

## Talks on Constipation.

DR. DAHLKE, BERLIN.

B. Do you think an accurate choice of medicine will enable us to dispense with cathartics?

A. This is difficult to answer with a simple "yes" or "no." What is true of morphia is also true of laxatives; the better you know how to handle your Materia Medica the easier it will be for you to dispense with such help. Now a case may occur where you may say in advance, "In this case I will not use Homœopathic treatment," and prefer to give castor oil; but you must be sure that this resolution is based on the situation, and not on a deficient knowledge of Materia Medica.

The old Griesslich expressed himself in the first volume of the "Hygiea," the place and exact words have escaped me, but in about the following manner: "In spite of Homœopathy, no man shall prevent me from giving a spoonful of castor oil when I have ascertained that the intestines are full of old fecal masses." That, indeed, is a tangible view. But notwithstanding this we are not only justified, but in duty bound to always return to our specific remedies. And I again reiterate, the better our command of Materia Medica, so much the easier will we be able to dispense with all such make-shifts. For instances, if you had a case which Griesslich thinks should be treated not with castor oil, but with a drop of potentized *Opium*, and if we further grant that in his case the castor oil had no evil results, and that the cure had proceeded as smoothly and perfectly as in the other, yet the cure by *Opium* is to be preferred to that of castor oil. Why? *Because we are Homœopaths!* and because of our principles. The more completely we stand within the boundaries of own

territory, and the more we suppress the inclinations to pass these boundaries, so much the better; and so much richer resources will we discover in our system of therapeutics.

B. I concede you are right in what you claim in *chronic* cases, but will not the necessity frequently occur to Homœopaths, that *acuta* constipation must be relieved by a cathartic?

A. That is a preconceived opinion, which, however, is not at all justified. I, at least, cannot see why our remedies should act more promptly, for example, in acute diarrhoea than in acute constipation. As you have often cured a diarrhoea that had lasted for several days with a single dose of *Phosphorus*, *Arsenicum*, or some other remedy, so may you not expect to do as well in acute constipation, if you take the trouble to seek out the indicated remedy?

B. Which are really our chief remedies in constipation?

A. In such a changeable symptom-picture in a complaint that appears as a concomitant of such a great number of disorders, of course the remedy must also vary. If we place ourselves on a strict point of view, there is no remedy in our *Materia Medica* that may not be indicated in constipation. And the rarest remedy may, in a case suitable to it, become the one indispensable.

B. That may be, but I speak only of the remedies which according to experience, are most frequently indicated. I mean such as *Nux*, for example.

A. But *Nux* must not always head the program! Certainly it is one of the chief remedies; but by no means the most important. Because you mentioned it, we will briefly describe it.

Above all, the *Nux* constipation is accompanied with *urging*, mostly *ineffectual*. The stools are *large, hard*, difficult to discharge. *Hæmorrhoids* blind or bleeding *seldom* are *absent*. Therefore the stools are frequently mucus and bloody, and also the painful symptoms of *burning, stinging* and *soreness* at the anus. More characteristic still is the sensation, "as if the anus was *too narrow, or constricted*." These are the strictly local symptoms. But if we look further we will find that the "urging to stool" often produces the same symptoms in the bladder; a sort of cutting on micturition. Moreover we meet a pain in the loins, as if bruised. Careless turning in bed produces violent stitching, consequently when the patient wishes to change position in bed he first sits up and then turns; also a peculiar chronic condition, known as a disposition to "erick in the back."

Some of the best known gastric symptoms you will also find to generally accompany constipation. If the pains are absent, the fullness and discomfort about one or two hours after eating will be present, which compels the patient to loosen his clothing, partly from the general sensitiveness of the region and partly from the accumulation of flatulenc. If there are pains, there will frequently be that heavy pressure, as from "a stone" in the stomach, or that burning, cramping pain, beginning about two hours after eating, radiating to the back and often exciting the above mentioned "ineffectual urging to stool." The *Nux* pain in the stomach is often relieved by warm drinks. Bitter, or sour eructations, water-brash, vomiting or retching in the morning, are symptoms which you may naturally expect in every case of *Nux*. In constipation, you will likewise find congestion to the head as well as its specific state of mind in the truest form. The patient is easily irritable, fiery, over-

sensitive to everything, easily offended and in a bad humor, so that it is difficult to get along with him.

In conclusion, some statements of a more general sort. As you already know the *Nux* patient is a dark and emaciated man, of active disposition, notwithstanding the fact that he is sleepy very early in the evening. He is sedentary, either from disposition or because his business necessitates it. So much the more injurious therefore is his desire for "high living." He is more inclined to all the enjoyments of this world than is proper. He is also anxious to retain as far as possible his enjoyment of these luxuries. Therefore most liable to fall a victim to the "quack," as well as the skilful physician. No one so frequently takes all medical advice and drops them so quickly. In the gastric disorders of pregnancy *Nux* is also one of our chief remedies.

Which of the above mentioned local symptoms do you consider of most importance?

