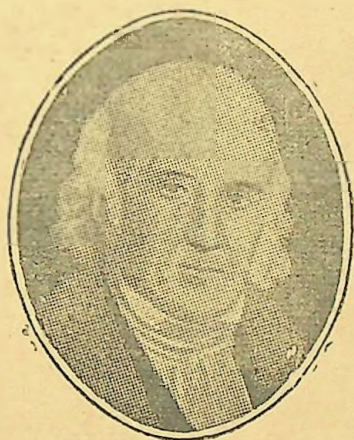


The

HOMŒOPATHIC HERALD

(Journal of Pure Homoeopathy)



. XIII.

May, 1952.

No. 2.

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EDITOR

Dr. N. C. Das, M. A., D. M. S.

BUSINESS MANAGER :

Dr. Samarendra Bhattacharyya, B.Sc.

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Editorial

SEARCH FOR THE UNKNOWN.

The kingdom of God is full of Mysteries. God created man and wanted to keep all knowledge about the Mysteries of His universe hidden from his eyes. In disobedience to the will of God, man, the supreme creation of God, made an attempt with the advice of his female mate, to pry into the secrets of Creation. According to the Biblical legend, this first disobedience of man, arising out of his curiosity to know what the Mighty Creator kept concealed from his eyes, was the cause of his fall which brought for him an eternal trouble in place of an eternal joy, an everlasting curse encased with boundless sorrows and sufferings in place of perpetual fountain of celestial bliss. Man gained only a small particle of knowledge at the sacrifice of his right to live with God and to move with Him. In other words he lost his advantage of living and moving in association with the Eternal Being Who desired to give him protection from all harm of earthly life. This fall of mankind has brought all the miseries of human life. Knowledge is good, knowledge is power, but Carlyle says knowledge is a curse and ignorance is a bliss. Carlyle is right. The Bible proves it beyond all doubt. The very possession of knowledge about the Divine Creation brought man on the verge of ruin, on the very border of Hell filled with liquid fire boiling with eternal rage and bright red anger. So long man was ignorant, all

happiness was at his door, life was a joy, and world was a beauty to him. With his fall he lost the sacred innocence of life and he inoculated his life with the virus of evil thinking and evil doing. He abandoned virtue and courted vice. A life of purity was plunged into the hell of impurity. He fell into an unimaginable depth of moral and physical suffering. It is a great and most deplorable fall for the sake of which all future generations of mankind are in everlasting unrest of mind.

This fall of mankind heralded the modern civilization. Man wanted clothes, clothes to hide his shame of guilts. Then he wanted various kinds of food, the food was his ever increasing desire to satisfy his endless wants which multiplied by leaps and bounds. The unsatisfied desires made his life unhappy and foolish abandonment of Nature made his body ill with many diseases which could never come near him while he was in a state of Nature. The first fall of man is the first dawn of civilization which is the mother of diseases. "Civilization is a disease." Thus man's search for knowledge, for the hidden facts of Nature, for the things which are unknown to him, has become the cause of his endless trouble. But still he continues his search with indomitable will. His ceaseless search for hidden knowledge, his constant labour for unveiling the Mysteries of Creation continue with unabated zeal and craving. He says science is his God and science will unlock the hidden powers of Nature. Hence he worships his science God with rapt attention. To all superficial thinkers science has made an immense progress for the betterment of economic conditions of man. H. G. Wells says, time will come when we will live in the air and work in the air and will come down to earth only on Sundays for recreation ! Seeing the rate of progress of science one can easily comprehend that the prediction of H. G. Wells will come true one day. But all these remarkable achievements of science have failed to give man that very life of joy and innocence which he enjoyed before his fall. The progress that cannot make life joyful and peaceful is no progress. The medical science, they say,

has made an unprecedented progress but unfortunately the number of diseases are steadily on the increase and death rate also has awfully increased. The introduction of Penicillin and sulpha drugs is no insurance for human health or no guaranty for immunity from diseases. Our daily experience tells us that the modern medical science with improved drug equipment and knowledge of bacteriology has not performed any miracle which it always promises to do. Advancement of knowledge and progress of science are needed for the enhancement of human health and happiness. But neither health nor happiness is secure in the present world. Disease and poverty have made life intolerable inspite of the progress of civilization and science. Sixty years ago, if we wish to tell the truth, people were happier and more healthy, they enjoyed greater wealth and greater immunity from diseases. Most of the diseases which we suffer from in these days, were unknown or less known to our forefathers. In those days when science made no galloping progress, an old man of 90 could read his Ramayana or Mohabharata without the help of eye glasses, he could chew his food without artificial teeth. Science has no doubt conquered Time and Space but it has entirely failed to increase human health and happiness. With progress of science we discard old ideas and habits and cling to new ones. Knowledge of Hygiene and a host of new drugs have failed to conquer death and disease. The modern drugs are employed to cure or to palliate or to prevent diseases but no one can say how far they are successful in these directions. Moreover it is the general impression that the very employment of these poisonous drugs create hundred other diseases of unknown names or reexcite old diseases which remained inactive in the body for years. Our future generations will judge how far our assertions regarding progress of science, medical or otherwise, are true. Further progress of science will cause further increase of death rate and unhappiness because it draws us farther and farther from natural environments to artificial ones. The whole man is gradually becoming artificial with artificial

diet and artificial habits, and forgetting all contacts with Nature which can pour on his head abundant stream of true joy and happiness. The situation the modern science is creating is very terrible and it will one day, rain death and disease which will devastate the fair earth which God created for human dwelling. The creation of Atom Bomb is not the last thing that science has done. It will create more deadly poisons and more dreadly weapons which will bring a dreadful state in which the whole creation of God will perish in a moment. Violent poisons which are employed for the protection of human life will one day be the cause of death by their continued employment and reckless use. Caution and care are needed for the use of these poisons which no doubt can save lives when handled by men of wisdom and experience.

The modern medicine or the modern scientific knowledge has become a curse and not a blessing for human beings. The fruit of knowledge contains in it poison which can annihilate life. Throw this fruit away or the world is doomed. A giant was sealed in a copper vase which lay at the bottom of the sea. A fisherman's net brought the vase on the ground. The fisherman thought that his luck favoured him and the pitcher might contain hidden gold. He removed the seal and a thick smoke came out of the vase. Gradually the smoke took the shape of a large giant which wanted to kill the fisherman who released him from the copper vase. The fisherman was in danger and his wit saved his life. He at once said "Sir, kill me if you like but tell me how this big body of yours remained in this small vase." The giant at once re-entered the vase to satisfy the curiosity of the fisherman who took no time to seal the vase and to throw it into the sea for the protection of his life. Hence the fruit of knowledge should be thrown away for the safety of the universe. The search for the hidden forces of Nature is dangerous. Release of the hidden powers of Nature will only ruin the earth. The ambition for possession of knowledge of the unknown is to be abandoned. "Ambition is a fire" from which

we must keep away. A bell was tied to the tail of a bull and when the bull moved its tail the bell made a sound which terrified the beast that began to run in fear. The more it ran the greater was the sound of the bell. The beast continued to run and at last fell down dead. Therefore the ambition for the search of the unknown is associated with the danger of destruction. The sound of the bell in the example cited above is taken for ambition which allows no rest and ends life in death. The secret powers of Nature when fully released may cause total annihilation of all that we possess. The distant past was a golden age when people enjoyed long and healthful life, when the land was flowing with milk and honey which made no necessity for taking medicine daily like our daily bread. The present deterioration of our National health is due to our daily or frequent use of poisonous drugs, extreme poverty, constant anxieties and worries of life arising out of a situation created by the modern civilization which is the product of scientific knowledge that constantly knocks at the door of Nature for the release of Her unknown and most powerful forces which man wants to tame and employ in his own service.

