

GENETICS AND MIASMS¹

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In the annals of medical science, other than Homoeopathy³, no other system was so bitterly attacked, on each steps of its development, from within and outside. People outside the homoeopathic society attacked it to nip it in the bud to resist the danger of their very existence.

Hahnemann's⁴ miasmatic

theory⁵ (i.e., Doctrine of Chronic Diseases) had to face the same hostility, more so, from the homoeopathic society itself, by denouncing it, to deviate the conscientious followers of the truth, to annihilate the beauty and supremacy of Homoeopathy in the treatment of chronic diseases arising from the three fundamental miasms - Psora, Sycosis and Syphi-

lis. But it was a piece of good luck that Hahnemann received his recognition during his life time due to his dauntless fighting zeal and versatile genius.

On the other hand the Father of Genetic theory Johann Mendel⁶ received his recognition after 16 years of his death⁷ (1900). The general principle of heredity,

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2. Address of Contact : Doltala, Baruipur - 743302.
3. The term *Homoeopathy* was derived from the Latin word *homoeos* and *pathos*.
4. Hahnemann was born on 10.4.1755 and died on 2.7.1843.
5. Hahnemann was the first to conceive the miasmatic theory as early as 1818.
6. Johann Mendel was born in Heinzendorff in Moravia, then a part of Austria, now Czechoslovakia on 22 July, 1822; died on 6 January, 1884. In 1843, he adopted the name as Gregor being monk (for economic reasons). He devoted whole heartedly in plant breeding experiments and cross breeding of various races of bees.
7. He submitted his papers at the *Transactions* of the Natural History Society of Brunn.

as discovered by him in garden peas as expressed through the theory of inheritance, are applicable to all living creatures, including man.

In 1909, a Danish botanist, Johannsen coined the word *gene*. In 1903, Chromosome theory of heredity was advocated by Walter S. Sutton and Theodor Boveri independently. In 1905, Castle carried on works on genetics on insects⁸ in laboratory. In 1933, Thomas Hunt Morgan was awarded Nobel Prize for his work on *Drosophila*.

There were vague theories⁹ till later half of the seventeenth century when a Dutch scientist, Regnier de Graaf recognised that union of egg and sperm is essential for conception. Maupertuis¹⁰ studied the inheritance of albinism¹¹ and polydactyly¹², in eighteenth century. He firmly believed that both parents contributed equally to make-up of their offspring. In 1803, Otto contributed

that haemophilia was transmitted by healthy carrier females to their sons¹³ but never by an affected father to his son i.e., a sex-linked disease.

Finally, in 1814, Joseph Adams¹⁴ expressed his views distinguishing the *familial* (recessive) from *hereditary* (dominant disorder and emphasised the interaction between hereditary susceptibility and precipitating environmental factors with a possibility of genetic heterogeneity.

Charles Darwin concluded that the progeny of cross between unrelated organisms (outbreeding) were more vigorous than the progeny of cross between related organisms (inbreeding).

Based on the above studies it can be concluded that the knowledge of human genetics is too rudimentary. It is very clear from the facts that, since identical twins have the same genetic constitution, yet they differ in all sphere

of life i.e., on their individuality.

William Bateson coined the term *genetics* and introduced the terms *homozygote*, *heterozygote* and *allele*.

Sir Archibald Garrod suggested, due to an *inborn error of metabolism* inheritance of alkaptonuria¹⁵ occurs which gives rise to biochemical genetics. Karl Landsteiner's discovery of ABO blood group gave birth to blood group genetics and so on.

Finally, old school of medicine says, genetic factors are related to so many diseases but unfortunately it is impossible for them to explain or correlate those findings by saying - Unifactorial or multifactorial inheritance is probably involved in the aetiology of many diseases but the picture is almost complicated by environmental factors.

We, the Homoeopaths know that people residing in the

8. Fruit fly *Drosophila*.

9. The Father of Medical Science, Aristotle, in the third century B.C. suggested that male semen originated from the blood and possessed the ability to give life to embryo which was formed in the uterus by the coagulation of menstrual blood.

10. Pierre Louis Moreau de Maupertuis, a naturalist, was born in France in 1698.

11. Lack of pigmentation of the hair and skin.

12. Extra fingers.

13. Female babies never exhibit symptoms of haemophilia but they get ready to transmit the same disease to their sons.

14. An apothecary-physician in London, published his views through a book *A Treatise on the supposed hereditary properties of diseases*, in 1814.

15. Dark coloured urine, generally observed in infancy, due to presence of homogonistic acid, which may lead to arthritis in later part of life.

same environment, even the twins originating from the same genes, differ in their reaction to that very environment depending upon susceptibility of the respective person, modified by the miasmatic background of the patient.

Here Hahnemann's miasmatic concepts, evolved after observing the treatment then known to him, as homoeopathy, failed to restore the patients suffering from chronic diseases; surpassed all concepts regarding diseases then prevailing in the medical science.