B. The ineffectual urging to stool.

A. Without question. In this symptom the peculiarities of *Nux* culminate. The others, the large hard stool, the hæmorrhoids, the pains etc., are all things that may be present or absent. But ineffectual spasmodic action of the sphincter, as well as the sensation as if the anus were too narrow or constricted, are all genuine *Nux* symptoms.

B. Do you lay no value on the pains?

A. When pain in the anus is the ruling symptom you must not expect too much from *Nux*. In such cases you must decide whether it is a pain from first, fissure, or second, from excessive sensibility of protruding hæmorrhoidal knots, or, third, from an acrid corrosive secretion. In the first case think of remedies such as *Graphitis*, *Causticum*, *Nitric acid*, *Thuja*, *Petroleum*, etc. In the

second case such as *Muriatic acid*, *Lachesis*, *Sulphuric acid*, *Belladonna*, *Aesculus*, *Collinsonia*, *Graphitis*, *Aloes*, etc. In the third case, *Sulphur*, *Carbo-veg.*, *Arsenicum*, *Lilium tig.*, *Natrum mur.* However, I will acknowledge that this sort of differentiation, particularly between the second and third, is arbitrary.

Later we will speak of some of these "pain remedies," and now of that *Nux* symptom, the "ineffectual urging to stool." Do you know other remedies that have this symptom also?

B. *Sulphur* and *Lycopodium*; while *Opium* and *Bryonia* have constipation with no desire to stool.

A. Quite right. These remedies are usually contrasted, yet also consider in constipation with urging, the following remedies; *Aesculus*, *Anacardium*, *Carbo-veg.*, *Causticum*, *Collinsonia*, *Conium*, *Ignatia*, *Iodins*, *Lachesis*, *Mercurius*, *Platina*, and *Staphisagria*. This series might be considerably enlarged, but we would thereby lose in clearness. I hope we will afterwards briefly characterize these remedies individually.

Now, we will pass to that sensation of *Nux*, of "narrowing or constriction of the anus." The following remedies may be grouped with *Nux* here. In the feeling of constriction we may compare *Belladonna*, *Calcarea-carb.*, *Cocculus*, *Graphites*, *Ignatia*, *Kali-bich*, *Lachesis*, *Lycopodium*, *Mexerium*, *Natrum-mur*, *Plumbum*. In the *Nux* symptom, anus "as if too narrow," we may compare *Anacardium*, *Apocynum* and *Kali-bich*; all three have the sensation "as if the anus was closed by a plug."

*Apis* has the sensation as if the anus was stuffed full. *Can-ind.*, as that of a hard, round body in the rectum. *Sanguinaria*, a full feeling; *Calcarea*, *Lilium.tig.*, and above all *Sepia*, the sensation as of a weight or lump in the anus.

I have mentioned here the rarely indicated remedies, for the rule prevails that, "The more striking, the more inviting a symptom is, the more thoroughly we must endeavor to compare all that are alike or similiar."

In the symptom, "urging to stool produces a desire to urinate," we may compare *Cantharis*, *Capsicum*, *Carbo-veg.*, *Lilium-tig.*, *Nux*, *Sarsaparilla*, *Sepia* and *Staphisagria*.

In relation to the *Nux* case in which there are pains in the back, we may compare *Aesculus*, *Belladonna*, *Capsicum*, *Hamamelis*, *Kali-carb.*, *Phosphorus*, *Sabadilla*, *Staphisagria*, *Sulphur*.

We also had in our *Nux* picture the symptom mentioned, "stools large, hard, difficult to discharge," which also belongs to *Veratrum-alb.* "Bloody mucous stools" reminds us also of *Graphites*. And "burning, stinging, soreness in the anus," *Muriatic acid* and *Aesculus*.

Now, we will consider more closely some of the remedies that resemble *Nux*. For example, *SULPHUR*. It has the constipation with urging to stool, hæmorrhoids, pain in the back, hard, lumpy, also mucous stools, stitching, burning pains in the anus, all the same as with *Nux*. Wherein shall we differentiate them? We will begin with their nearest symptoms. Sulphur has not only the stitching and burning, but also violent itching, which, as is always the case with it, is worse when warm in bed. Either in consequence of much rubbing or from moisture secreted by the hæmorrhoidal knots, or from acidity of the stool, the parts become sore and, as we often see, particularly in children, the anus becomes intensely red. All the secretions of the Sulphur patient have this specific corrosiveness. There will also often appear in the Sulphur patient, in alternation with the constipation, the well-known morning diarrhoea, which drives him out of bed. And he will

complain much of the odor of stool which clings to him. The lumbar pain is different from that of Nux. With Sulphur this pain compels the patient, perhaps because of a weakness in the region, to walk bent forward.