N. C. DAS.

—o—

WONDERS OF HOMEOPATHY.

Girl, 24, came under my care for her skin symptoms. About 18 days ago she had an extensive red discolouration of skin about her left elbow joint. The whole area was red and painful. The redness was followed by an eruption of vesicular type which caused a good deal of pain and burning. Allopathic treatment with tablets and ointments failed to give her satisfactory relief. Then she desired to try Homœopathic drugs. I noted the following symptoms.

(1) Patient of fair complexion with dark hair, disposition cheerful.

- (2) Eruptions in ulcerated condition.
- (3) The entire area with surrounding parts looks black.
- (4) Burning, pain, itching, discharge of pus-like matter which is not fetid.
- (5) Cold application relieves.
- (6) Appetite poor. Thirst not marked.
- (7) Stiffness of parts, can bend hand only with difficulty.
- (8) Constipation.
- (9) Sweat not marked.
- (10) Chronic urticaria which puts her to extreme inconvenience every now and then. Eruptions appear with swelling. At present she has no such eruption.

Apis 30, 4 times a day for 4 days cured her completely.

N. C. DAS.

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GLEANINGS.

1. Very offensive smell of the perspiration of the axillæ.

Sulphur.

2. Stool with a sensation as if something had stayed behind, and not enough had been discharged.

Sulphur.

3. Great dryness of the finger tips in the afternoon.

Silicea.

4. Coldness of the feet in the evening in bed, hindering from going to sleep.

Silicea.

5. Many of the pains, especially those of the pressive-drawing kind, begin gently, slowly increase to a high degree, and then decrease just as slowly.

Stannum,

6. Asthma and lack of breath on going upstairs and at the slightest motion.

Stannum.

7. Asthma, as if the clothes were too tight, he has to open them to breathe properly.

Stannum.

8. Rumbling in the abdomen, with sensation of emptiness therein.

Sarsa.

9. Sweet taste in the mouth, while smoking tobacco.

Sarsa.

10. Trembling of the hands in writing, with formication and itching therein.

Ac. Phos.

11. A nail grown into the flesh causes inflammation and pain.

Ac. Phos.

12. Great restlessness in the legs, with icy cold hands, chiefly in the evening.

Phos.

13. Constant coldness in the knees, at night in bed.

Phos.

14. Increased sensation of warmth in paralyzed parts.

Phos.

N. C. DAS.

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PEDIATRICS.

DR. B. K. GOSWAMI.

[Continued from page 30]

17. Has the Allopath anything to compare with the effect of *Tuberculinum* in the child with the T. B. diathesis with its thin body and hairy back, its blue veins and blue sclerolies. Dr. N. G. Blackie.

18. We must look to past history for back-ground, to the present symptomatology as a stage in progression, and to our homœopathic materia medica for that power which unlocks the patient's vital energy to cure, which is our goal for the patient's future. Dr. H. A. Roberts, M.D.

19. Our problem of the present day is suppression—suppression of excretory functions, suppression of natural symptomatic manifestations usually come first, and thus early in life symptoms become masked, if not entirely suppressed, and the guideposts to curative prescribing are destroyed or so misplaced as to be far less valuable. Dr. H. A. Roberts, M. D.

20. The whole science and art of Homœopathy lies not alone in one's knowledge of the various remedies and how to distinguish between them, but in knowing how to elicit the proper indications from the patient. Dr. A. Paulford, M.D.

21. Objective phenomena, being exempt from self-interpretation and allowing the largest scope to acumen of the examiner, are without the least deceptive and should receive our first and best attention. They teach lessons not to be learnt elsewhere, and by their great utility have contributed much to the brilliant success of homœopathy, particularly in diseases of children. Nothing should escape the observer, for faulty examinations are the main cause of failure. Dr. C. M. Boger, M.D.

22. With children, lunatics and liars, you have to use your own observation. Dr. D. M. Burnett.

23. Not only is the mother a keen observer of her infant, but she can often give us an account of the family history, and a first hand account of the period of gestation and labour, Dr. D. M. Foubister, B.Sc., M.B.

24. Let nature speak to you. That which aggravates is generally harmful, that which ameliorates and soothes is often beneficial. Especially is this true in dealing with acute diseases and with children. In dealing with chronic patients the voice of nature is often stifled through years of suppression, perversion and prejudice. Dr. E. Underhill, M.D.

25. Family history is often of the greatest importance. Dr. Margaret Tyler.

26. I think you will agree that one has not fully taken the case till one has recorded for every patient vaccinations, especially any bad or unsuccessfull ones, as well as any

personal or family history of tuberculosis, syphilis or gonorrhœa. Dr. Magaret G. Tyler, M.D.

27. In family history where we find gout, rheumatism, asthma, chronic bronchitis, small pox, etc., or dismenorrhœa, salpingitis, Oophoritis, endometritis in the mother herself, think of an anti-sycotic remedy. History of ringworm, puerperal diarrhœa, tuberculosis, bleeding piles, fistula in ano in the family should be treated with tubercular remedies.

28. family history of—cancer, carbuncles, epilepsy, necrosis of the bones, deafness, etc., should suggest anti-syphilitic remedies.

29. Professor Kent gives a good example in his lectures on materia medica. He instances the children of sycotic parents who do not thrive, and look waxy and pale, as though about to go into consumption, although they do not actually develop this disease. They fail to react to well selected remedies. Such children require *Medorrhinum* in high potency, and after this is administered they react better to other remedies. Heal-Thyself.

30. Example of chronic disease latent for years ; luetic mother with no symptoms ; her child full of symptoms and four plus. Dr. T. K. Moore, M.D.

31. The vaccinate is one who suffers from vaccinosis. He may not be ill, but he must be in a subdued morbid state. He has been blighted or he is no vaccinate. Dr. Burnett.

32. The use of laxatives of all kinds should be strictly avoided. A sure way to build chronic constipation in the growing child is to give an occasional laxative on the theory that it will help to keep the intestinal tract properly cleansed. It will have no such effect. It will only pervert the digestive secretions and interfere with gastro-intestinal function and efficiency. Dr. Eugene Underhill, M.D.

33. The habitual use of enemas should be condemned. Occasionally in acute illness they may be used in very toxic cases, but if the intake of food is sufficiently restricted and of a nontoxic nature the danger from contipation is negligible. Dr. E. Underhill, M.D.

34. It is also essential that the child be taught regularity of habit and always to respond as promptly as possible to the natural urge for stool. Neglect along these lines will predispose intestinal stasis. Dr. E. Underhill, M.D.

35. Sugar, either as such, or in the form of candy, pastry or bottled beverages will induce dental caries through acid formation in the mouth. Excessive use of sugar-containing foods may even rob the teeth and bones of calcium through the production of Calcium succrate which is excreted by the kidneys. Dr. E. Underhill, M.D.

36. Thorough rinsing of the mouth with plain water immediately after taking anything sweet is important in preventing tooth decay. Dr. E. Underhill, M.D.