It is *reverified* not only by the Stalwarts of Homoeopathy but also persons of average calibre like ourselves by *faithfully implementing the basic principles of Homoeopathy.*

Modern scientists have derived various methods for prenatal diagnosis¹⁶ of genetic diseases to avert the catastrophe but unfortunately, as a physician, to fetch our over-zeal for diagnosing a case, we can not take the risk of the therapeutic abortions or hazards to the future citizens.

They have labelled various diseases as genetic diseases¹⁷ but the ultimate goal regarding treatment of those cases is practically nil.

On this score lies the beauty of Homoeopathy and the concept of miasm¹⁸.

According to Dr. Hahnemann chronic diseases are caused by the three fundamental miasms¹⁹ *psora*²⁰, *sycosis* and *syphilis*. We are working in an *era of mixed miasms* where neither

16. Amniocentesis, Chorionic villus biopsy, Ultrasound, Fetoscopy, Radiography, Preimplantation diagnosis.
17. Diabetes mellitus, hypertension, ischaemic heart diseases, peptic ulcer, schizophrenia, spina bifida, anencephaly; congenital heart diseases, pyloric stenosis; cleft lip, cleft palate, club foot, dislocation of hip, cancer, polyposis coli, neurofibroma, tuberous sclerosis, xeroderma pigmentosum, retinoblastoma and so on.
18. Miasm or miasma (Gr. : Stain, defilement, pollution) means (i) a heavy vaporous exhalation or effluvium formerly believed to cause disease, (ii) a noxious influence or atmosphere. Hahnemann, however, greatly extended the meaning of the term both in extent and depth. He definitely pinpointed the *influencing or infecting* agent as some particular form of minute, invisible animated being specific for a particular form of disease. The vague concept of atmosphere, vaporous exhalation or effluvium did not appeal to him.
Hahnemann depicted his original philosophical attitude, viz., the *inseparability of matter and spirit* in the word *miasm*. The terms *psora*, *syphilis* and *sycosis* are used to denote the causative miasms as well as their effects, the respective disease syndroms.
19. It was challenged by Dr. C. Hering with the words, "what important influence can it exert whether a homoeopath adopts the theoretical opinions of Hahnemann or not, so long as he holds the principal tools of the master and the materia medica of our schools? What influence can it have, whether a physician adopts or rejects the psoric theory, so long as and he always select the most similar medicine possible?"²⁰ In reply to it Dr. J.H. Allen said, "The last line is well timed: '*So long as he always selects the most similar medicine possible*'. The fact is, we can not select the most similar remedy possible unless we understand the phenomena of the acting and basic miasms; for the true similia is always based upon the existing basic miasms"²¹, whether we be conscious or unconscious of the fact...."Dr. R. Hughes too challenged Hahnemann's concept of chronic diseases²².
20. *Preface, Organon of Medicine*, 3rd American edition.
21. *Chronic Miasms*, Roy & Company, Princess Street, Bombay, Vol.1, Page 12.
22. (a) *Principles and Practice of Homoeopathy*, C. Ringer & Co., P32.
(b) *Pharmacodynamics*, 6th edition, Pp.87, 90 & 839.
23. *Psora* (derived from the Hebrew word *tsorat*: a groove, a fault; a stigma;

anybody is free from miasm nor they are suffering from a single miasm. Even most of the so-called acute diseases are due to acute miasm,²⁴ half acute miasm or chronic miasms.

In addition to these, various drugs and vaccins²⁷ producing a sycotic discrasia for which Dr. J.

H. Allen gives caution²⁸

If from the very beginning we try to make anti-miasmatic prescription, by and by, we will attain mastery on it. On the otherhand those who try to find a similimum negating the concept of miasm are symptom doctors²⁹.

By acquiring thorough knowledge of miasms³⁰ we will be able to identify the miasmatic complexes as well as flaired up miasm at that time in the patient.

It is a common belief that every wart is the manifestation of sycotic miasm but the fact is not so³¹.

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24. a pollution²⁴, allied to the Greek word *psen* to rub²⁵.
ROBERTS, H.A.: Principles and Art of cure by Homoeopathy; Jain Publishers, P184.
25. WEBSTER, A.M.: Seventh New Collegiate Dictionary, P588.
26. Some acute diseases like chicken-pox, measles, typhoid, whoopingcough etc. if not treated properly gives rise to troubles following which patient says - "I am not well since that disease". In such conditions nosodes prepared from those disease products are given to remove the blockage or to restore the sick.
After dog bit some troubles continue even generation after generation, termed as half acute diseases. Such cases need medicines like *Hydrophobinum* to combat that condition or restore the sick.
27. Tautopathic drugs are required to combat the ill or adverse effect of drugs of other systems but *it is too difficult to overcome the over drugging of homoeopathically prepared medicines.*
28. ALLEN, J.H.: Chronic Miasms, Vol. II, Page 118-119, Para 3.
29. *Ibid*, P.6.
30. By going through the following books we can have mastery of miasmatic symptoms -
(a) *Ibid*.
(b) GHATAK, N.M.: Prachin pirahar Karan o tahar chikitsha.
(c) HAHNEMANN, C.F.S.: The chronic diseases their peculiar nature and their homoeopathic cure.
(d) KANJILAL, J.N.: i) Writings on Homoeopathy.
ii) *The Miasmatic approach: Its importance in Homoeopathic prescribing, Hahnemannian Gleanings, January, 1982.*
(e) KENT, J.T.: Lectures on Homoeopathic Philosophy.
(f) ORTEGA, P.S.: Notes on the Miasms.
(g) ROBERTS, H.A.: The principles and art of cure by Homoeopathy.
(h) SPEIGHT, P.: Comparison of Miasms.