Now we go to the periphery, where we have a number of important indications. Sulphur has indeed the congestion to the head, but it is manifested in the well-known "heat on the vertex," frequently with cold feet; or there are symptoms as in the climaxis; that is, by every slight exertion and every movement there is an ebullition rising upward, ending in the breaking out of sweat. Also we have the sensations of faintness, and weakness, particularly in the forenoon about eleven o'clock, which compels him to eat something. In Sulphur the liver is drawn into sympathy as with Nux. It may also meet the results of the abuse of alcohol as well as Nux. But this "time of aggravation at 11 a. m." is an important indication for Sulphur. The Sulphur patient also has aversion to milk, (Nux., *Carbo.veg.*) and farinaceous food. Do you know other remedies that cannot endure farinaceous food? There are particularly *Natrum.mur.*, *Natrum-carb.*, and *Magnesia-carb.*, also *Alumina* with its aggravation from potatoes. Frequently Sulphur is indicated in patients whose diseased state is more advanced or is deeper seated. The entire organism is in a certain sense undermined, either by long continued bad habits, or by a suppressed disease, or from an inherited morbid condition. Therefore Sulphur usually follows Nux. We have two trios of remedies which follow each other admirably. One is Nux, *Sulphur* and *Lycopodium*. The other, Nux, *Sulphur* and *Calcareo*.

B. Does not the Sulphur patient look quite different from the Nux one?

A. In both, the face is usually emaciated. With

Sulphur, either pale, sickly, or with that redness of cheeks which Nux also has. But with Nux, we have the redness shining through a yellow or jaundice-like color of the face, which is also characteristic of *Lachesis*. Yet, if I do not err, you meant not so much this color, as the bright redness of mucous membrane which is specific of Sulphur. Now you must not in constipation lay too much stress on this symptom, because we seldom meet with it. But I will now give you the following case: A child of ten or twelve years had suffered for months with a cough, for the cure of which the mother had used in vain all the domestic remedies. It had enlarged cervical glands, face pale and earthy with the exception of the lips which were surprisingly red. If further search had been made, many other Sulphur symptoms would have been found, but the one above mentioned sufficed for the choice of Sulphur. This is the stage on which the symptom "*bright redness of the mucus membrane*" plays its role.

Now we turn to LYCOPODIUM. It has like Nux, constipation with ineffectual urging to stool, constriction of the anus, hard difficult stools, painful hæmorrhoids, affections of the liver, fulness and discomfort after meals, and sensitiveness about the waist, much the same as Nux. Above all *Lycopodium* has the feeling after stool as if much or the most part of the fæces remained. Its hæmorrhoids often discharge a strikingly large amount of blood. It has much rumbling and gurgling in the abdomen. It has canine hunger before eating, but immediately after taking the first morsel he feels full to the throat, from the gases that develop; while with Nux, the fulness occurs two or three hours after eating. The *Lycopodium* dyspepsia is described by the word "sour." The food tastes sour, the belching and

eructations are sour. The keynote of Nux, on the contrary, is "heartburn." *Lycopodium* has by preference the brick dust sediment in the urine. Instead of the morning aggravation of Nux, it has the aggravation from four to eight p. m. Instead of the evening sleepiness of Nux, it has the irresistible sleepiness after meals. Also the familiar symptom, "one foot hot, the other cold." The disposition has, indeed the irritability and tendency to anger of Nux and also melancholy and the fear of being alone appear more in the foreground. Besides this the *Lycopodium* patient has a peculiar egotistical trait, which it is difficult to describe. He considers his sufferings the most-important; that about which all other things must revolve. The violence of Nux in which the patient forgets himself and his disease are absent in *Lycopodium*. We may find something similar to this intellectual peculiarity of *Lycopodium* in Platina and Arsenicum. It is a general characteristic of *Lycopodium* that the body is weak while the mind is acute and well developed, except the memory.

B. Has *Lycopodium* not an emaciation of the upper part of the body?

A. Quite right! As least the upper part of the body stands as a sort of contrast to the lower. The face looks thin, has an expression of suffering, (Berb.) and looks more unlike that of the Nux patient than of the Sulphur one. The entire body is thin and has but little power of resistance. There is a disposition to stagnation in the lower half of the body, consequently the legs are bloated. (If you look closely you will discover a resemblance to Kali-carb.). Varices develop a peculiarity which differentiates *Lycopodium*, *Sulphur* and *Carvo-veg.* from Nux. In the varices of pregnancy, *Lycopodium* is

our chief remedy, especially if they are located on the genitals.

( To be continued )

### The Marriage of Surgery and Medicine.

J. W. HINGSTON, M. D. (CHICAGO)

There was a time in the history of our school when the lessons learned by hard experience were new, clean cut and clear, when faith was budded deep, and when surgeons were students of our materia medica. In those days the surgeon depended on the homœopathic remedy and considered it the *sine quanon* in all medical conditions induced by, or coincident with, the accidental or surgical injury to tissues.

Surgical technic is the same in all schools of medicine. Our own surgeons are as nimble-fingered as any and can cut with equal certitude. Immediate and end results are comparable with the best obtained by surgeons of the dominant school. But should that be satisfactory? Is that satisfactory? Would the homœopathic internist be satisfied with results equal only to those of the polypharmacy school, the serologists and the multiple methods of those who make up the whole school of allopathy?—a name they are heartily ashamed of because they are ashamed of the sort of medical treatment which gave them that name. But because they have adopted and incorporated into their practice the vaccines, the antitoxins, the scrums and the rest of the *ines, ins, ens* and *ums*, let them not persuade you to believe they have abandoned their allopathic methods of prescribing. They are still using the same old and many new laxatives, purgatives, soporifics, narcotics,