37. Sleep is just as important as food in the normal development of the growing child. The lack of it may cause either temporary or permanent derangement of the endocrine system to the detriment of health and happiness, and to one's success in life. Dr. E. Underhill, M.D.

38. Night terrors are often caused through mechanical blockade of the air passage by enlarged tonsils and adenoids. In these circumstances night terrors are obviously not of high value in prescribing. Dr. D. M. Foubister, B.Sc., M.D.

39. The diseases of the baby should be studied carefully and the curative remedies remembered, for it will enable us to bring swift help in later years. Dr. H. C. Allen.

40. Regarding the child eating dirt, I have felt a good many times that it was due to lack of some food element that the child needed. It might be due to some Calcium deficiency, either *Calcarea carbonica* or one of the other Calciums. Dr. Neiswonder.

41. Candy eating children do not develop their muscles, their heart remains weak and small. Dr. F. K. Bellokassy.

42. For prophylaxis is required a less degree of similitude than for curing. Dr. T. K. Moore, M.D.

43. Practically all text books on obstetrics condemn the use of alcohol during and immediately after pregnancy

suggesting it as a possible cause of sterility, abortions, stillbirths and a high fetal mortality. Dr. D. M. Foubister, B.Sc., M.B.

44. Occasionally some outstanding event of pregnancy or labour is of utmost valume in prescribing. Dr. D. M. Foubister, B.Sc., M. B.

45. Sucklings should never receive medicine, the mother or the wetnurse instead and through their milk it acts on the child very quickly, mildly and beneficially. Hahnemann.

46. In the treatment of the sucklings, mother should be treated constitutionally on the basis of miasmatic history of the parents.

47. It is true that many children suffer from irritability of the brain, convulsions, stomach disorders and vomiting about the time of dentition, but I say dentition should not be a diseased state, it should be normal. If they were in health they would cut teeth without suffering. Kent.

48. And for those who fail to become pregnant, the homœopathic treatment certainly brings great help.

49. It is an old observation that fresh fish oil is the most active oil in treating rickets and allied diseases. If it is refined, it is less active and still less if old and exposed to light and air. Dr. F. K. Bellokassy, M.D.

50. It has been noticed in child guidance clinics that the "broken home" is a frequent cause of juvenile delinquency. D. M. Foubister, B.Sc., M.B.

51. * * * in infancy the amount and nature of the feeds should be ascertained. The technique of feeding must also be considered carefully. If this is overlooked symptoms arising from mismanagement may easily be mistaken for constitutional ones. Dr. D M. Foubister, M. B.

52. Naturally a desire for ice-cream or sweets is not accepted unless it is very strong in children. Aversion to sweets is a peculiar symptom. Dr. D. M. Foubister, M.B.

53. Sensitivity to noise is so common in young babies that unless the baby "nearly jumps out of its skin" at slight noises it may safely be disregarded as an individual characteristic. Dr. D. M. Foubister, B.Sc., M.B.

54. It is well to keep in mind that very young children understand much more than we are apt to think. A normal child in its second year understands considerable amount of what is said in simple language. Dr. D. M. Foubister, B.Sc., M.B.

54. In assessing our results in asthma it is important to keep in mind that four out of five asthmatic children recover as they grow older without any treatment. Dr. D. M. Foubister, M.B.

56. Nine tenths of the disease to which flesh is heir is due to the abuse of allopathic medicines in infancy and childhood. Dr. Gilman.

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DEFENCE OF CHILDREN.

It is in the fitness of things that a National Conference in defence of children is being held in Calcutta to discuss the problem of children in all its aspects. The child hitherto has been the exclusive charge of its parents. These or at least the vast majority of them, do not regard their children as problem either. In our country in particular the child is viewed by its parents as part of the being of them both—as natural and as inseparable as any one of the limbs of the body. The conception is at once beautiful and sublime. But its danger is that the child becomes liable to neglect. How real is this danger is evident, to cite the extreme example, from the children found accompanying their beggar parents as the latter go about begging. What is true of the family is true also of the nation. Like the parent who considers his child as too close to himself to become anything like a problem—to need, in other words, any special care or attention the nation hitherto has thought very little about children. Though described conventionally as young hopefuls or citizens of tomorrow, children, in the main have been thought of, if at all, as the concern of their respective parents. It is a dangerous psychological stupor

which the conference owing its emergence to the fore sight, zeal and sympathy of Dr. K. C. Chaudhuri is expected at least to shake. The child had a special problem of its own even in the golden age if even there was any. His problem has increased in number as well as in complexity in the post-war India and have assumed, we fear, unmanageable dimensions. Perhaps ninety-nine babies out of the hundred are born now-a-days with some serious physical handicap inherited from their under-nourished parents. And they come to a hostile world deficient even in such essential gifts of Nature as sunshine, air and water. The overwhelming majority of them do not possibly get adequate breast-feed and when the time comes for them to consume normal human food they find most of the body building items beyond even their dream. The atmosphere of strife which surrounds them stifles their soul and the physical dirt and the moral filth in the environment cause even at the earliest age irreparable damage to their emotional life. The seed which the school might sow can not naturally thrive well in the uncongenial soil into which it falls. Thus the want and the evil which stifle and poison the young ones in the cradle go on multiplying as the children grow to manhood instead of being successfully combated by the successive generations; of such a gigantic and multi-pronged problem the solution is by no means easy. No one should expect a miracle from the Calcutta Conference. It is, after all, a conference of well-meaning persons though some of them are experts in the treatment of children diseases—both physical and mental. Such a conference cannot even formulate a programme of child welfare commensurate with the magnitude of the problem. Its role mainly is educative. The utmost it can do is to give a lead to public opinion to make it conscious of the existence of such a thing as the problem of children in India and to stimulate it to demand effective action by the government. The case has been succinctly and very expressively put by Dr. Chaudhuri. "If the children can be made healthy and efficient, much of the necessity for adult welfare will

disappear and a generation will be created with better health and newer outlook of life." If the conference can make the public realise this, it will have served its purpose well.

Hindusthan Standard.

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THIRD COMMONWEALTH MEDICAL CONFERENCE. (Dr. B. C. Roy's Speech)

Inaugurating, Dr. Roy said that medical practitioners had mainly three duties to perform—to give relief in diseases and wherever possible to cure them, to prevent diseases and the third and perhaps the most important one was to find out ways and means of improving public health in their countries. Though there were particular diseases found in different countries of the Commonwealth and there was no particular disease which might be called a 'Commonwealth disease' there were certain diseases again which were known to all countries. They could discuss the diseases, common or particular to one country and might benefit by mutual exchange of experiences. Personally, Dr. Roy did not like the term 'tropical diseases' but then there were various agencies and factors behind them also.

Dr. Roy said doctors had to find out why a particular disease was found in a particular country, taking into account the conditions of life responsible for its growth and spread. In such investigations the standard of living of the people, their diet, climate of the country and similar other things had to be taken into consideration. This was an important task, Dr. Roy added, which the doctors of the commonwealth would have to perform. Not only between countries but the factors that caused disease in one person often did not affect another person living in the same family under the same living conditions. And again, while germs of particular disease thrived in one country they did not do so in another. Doctors would have to go into the intricacies of these problems and to try to solve them.

PREREQUISITE FOR MEDICAL DEGREE.