Prescribing of anti-sycotic or anti-syphilitic remedy on the history of gonorrhoea or syphilis is not an indication of a Master Homoeopath. Based on miasmatic symptoms, even without getting those incidences, we must be capable to identify the miasmatic condition of the patient. As an individual develops, by and by, from the embryonic

31. **MIASMATIC CLASSIFICATION OF WARTS²²**

[The term wart includes all types of Verrucae with various different forms and morphological structure (vide, any medical dictionary, e.g., Dorland's).]

SYCOTIC	SYPHILITIC	PSORIC
i) On genitals mainly.	i) On muco-cutaneous junction (condylomata).	i) Anywhere.
ii) On the flexor aspects	ii) On the extensor aspects	ii) Any aspect of the body.
iii) Multiple and of different shape & size. Of course the size is usually smaller. Cauliflower like warts may be large papillomatous	iii) Bigger in size, few in number, somewhat tomato like shape. Generally pedunculated rather than cauliflower like.	iii) Smaller in size.
iv) Slight serous discharge and peculiar sweetish or fishy odour with itching and irritation.	iv) Discharge usually absent, rather dry but bleeds easily on little touch. Worse at night, better during day.	iv) Dry or slight discharge, itching and irritation which is better by scratching (temporarily); marked aggravation in morning and in bed.
v) Generalities : Exceedingly suspicious, jealous, selfish, irritable, absentminded. Worse during rest, better by motion. Repeated calls for urination during rain and storm.	v) Generalities : Dull looking, deformities in formation of teeth and bony structure. Sense of smell is lost, nose small and flat. Adenoid face.	v) Generalities : Easily exhausted, both physically and mentally worries and fears of something.
vi) Sycotic history of patient in general including appearance and constitution.	vi) Syphilitic history, appearance and constitution.	vi) Psoric appearance and constitution.

32. KANJILAL, BIVA & TAPAN : Dr. J.n. Kanjilal, Hahnemann Publishing Co., 165, B.B.Ganguli Street, Calcutta 700 012.

stage to death so also his disease condition goes on developing *due to its genetic cause controlled, guided and modulated by the miasmatic cause inherited from ancestors as well as acquired by self*, causing various changes, from inner most - the mental symptoms to the outer most - the physical symptoms; depending upon the susceptibility of the patient.

A chronic disease starts with *imperceptible beginning*, goes on till the death of the patient, if not treated properly. Due to anti-miasmatic treatment when recovery takes place, it follows Hering's Laws of cure *i.e.*, suppressed itch/discharge/ulcers will reappear in reverse order of onset; but a patient who never had the stage of ulcer will not develop it, though the patient is a case of syphilitic miasm.

The beauty of miasmatic treatment are :

1. We can not restore any chronic disease of any origin without the knowledge of miasmatic theory.

2. Prescriptions based on local symptoms, ignoring the con-

cept of miasm, will palliate or suppress the symptoms of the patient making a curable patient to an incurable one.

3. Miasmatic prescription will improve the patient as a whole, though the troubles are not less yet the patient says - "I am better". *He starts improving in look, activity, weakness* and so on *i.e.*, *The internal man starts improving* leading to recovery in its whole extent, including his physical complaints too.

4. Rare drugs will be required rarely.

5. A thorough grasp of miasmatic concepts and approach with correct anamnesis, will always enable us to anticipate the future development of any case *i.e.*, if the recovery does not follow Hering's Laws of cure, it will be invariably be found that either the prescription was not at all a curative one or the case itself was incurable.

Above all, *if we fail to master the art of case taking, waiting till the action of the remedy is exhausted*, we will not be able to perceive the beauty of anti-miasmatic treatment.

Now a days people are writing as AIDS miasm, cancer miasm, pseudo psora, tubercular miasm in various writings but the trend is not correct. There is no existence of any new miasma, rather they are blending of all miasms³³.

In a nutshell, we know *psora causes functional dis-order, sycosis gives rise to incoordination and syphilis gives rise to destruction*. In no case, even after repeated suppression psora can not lead to destruction, syphilis can not lead to incoordination, nor sycosis to only functional disorder.

To fulfill the Physician's high and *only* mission, to restore the sick to health, to cure,³⁴ till now no dependable treatment of genetic diseases is available in the old school of treatment, though Hahnemann's miasmatic theory helps us to achieve the goal upto some extent.

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33. KANJILAL, TAPAN :

Tubercular Miasm. Souvenir, VIII All India Congress of HMAI, Nagpur, 1992.

34. HAHNEMANN, C.F.S. :

Organon of Medicine, 1st aphorism.