



Sycosis, the Bane of Homoeopathy



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Understanding the Miasms has always been the bane of Homoeopaths - the great stumbling block in the process of our learning! It is truly like the Sycotic Miasm - confusion confounded. Therefore we, at the *NJH* thought that an issue devoted to this mis-understood Miasm would be of great benefit.

The issue editor, Dr N L Tiwari, has done much labour and brought to you a very comprehensive issue. I am sure you will find many of your doubts cleared. We would certainly appreciate it, if you write in and share with us your experience of this issue.

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I will now hand over the stage (or rather the page) to **Dr N L TIWARI MD (HOM)**

Dr Samuel Hahnemann, our master, the great Healer, clinician, educationist and researcher, proposed the Theory of Chronic Diseases in the year 1828. (He published 3 vols of Hahnemann's *The Chronic Diseases: Their Nature and Homoeopathic Treatment*; Part 1: 241 pages, Part 2: 362 pages, Part 3: 312 pages and Vol 4 published in the year 1830: 407 pages) We find that this theory started a controversy which led to a split in the ranks of Homoeopaths. Group A of people opposed to it, took the position that this theory need not be an essential part of Homoeopathy, as it is possible to practice H without Miasm theory. We shall not enter into this controversy, but shall make an attempt here to understand what led Hahnemann to enunciate it and to determine, if it is useful in the management of chronic cases.

Hahnemann sought an explanation for the frequent relapses that he observed in certain patients with chronic illnesses whom he treated with Homoeopathy (his new system). He observed them in great detail and classified them in three broad groups with definite attributes and predispositions. He observed a close association between these groups of illnesses and the diseases of Itch, Syphilis and Gonorrhoea which were rampant in those times. This association led him to postulate a causal relationship between these three groups and the three diseases. He studied the drugs in Homoeopathic *Materia Medica* in greater detail and classified them in to three like groups, employing the same attributes.

We therefore accept the basic correctness of the theory although we reject the causal relationship with the disease of the Itch (*Psora*), Syphilis (*Syphilis*) and Gonorrhoea (*Sycosis*) which Hahnemann considered as established.

In this particular issue we will be dealing with Sycosis: its recognition and management.



Sycosis is associated with sluggish response of a system at all levels and in all areas. The tone is predominately Parasympathetic with depression of metabolic functions. We could denote this state by a (-) negative sign. Poor reactivity to the environmental circumstances will ultimately put the system into grave disadvantage.

SYCOSIS

Constitution → diathesis → disease: A unity.

Sycosis signifies the onset of a negative energy balance characterized by:

1. Sluggish response.
2. Nitrogen and Sodium retention with water logging.
3. Slowing down of the metabolic process.
4. Neural excitability.
5. Obesity.
6. Thickened greasy skin with seborrhea.
7. Hypertrophy, Growth, Tumors, Warts
8. All over non-engagement pattern of behavior with continued pre-occupation of the past. (Brooding).
9. Anaemic states with debility
10. Rheumatic, Gouty, Lithemic Diathesis.

HYDROGENOID CONSTITUTION.

Aberrant immune response characterized by non-suppurative inflammatory involvement of fibro muscular structure, serous membrane, and basement membranes with immune complexes. Injury on account of defective complement utilization in response to Streptococcal, Gonococcal, Viral infection and Collagen disorder.

PRIMARY SYCOSIS manifests itself through greenish, fishy, indelible discharges from the mucus membranes. These, when suppressed, gives rise to the various remote manifestations in the fibro-muscular system with spasmodic effect, sustained hormonal imbalance is seen.

At the **MENTAL LEVEL** we find preoccupation with the unpleasant past (brooding) and a strange inability to find the present meaningful.

Anxiety and apprehension, in respect of the future and preoccupation with the past, makes strange mixtures. Suspiciousness is high in all intents, suspicion, envy and jealousy rules. Paranoid state supervenes soon. Guilt complexes and obsessive-compulsive states dominate. All the base emotions, the worst side of the man, find ready expression.

Confusion prevails. Criminal tendencies multiply; projective mechanisms proliferate and show a tendency to dominate the scene. Impulsive acts dominate a tendency to erupt. These occur in phase of Tubercular to Syphilis.

Progressive disorientation and loss of control over direction and efforts, characterize Sycosis. The person is never at the right place at the right moment. He is all the time chasing the object in a



ponderous manner, puffing heavily, perspiring offensively (fishy odor of the discharge). Cold, damp tend to aggravate all the symptoms. Complaints which take on a wandering character associated with spasmodic effects. Fibro-muscular and neuralgic pain are common. Indurations of non-suppurative type and benign tumors are seen.

SYCOSIS MATERIA MEDICA

The representative drugs are *Thuja* (chilly), *Nat-sulph* (Ambithermal) and *Medo* (hot). Between them cover the entire ground of Sycosis. *Puls* is a good representative for acute exacerbation (pain and discharge).

SYCOSIS AND CLINICAL STUDY

A detailed clinical study of various conditions described earlier, when coupled with the study in depth of drugs like *Calc-carb*, *Kali-carb*, *lyco*, should afford us an evolutionary concept of Sycosis and should permit us effective co-relation between functional and structural alteration induced by disease states. Such knowledge link up with the characteristic differential data in respect of the drugs extremely valuable in the effective management of the conditions in the homoeopathic practice.

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Editor: In this issue we have tried to depict this understanding through the various articles available in the Homoeopathic literature, which we have quoted from and through the various cases . . . there are cases of every hue and colour and will definitely lead to a comprehensive understanding not only of the miasm, but also how to handle- so it is quite a Hands-on understanding that we are trying to provide. Many different authors have written in, with their different backgrounds and understanding. . .

Some cases by young doctors who lost their lives in a bizarre accident 4 months ago, speaks volumes for the sensitivity of their colleagues to give their names to an article! Something which will bring solace to their unfortunate parents back home

Another encouraging trend which we have been trying to promote and which seems to have caught on . . . the multiple seminar reports. It would be even more wonderful, if we had detailed reporting of the content of the papers read and cases described and less of the functionary part . . . but we are getting there. . .not to speak of handling emergencies by Homoeopathy. Truly a fulfilling and comprehensive issue and most Homoeopathic . . . as the subject is unique only to Homoeopathy.

Relax, enjoy the issue and please write in and share your experiences with us. . .