New Delhi, March 19th.

Medical graduates will be required to practise in rural areas for a period of about three years after their course in the colleges, before being awarded the degree.

This suggestion is being considered by the Health Ministry, Govt. of India, and has already been placed before the Planning commission for their examination, it is learnt.

This step is contemplated to provide better medical care of the sick population of the country, particularly in rural areas. (U. P. I.)

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UNPRECEDENTED WATER FAMINE.

IN MADRAS CITY AREA

Madras, March 19th—The Madras Corporation, faced with an unprecedented water famine in the city, to-day issued a warning to the people that all non-domestic and domestic water supplies would be cut off and only a limited supply given for one or two hours a day through public fountains, if the Red Hills Lake level went down to 28 feet.

“If there are no rains the Lake level will go down to 26 feet before the first week of June and thereafter supply from this source will be extremely precarious,” the notice said.

The present water level in the Red Hills is 29 feet and this is expected to fall below by about the first week of April next. All mills, workshops, foundries, laundries and other commercial ventures have also been warned that if the Lake level went below 29 feet they would be allowed to draw only a minimum supply not exceeding 30 per cent of their average monthly consumption of January and February.

Hindusthan Standard.

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SUMMARY OF AN EXPERIMENT (PROVING)
OF HISTAMINE HYDROCHLORIDE
ON HUMANS

DR. JACOBO GRINGAUZ
BUENOS AIRES, ARGENTINE

Reprinted from Journal of the American Institute of Homœopathy Dec. 1951

In memory of DR. ARMANDO J. GROSSO, homœopathic physician, who encouraged my first steps in this field of medicine.

I dedicate this paper to Mrs. Battista Elena, V., F.N.E. de, Kniznik Nelly, Martinez Dora Z., Tempone Irene O., to Misses Alesia Ana, Bertora, Zulema, Nissen Helen, Pino Laura, Rietti Helena, Rosenthal Raquel, Zalutzky Dora, to the doctors Escalante Dardo, Gradia Wolf, Kriner Jose, Martines Carlos, Mesones Humberto, Moize Jonas, Moize Miguel, Munilla Julio B., Bedriguez Velo Angel, Rosenblum Dumoutier Andres, Roux Horacio L., Taratuto Raul, Wiurenos Dardo, to the pharmacists Miss Di Santo Doelia and Messrs, Hochstetter Felix, Hochstetter Kurt and Martinez Juan A., and to Messrs. Armaolea Avelino, Feizo Alejandro, Godoy Nestor, Hochstetter Carlos, Kniznik Moises, Leibson Leonardo, Lopez Bernabe, Rodriguez Heriberto, Silva Garreton Eduardo, who cooperated as volunteers enabling us to carry out this proving. Their proving notebooks evidence a civil heroism that deserves the gratefulness of all those who now are in possession of another weapon to fight disease.

General conditions of the proving.

The general conditions of the experimental method for a homeopathic proving of histamine hydrochloride were complied with in the following way :

1. 39 volunteers of both sexes took part in the proving, without any signs or symptoms of disease at the moment or during the months preceding the proving. Exceptions : Prover No. 1, who suffered from a so-called "allergic coryza" ; prov. No. 25, an asthmatic ; prov. No. 32

with a rheumatic disease of the spine. The laboratory examinations of some provers also resulted in figures that might be considered as abnormal.

2. Provers were submitted to a general clinical check-up. The following laboratory examinations were made: Kahn standard and presumptive reaction, glycemia, blood-urea, red cell count, white corpuscles formula, Schillings hemogramm, erithrosedimentation-rate, chemical and parasitological examination of stools, urine analysis, electrocardiogram, tele-radiography of thorax. Moreover a Rorschach psychodiagram was obtained from each of the provers, method which at present is considered the most adequate and less objectionable in order to discover the psychic structure of personality.

3. Usual subjective symptoms of the provers previous to the experiment were registered by means of a special questionnaire.

4. Provers did not know each other. Exceptions: Provers Nos. 2 and 3, 9 and 10, husbands and wives respectively as well as the group of the Chilean provers: Nos. 34, 35, 36, 37 and 38.

5. Provers were informed separately about the general conditions of the proving, warning them about the fact that there would be test-provers, who were to receive papers, tablets or drops not containing any drug and without anybody knowing their identity beforehand.

6. Provers had no knowledge of the drug to be tried out. Exceptions: No. 9 (who prepared the drug) and prov. No. 39 (director of the experiment).

7. Provers had no knowledge of the dilutions that were to be tried out. Exception: N. 39.

8. Nos. 3, 22, 27, 28 were test provers; Nos. 22, 27 and 28 took the drug later on. None of them had any knowledge of their condition as test-provers; nor of the fact of being given the drug later on.

9. Each one received a note-book bearing the individual number of the prover. Each page was divided into two columns; the first one for the day and hour of the intake of the drug as well as for the day and hour of onset of

symptoms. The second column adjoining to the first one, for the description of symptoms in case of their appearance.

10. Each note book carried a leaf with the following instructions: "Don't trust your memory. Write down every symptom in this note-book as soon as possible, each one on a separate line. Take note of day and hour, every time you take the drug. Describe what you feel without using any technical terms and take note of hour of onset. Try, being complete in the description of your sensations, state *localization*, viz., write down the exact place of appearance; the kind of sensation, experimented, stating what you would compare the feelings to (for instance, if it was a stitching, throbbing, burning, tearing, sensation); *modalities* of sensations such as, (a) if it started suddenly or gradually, if it stopped gradually or suddenly, (b) hours at which the sensation experimented was felt most intensively; (c) influence of rest, movement or any other determined position such as standing, sitting or walking; (d) what effect is produced by being exposed to free air or closed premises; (e) What effect is produced by rubbing or pressing the part affected; (f) what sensations preceded, accompanied or followed upon the symptoms described. Please make it clear in every case, if the improvement or aggravation experimented by any of the above circumstances might be considered as improvement or aggravation of local symptoms or of the organism as a whole. Describe way of sleeping, dreams occurring (write them down immediately upon waking). If there is any perspiration, describe where it appears, whether it is cold or hot, its odour, whether or not being irritant, if you feel better or worse after sweating or if it does not change your condition. State your mood, whether there are feelings like anxiety, desires to weep, your reaction in front of company or loneliness, as well as every change in character. *Moreover women will describe* date of onset of menstruations, their duration, colour, aspect (whether fluid, coagulated or mixed), hours of most abundance, if there is an interruption for days

or hours and anything that might call their attention in comparison with their previous menstruations and genitals."

11. Provers reported news by telephone, one or various times a day. According to circumstances they were seen and examined by the director of the experiment every time it was considered necessary.

12. The rate of laboratory examinations was graduated in accordance with idiosyncrasy of every prover. The laboratorist ignored in all cases whether the results reported by him had any bearings upon the experiment.

13. In order to explore the susceptibility of the provers to the drug, proving was started with a 30th c. dilution. Those presenting symptoms upon 30th c., went on experimenting with 200th c., and 1000th c and afterwards with 12th c., 6th c., and 3rd c., in the order mentioned. That means that every prover was trying a successive series of dynamizations. Exceptions: Provers Nos. 9, 23, 24, 28, 32, 39 who started directly at 200th c. Prav. No. 1 proved only the 30th c., and provers Nos. 24 and 39 only the 200th c. Provers not showing any symptoms with 30th c. continued provings with 12th c., 6th c., and 3rd c. (Till 30th c. inclusively, preparations were made according to Hahnemann's method: 200th c. and 1000th c., were prepared according to Korsakow's method, but starting from Hahnemann's method: 30th c.) In all cases the experiment started by taking only leactose not containing any drug. Exceptions: Nos. 10, 37, 39.

