
at night |
| 8. Rudeness | 8. Sensitive to rudeness of
others |
| 9. Introversion | 9. Extroversion |
| 10. Precocious | 10. Backward |
| 11. Cruelty to animals | 11. Love of animals |
| 12. Hurried | 12. Procastination |
| 13. Self-reproach | 13. Reproaches others |
| 14. Fear of darkness | 14. Better with the onset of
darkness |
| 15. Anticipation of death | 15. Even if grave, no fear of
death |
| 16. Vivacity | 16. Abject pessimism |

Due to these polar opposites, *Medo* develops problem both with time and space and consequently his identity. *Medo* puts in his vibrant energy for the accomplishment of task(s), but rather than performance as the theme, hurry becomes the motive. He becomes anxious and panicky. *Arg-n* shares a similar pattern with *Medo*. But *Medo* is clairvoyant and anticipates the fu-

ture events, though he lacks the capacity to control. *Arg-n* is non-clairvoyant, anxious, panicky and busy fruitlessly. Procastination is more pronounced in *Medo* than in *Arg-n*. Confusion hovers over both. Waiting is indeed a torture for both!

Medo feels a constant sense of urgency and is impatient with the pace at which things occur. *Medo*'s experience of impatience is often the result of not understanding the time it takes to complete a task. He works under unrealistic, self-imposed time limits and becomes abrupt, curt, censorious, quarrelling, wild and even cruel. He doesn't understand that 'life is a journey and not a destination!'

LIFE AS A DREAM

Medo begins the journey of life as an intellectual, vivacious one who wants to grab the joy of life. He rushes in life, physically, emotionally and mentally. He travels from a thrill-seeking personality to an anxious-reactive personality to develop Type A personality to land into varied psychic and physical manifestations. He has behaved crazy throughout and life now becomes boredom. He develops loss of adaptability and fear of insanity. Memory doesn't stand by him, he continues making mistakes. There are no close friends. He has behaved in a suspicious and mistrustful way and others around him. As a counter-action, he develops misanthropy: a strong delusion 'someone is walking behind him and when he turns around there is no one or sees faces in the dark which are not really present or that everything seems unreal.' This perception of unreality makes a homoeopathic physician aware of the magnitude of psychopathological state possessed by *Medo*. *Medo* represents the exuberant dancing of life, in an agile, nimble and 'out of control' way and heavily suffers from dispersed state of the mind.

REFERENCES

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