14. In all cases the oral way of administration of the drug was used.

15. During the experiment prov. No. 11 lived at Villaguay (entre Rios), No 33 at Vera (Santa Fe) Nos. 34, 35, 36, 37 and 38 at Santiago Chile (Chilean Republic). While proving the drug prov. No. 39 travelled fortnightly to and from Mar del Plata, stayed some days at Santiago de Chile and for two days at the Pacific Coast.

16. The task of control and surveillance of provers resident in the Chilean Republic was entrusted to Dr. Antonio Morales Delpiano.

SYMPTOMS MENTALS

IRRITABILITY

Fits of irritability.

Irritability on account of trifles with a sensation of uneasiness and impatience.

Irritability, not desiring to be talked to, or to talk,

Desires to fight and argue.

Anxiety.

Anxiety with restlessness.

Anxiety clearing when walking rapidly many blocks, reappearing when at rest.

Anxiety mixed with gay excitement, improving upon a hard walk.

Anxiety with sensation of lack of air and oppression on chest.

Restlessness, urge to go from one place to another without any determined purpose

Mental symptoms improving upon a hard walk.

Alternancy of bad humour and irritability with a state of gay excitement at noon with a sensation of euphoria that prevents from concentrating on work, going from one place to another.

Gay excitement, at afternoon, that prevents from concentrating on work, going from one place to another, with anxiety.

Sadness, depression, tendency to melancholy and feelings of unhappiness.

Mentally sad and worried about his troubles.

Desires to weep.

Impatience.

Waiting makes extremely nervous, walking up and down, being unable to stay out.

Desires to reproach.

Reproaches for trifles, selecting the bad things in order to protest.

Susceptibility.

Easily offended.

"Nervousness" at epigastrium when receiving news or remembering disagreeable happenings. Happenings "are felt" in stomach.

Forgets names of persons.

Difficulty to find the adequate words during conversation.

Difficulty of comprehension and memory.

Slowness of mind.

Mental symptoms appear during day-time.

SYMPTOMS : GENERALS

GENERAL TIREDNESS.

Tiredness as upon unusual physical exercises, like after having walked or performed excessive exertions.

Tiredness with bruised sensation, of generalised contusion, desires to be sitting or lying.

Tiredness with general lassitudē as by flu.

Generalised asthenia, without will nor strength for work.

General lassitude with weakness for walking.

Impossibility to walk as quickly as usual.

General weariness.

Weakness with heat all over the body, dizziness and generalised perspiration.

DRYNESS OF MUCOUS SURFACES

SUPERFICIAL BURNING, ARDOROUS SENSATIONS IN SMALL SPOTS

Fugitive circles of superficial burning.

Limited regions of hyperesthesia with ardor or burning sensations.

Paresthetic sensations of burning, pricking and burning picking, tickling, crawling, numbness and sensation of electricity.

Involuntary spasmodic jerks of groups of muscle-fibres.

Muscular drawings and jerks.

Myalgiae, generalised, and arthralgiæ in large and small joints.

Pruritus without eruption.

Pains, oppressive, constrictive, tensive.

Pains, contusive, bruised and sore feeling.

Burning pains.

Dull pains.

Pains, stitching and pains as produced by a nail being driven in.

Pains, drawing, tearing and throbbing.

Sensation of compression, bandage, belt, cuff, in small zones.

General modality : Better by cold, worse by heat.

VERTIGO

Vertigo with balancing feeling with instability.

Dizziness with balancing sensation and darkening of sight.

Dizziness with lack of balance produced upon increase of burning occipital headache.

Dizziness with generalised heat and weakness.

State of giddiness with sensation of cranial tension as from benumbedness, belchings with gastric anxiety.

Concomitants : Weakness, generalized heat and perspiration. Weakness in lower limbs. Nervousness. Difficulty for reading, comprehension and memory. Sleepiness. Generalised tremor. Nausea followed by heat and perspiration. Arch of heat stretching from occiput to forehead. Throbbing in occiput. Cephalic tension. Frontal heaviness. Painful tension in neck. Stitches in throat. Pain in the back. Sensation of empty head. Pain in chest wall. Breathing difficulty. Toothache. Pain in eye. Testicular pain. Epigastric pain. Pain in right hypochondrium. Belching.

Modalities : Better when resting ; worse when moving, bending forwards, lifting sight.

HEAD (EXTERNAL)

Crawling on scalp.

Scalp sensible to touch.

Sensation of scalp drawing.

Sensation of skin drawing at left temple and at right frontal region.

Sensation of burning, burning pricking and burning picking in small spots.

Itching without eruption, changing spot rapidly.

Sudden pruritus on scalp, ceasing at once by scratching, being replaced by throbbing synchronic to heart beat in a small spot on the vertex, lasting for a few minutes.

Fall of hair.

Hair and lanugo dry and rough.

HEAD (INTERNAL)

Pain all over the head, propagating to ear, lower jaw and spine.

Unilateral headache, on right or left side, propagating to neck, ear, half of face and upper molars; to lower canine; to lower canine and ear; to lower jaw; to half of the face; to half of the face and ear of the same side.

Occipital headache, propagating to vertex; in an arch to frontal region; to neck; to both mastoid regions.

Headache, frontal and supraorbital, propagating to ears; to both zygomatic regions.

Frontal headache, above root of nose.

Headache, unilateral, propagating to border of orbita and eye; to lower canine; backwards.

Headache at temples, propagating to vertex, both orbitæ and eye-balls; to supraorbital region.

Unilateral headache at temples, propagating to upper maxillary; to neck; to ear and half of face and molars; to the face; to eye; to the eye and neck; to both mastoid regions.

HEADACHE, PRESSING, OF PAINFUL COMPRESSION: in places cited.

Fugitive pressing pain, in antero-posterior direction, in a small spot of right frontal region,

Lateral compression of head at the height of both ears or of both mastoid regions.

As if a bathing-cap was compressing the lateral part of the head, especially at the height of the ears.

Painful compression at right temple and occipital region, with dizziness.

Painful pressure, from inside outwards, at right side of head, preceded by buzzing and obstruction of ears.

Burning occipital pain.

Burning occipital pain with dizziness, like balancing, making walking insecure.

Burning pain, stretching in an arch of heat from occipital region to forehead.

Burning occipital pain, simultaneously burning pain in left testicle, upon increase of occipital pain relief from testicular pain and viceversa.

Stitching pains, or as caused by a nail being driven in.

Stitching pain in right half of head, from neck to right supraorbital region.

Pain, from right occipital region to right eye, as if a hard object was perforating this zone, causing an intensive and continuous pain.

Pain, as if a nail was driven into temple.

Pain in right temple and right eye, as if eye was stabbed, propagating to neck.

Stitches in right superciliar region.

Heavy headache, in frontal region, in supraorbital region and temples.

Heavy pain frontal region and in eyeballs.

Frontal headache with painful retro-ocular heaviness.

Throbbing headache at temples to vertex, with pain in both orbitae and eyeballs.

Painful throbbings in temples, preceded by darkening of sight with nausea.

Head stunned.

Stunning by lateral compression of the head at the height of ears.

Cranial tension, like benumbedness, with state of giddiness, and belching.

Need to shake, in order to get rid of a kind of dullness.

Sensation of empty head.

Sensation of brain beating against walls of skull.

Sensation of fullness in head.

Concomitants : Difficulty to concentrate upon or to follow conversation. Bad humour, desires to be left alone. Superficial burning in various parts of face and lips. Nasal and bucal pricking. Tickling in various parts of face and lips. Numbness of lips. Muscles of face feel stiff. Fibrillar jerks visible in various muscles of face and periorbital muscles. Itching in various parts of body and in external auditive ducts. Burning dryness of rhinopharynx. Sensation of nares being dry and widely open. Painful pinching at root of nose. Red face with erythema, as from first degree burning. Face feverish. Mastoid compression. Toothache. Drawing in eye. Giddiness. Belchings and gastric anxiety. Prostration. Weariness and weakness, chiefly in legs.

Modalities : Better by cold, compression, free air. Worse by movement, bending head, by exposure to sun.

Heat in the face.

Face like feverish.

Red face, with erythema like in a first degree burn.

Sensation of scorched face.

Unilateral superficial burning, in zygomatic region ; zygomatic region and temple ; zygomatic region and lower part or orbital border ; zygomatic region to whole cheek ; whole cheek ; cheek and half of upper lip ; external half of cheek ; upper lip.

Pricking and superficial burning pricking in small spots in face.

Itching without eruption, changing place rapidly in small spots of face.

Picking at labial commissura ; in the middle of upper lip ; in zygomatic region ; on cheek.

Tickling, crawling, on both sides of face ; one cheek ; both cheeks, and tip of nose ; central part of upper lip ; at one labial commissura extending at once to the whole perioral region ; half of upper lip.

Numbness in one or the other cheek or lips.

Fugitive numbness at right cheek with difficulty to open mouth.

Numbness at one or the other cheek ; left labial commissura ; lips ; left half of upper lip.

Face feeling stiff and lips benumbed.

Muscles of face feeling stiff and benumbed, more on lips, quite evident on stretching them.

Drawing or tension in parts of face.

Painful drawing on left cheek more severe at zygomatic region and temple of the same side, increasing with chewing movements, when closing eyes and by pressure. Hyperesthesia in the same spot.

Drawings at both zygomatic regions ; at one zygomatic regions ; at one zygomatic region and temple of the same side.

Drawing and numbness of one cheek.

Drawing in perioral muscles of one side.

Jerks and drawings in muscles of face.

Drawing in perioral muscles of one side and internal region of orbital border of the same side ; in the muscles between nose and cheek ; of the zygomatic region.

Sensation of something moving under the skin in zygomatic region.

Lineal depression on right side of face, stretching from temple to chin.

Sudden and fugitive sensation of antero-posterior compression, simultaneously on both superior maxillaries.

Tensive, dull neuralgic pains on one half of face, propagating to superior or inferior maxillary and to teeth.

Pain in upper jaw of one side and in molars and premolars of the same side ; and in posterior teeth of this arch.

Pain in one side of lower jaw and ear of the same side ; and on half face of this side.

Pain in zygomatic region and inferior canine of this side ; and in half of lower jaw of this side.

Pain at height of left temporal-maxillary joint ; at the angle of lower jaw ; at ascendent process of lower jaw.

Concomitants : Superficial burning sensations in different parts of body. Itching in external auditive duct. Burning in mouth. Picking mouth. Food tasteless. Dullness of

head. Burning occipital headache. Ears obstructed. Otagia. Toothache. Sensations of nostrils being dry and wide open. Painful pinching at root of nose. Pressing precordial pain. Myalgia and arthralgia. Zone of burning hyperesthesia limited to left forearm. Partial numbness of sections of upper limb. Nausea.

EYES AND VISION

Superficial burning on eyelids or parts of them ; on parts of orbital border ; at one palpebral commissura ; at one half of eyebrow.

Pricking and burning pricking on lids and brows.

Picking on lids.

Itching without eruption on both lids ; on one upper lid ; on edges of lids ; at one half of lids ; at internal angle of eye ; on one brow.

Tickling on lids of one eye ; on upper or lower lid of one eye.

Involuntary jerks and drawings of muscles visible under skin, of inferior orbicular ; at the height of internal part of orbital edge ; at the height of the external angle ; on one or the other of the upper lids.

Perspiration on left brow.

Tension in eyes and heaviness of lids compelling to shut them often like from a "tic."

Pain at upper lids when looking upwards, with pain in eyeballs.

Small abscess on palpebral edge.

Injected conjunctivæ.

Reddening of eyes, like after having slept badly, with slight photophobia.

Injected conjunctivæ without secretion, intolerance to drafts of air or wind.

Palpebral edges reddish with œdema.

Scarce yellowish secretion making lids stick together slightly when waking in the morning.

Burning in eyes.

Sensation of foreign body or sand in eyes.

Dryness of conjunctivæ.

When moving the eyeballs they are felt like two foreign bodies moving within the orbitæ; with mild pain in ocular balls and superior lids.

Sensation of dryness of conjunctiva, exaggerated upon being touched by air draft.

Stitching pains, as if nail was driven into the eye.

Stitching pain in both eyes or one of them; at internal angle of eye; on brow.

Pain as if right eye was stabbed, propagating to temple and neck of the same side.

Dull pain in one or the other eye.

Pain in both eyes with headache and toothache in both maxillaries.

Sudden pain in left eye, propagating as if it was by means of a cable downwards following the left side of the face to the clavicular bone that would hurt intensively.

Pain in ciliar arch.

Visual tiredness, worsened by looking upon brilliant objects, accompanied by a vivid pain, like fire in the ocular ball.

Darkening of sight previous to a throbbing headache at temples.

Concomitants: Superficial burning sensations in various parts of body. Itching at various parts of body. Burning occipital headache. Stunning of head. Compression at mastoid region. Buzzing of ears, as if going deaf. Pain in ears. Toothache. Painful tension on root of nose. Sensations of nostrils being dry and wide open. Tickling in nose. Nasal obstruction. Numbness of cheek. Jerks of perioral muscles. Pain in throat. Lacunar amigdalitis. Febricula. Pain in spine. Arthralgia and myalgia. Numbness in parts of limbs. Sore feeling all over the body. Generalised weariness. Contusive pain at chest-wall. Breathing difficulty. Dry cough. Pain at right

hypochondrium. Stools less coloured. Burning at hepatic region. Epigastralgia. Nausea. Dizziness with insecure walking. Tremor of hands. Scarce menstruations.

Modalities: Better by cold; worse by air draft, bending head, looking at brilliant objects.

[To be continued.

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MYOPIA.

BY DR. H. K. BASU, B.SC., M.B. (CAL.), D.O.M.S. (LOND.),
D.L.O. (LOND.), L.M. (DUB.)

Myopia (commonly known as short sightedness) is caused by various conditions. To understand them properly one should try to define the normal eye first. In normal eyes the parallel rays coming from infinity or very great distance come to a focus, when entering the eyes, on the retina, the sensitive nervous innermost layer of the eye, without any effort of accommodation on the part of the internal eye muscles called ciliary muscles which constitute accommodation. But in myopia these parallel rays entering the eyes, with accommodation at rest come to a focus in front of the retina and then again become divergent producing a circle of diffusion on the retina. Thus myopic eye is unable to see things at distant. If now the objects looked at are brought nearer, the focus of the rays from these objects also recedes backwards and there will be a position of the object looked at when the focus will just reach the retina and the object is clearly seen. This position of the object is called far point with respect to that eye. So far no consideration of the power of the eye for accommodation is made. Again if the object is brought nearer the eye the focus goes behind the retina causing the image blurred but now the power of accommodation of the eye comes in for help, and the converging rays inside the eyes are more converged by the change of shape of the lens by accommodation, thus helping

the eye to see any object within a few inches from the eye. This point is called the Near point of the eyes. Thus myopic persons can only see all objects between these far point and the near point only,

The causes of myopia :

1. The eye may be longer in length in its anteroposterior diameter than normal eye.
2. The curved surfaces of the eye namely cornea & lens surfaces, may be more curved than the normal eye.
3. Certain changes in the densities of the medias of the eye may be so altered that they force the parallel rays to come to a focus in front of the retina.

Thus almost all protruding eyes are found myopic, where the anteroposterior axis of the eye-ball has increased and has become more than that of the normal eye—called *axial myopia*. This is generally due to some hereditary weakness of the coats of the eye-ball or acquired weakness from any devitalizing effects of the disease suffered in early life. The effect is seen as bulging backwards of the posterior pole of the eye-ball which is less supported in this region and thus cause the antero-posterior diameter to increase.

The curved surfaces of the eye may be altered as congenital deformity or acquired disease after birth, called *curvature myopia*.

The changes of the media are generally due to some disease of the media themselves or changes of the density of the media, in such conditions as early cataract, etc.; these types of cases are called *Index type myopia*. It is a common experience that in early cataract due to increased density of the lens a previously normal person become myopic, a myopic more myopic and a hypermetropic less hypermetropic.

Clinical varieties met with in practice are :

1. Non-progressive type and
2. Progressive type.

By non-progressive type one should not take it for granted that it does not increase but the increase is very low and start increasing from childhood and reaches as

high as about 5 diopters, and this tendency to increase stop at about the age of 28/29 when the maximum growth of the body also is completed. But the progressive type goes on increasing through out life and ultimately may reach as high a figure as 30 diopters. For the point of the diagnosis of the type in early cases one should look into the fundus, when no pathological changes will be visible in non-progressive type but pathological changes in the shape of myopic crescent (effect of posterior staphyloma) and vetreous opacities are noticed in progressive group.

A false form of myopia may be caused by powerful accommodation in younger persons by changing the course of the rays entering the eyes to converge earlier by accommodation, thus giving a false impression that a degree of myopia exists. An error in estimation of refractive power will be introduced in all such cases if this point is not kept in the mind while correcting younger myopes.

Symptoms : Generally only symptom myopic persons complain is that they are unable to see distant object distinctly, but persons with high degree of errors in addition, is unable to do near work comfortably where there is unusual protrusion of the eyeballs as they cannot maintain convergence for a long period. Progressive types see spots and specks floating in front of their eyes and in many cases even after best attempts the vision cannot be brought down to normal.

Myopia once established cannot be eliminated but the progress can be kept in check to some extent by

1. Reducing the hours of near work.
2. Giving rest to the eyes for a few minutes in between the course of near work.
3. Reading or writing only in sufficient light. 3 C. P. should be considered as minimum for the purpose.
4. Holding reading and writing materials good distance away from the eyes.
5. Correcting lenses once every year.

THE ALL INDIA ASSOCIATION FOR THE
PROPAGATION OF HOMŒOPATHY
AND NATUROPATHY.

(Bombay Branch)

The annual General Meeting of the Association was held at the Bal Mohan Vidya Mandir Hall on 16th December, 1951. The Vice President of the Association, Dr. U. M. Roy, presided over the Meeting.

The report and The Statement of Accounts for the year 1950-1951 were read out by the Hony. Secretary of the Association, Dr. F. N. Surveyor. The Report was adopted and the Accounts audited by M/s. B. C. Shah & Co, Chartered Accounts, were passed by the Members present.

The main features of the Report were that the Membership of the Association had during the past year increased from 115 to 175.

During the course of the year, 14 study Circle Meetings were convened; and discussions were held on "Nosodes, Obstacles and Difficulties in prescribing Homœopathic Drugs, Homœopathic Philosophy, Pathology and Therapeutics of Menstrual Disorders and various other interesting subjects.

On 11th April, 1951, our Association Celebrated a double function viz. the 1st Anniversary of our Charitable Dispensary at Govt. Labour Welfare Centre, Naigaum, and the 196th Birthday Anniversary of Dr. Samuel C. J. Hahnemann, at the Govt. Labour Welfare Centre Hall. The function was presided over by the Hon'ble Shri Malojirao M. Naik-Nimbalkar, the Minister for Labour and Industries.

During the year 1951, our Charitable Dispensary treated over 9000 poor patients.

Our President Dr. S. R. Wadia, and the two Joint Hony. Secretaries, Dr. F. N. Surveyor and Dr. U. M. Menon, took a leading part together with other Homœopaths of Bombay, in representing the case of Homœopathy and Homœopaths

in the State of Bombay ; and our State Health Minister, Dr. M. D. D Gilder and the State Govt. have been pleased to pass the Bombay Homœopathic Act of 1951.

After the Bill was passed, our Association started Refresher Courses for the benefit of those practitioners who would come under "C" Register and would have to pass an examination for being up-graded to "A" Register.

The following Managing Committee was elected for the year 1951-1952 :—

President :—Dr. S. R. Wadia, M.B.B.S.

Vice-President :—Dr. B. D. Desai, M.B.B.S.

Jt. Hony. Secretaries ;—Dr. F. N. Surveyor, Homœopath
Dr. U. M. Menon, Homœopath,

Hony. Treasurer :—Dr. M. C. Master, Homœopath,

Ordinary Members :—Dr. (Miss.) Malati B. Chogle, L.C.P.S.

Dr. P. Sankaran, L.I.M. (Madras)

Dr. C. N. Joshi, Homœo. Ophtalmist,

Co-opted Members :—Dr. (Miss) A. S. Khambata, L.C.P.S.

Dr. R. V. Dhamankar, Homœopath.

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CASE REPORTS.

DR. N. BANERJEE, M.D.

A case of Red Leprosy.

Srimati 'A' was attacked with red leprosy all over the body. The odour that came out of her body was intolerable. The case was diagnosed as Leprosy by several allopaths and the patient was told that a sum of Rupees Five hundred was to be spent to meet the cost of medicine and injections. As the husband of the lady was not willing to spend the amount she was placed under my treatment. On seeing the tongue, I prescribed Nat. Mur. This remedy did nothing but changed the colour of the swelling from red to light black. Natrum Mur was continued for some time. When further improvement was not noticed. I

looked at her face and saw that her eyes were sad and the grief muscle between the eye-brows was prominent. This grief muscle cannot develop unless there was grief in the mind. I asked her what was the cause of her sadness. She first declined to answer but when I put pressure on her she said that her husband was living with her young widowed sister and was taking no notice of her. On hearing this sad story, Aurum Met came to my mind. Aurum met in high dilution was given and she was told to come after a month. There was rapid improvement. When she came to see me after the specified time, all the swellings subsided, the foetor was gone and the patient was happy. Several blisters appeared on the soles of the feet. Aur. Met. was continued and after two months, the case was declared as cured. Whenever you will find that the eyes are sad and the grief muscle is prominent, do not hesitate to prescribe Aurum Met. The recovery of her ailment created a stir in the city.

A case of Stone in the Kidney.

Baby Nur Mohd was brought to my clinic for treatment. He was suffering from swelling all over the body and difficulty in passing urine. On examining the pulse I found that the beat in the Vayu region was missing. This is an indication for Causticum which was given in the 30th dilution and the patient was asked to come on the fifth day. Causticum did not show amelioration before the fifth day. After five days when the baby was brought, I found there was no swelling at all. The baby was passing urine freely. The baby's father showed me a piece of stone which came out with the urine. A few more doses of Causticum were given and the patient was discharged as cured. Causticum is to be prescribed if there is no beating of the pulse in the vayu region, if the forearm is cold both inside and outside and if the patient is timid and distrustful.

A case of Dropsy of the Abdomen.

A mahomedan gentleman of black complexion was attacked with dropsy of the abdomen. On examination I

found that the abdomen was very hard. There was costiveness and no discharge of flatus. I asked him whether he had suffered from otorrhœa before. The answer was in the affirmative. I thought it was a fit case for *Calcarea Silicata*. I gave him a dose of this remedy in the 30th dilution and asked him to come after a fortnight. There was appreciable improvement. Bowels were moving regularly. The swelling subsided and flatus was passing as usual. A month after, the patient came and said that he was completely cured. *Calcarea Silicata* is a deep and long acting remedy and is not to be repeated as long as there is improvement.

A case of Weeping Eczema.

A punjabi gentleman from Quetta came to me for treatment. He was suffering from weeping eczema. His face was covered with sores and fluid was coming out of them. It was really a sad case. I asked him to show me his tongue. Seeing the red papillæ near the tip, *Arsenic* was prescribed and the patient was asked to come after four days. When he came next time, the oozing stopped. Two more doses of *Arsenic 30* were given and after ten days, the patient appeared before me perfectly cured. In case of weeping eczema on the legs *Asterias Rubens* and on the feet *Silicea* act nicely. *Asterias Rubens* is to be prescribed if the noselids are thick and *Silicea* if there is a history of Otorrhœa.

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LOCALISATION OF PSORA.

(DR. N. BANERJEE, Meerut)

The mysterious way in which psora localises in the different organs of our body and produces diseases is really interesting. Every homœopath knows that psora comes

from evil thinking. All kinds of thinking do not produce psora. The thought of a saint and the thought of a thief are not the same. The Laws of Thought lay down that a man thinks as he is interested. If the interests are different, thoughts will be dissimilar. If we lead an orderly life, our thoughts will be in order. But ignorance which is man's greatest enemy offers an obstacle to lead a well-balanced life.

Man forgets that the same soul exists in him as well as in other creatures of God and that the root cause of sympathy is oneness of soul. If we do not bear this in mind, we would be selfish and unsympathetic and we will try to do harm to others. If our thoughts are bad, naturally outbursts of psora will take place and we will suffer from some sort of disease or the other. The greater the mischievous propensity is, the more difficult the disease will be. Our brain has two sides the constructive and destructive. Men with an evil bent of mind like to develop the destructive side. The explanation that can be offered for this is that such men are in the grip of Maya or illusion.

If we think seriously we shall come to the conclusion that the disease from which a man suffers is a kind of self-imposed punishment. Our ignorance is responsible for this kind of penalty. We daily see that some people suffer from piles, some from cancer, from eye-trouble and so on. Diseases therefore are of our own making. We prepare the ground first and then diseases come.

Let us now explain how the localisation of psora takes place. Our mind may be compared to the diaphragm of a telephone. When we use a telephone, the diaphragm vibrates and it sends out vibrations to the opposite end. There by means of an electrical device, these vibrations are transformed into sound and the voice, is heard. Similarly when we think, our mind vibrates. Some of these vibrations go outside and some remain inside. Those that remain within are absorbed by some internal organ. For different

kinds of thinking, different organs have been created by God. For instance, kidneys receive the thought vibrations of hypocrisy and cunningness and renal colic is the result. In like manner, skin and eye diseases are the results of selfishness and ingratitude. Instances can be multiplied. A single bad thought cannot produce a disease. Repetition is necessary. By thinking again and again the same kind of thought daily, psora goes on accumulating in some particular organ and when the limit is reached, diseases will break out. If, therefore, we want to remain healthy, we must antidote bad thoughts with good thoughts; otherwise the inevitable will happen. This is what has been said in the Raja Yoga.

Psora is responsible not only for diseases but also for death. From the Hindu view point this is correct. When the five Pandavas were making their journey to heaven, their favourite consort Draupadiji fell on the snow and died. When Bhimji asked why Draupadiji had died, Raja Judister said that Draupadiji loved Bhima more than her other husbands. The differential treatment was the cause of the production of psora and she could not therefore stand cold and died. When Arjuna fell, Raja Judister said that the death of Arjuno was due to this excessive pride. Pride produced psora and psora caused his death. Raja Judister could reach heaven in flesh and blood because he was free from psora and was virtue personified.

The Gita says that diseases are caused by the excess of erotic desire, anger, greed, selfishness, pride and jealousy. Eminent psychologists of modern times also share the same view. In their opinion, psychological disturbances are contributory factors in causing physical ailments. Many diseases such as gastric ulcers, paralysis, high blood pressure, instantaneous deaths, etc. are the outcome of emotional upsets. Truth always agrees.

[To be continued.]

BENGAL'S PIONEER BUSINESSMAN

LIFE OF LATE MAHESH CH. BHATTACHARYYA DISCUSSED.

The Amrita Bazar Patrika—After paying tributes to the memory of Mahesh Chandra Bhattacharyya, a public meeting at Senate Hall, Calcutta, on Wednesday decided to urge the Corporation of Calcutta to name a public road in the city after the “pioneer businessman and philanthropist of Bengal of the last century.”

The meeting was held under the auspices of the Tripura Hitasadhini Sabha with Dr. Syama Prasad Mookerjee in the chair. Speakers included Sri Bidhu Bhusan Sen Gupta, President, Tripura Hitasadhini Sabha, Sri Hemendra Prasad Ghosh, Sri Chapala Kanta Bhattacharyya, Sri Annada Prasad Chowdhury, Sri Jagabandhu Bhattacharyya and Dr. Abinash Bhattacharyya.

Different speakers recalled the life and charities of Mahesh Chandra Bhattacharyya who went to business early with an humble capital. By dint of his perseverance, and mostly by the immense strength of his character he established himself as a pioneer businessman of the century. He was the first populariser of homœopathic medicines in the country and made it possible for the common man to buy them at 4 to 6 pice a dram, then selling at Re. 1 per dram. He used to do business with a minimum profit and the little profit he had he spent mostly on charity and relief and welfare works. There are to-day many well-placed in life in Bengal who still remember him with gratitude for their prosperity which they owe to him. Many homœopathic shops in the city bear his name to-day.

A GREAT EXAMPLE : Dr. Syama Prasad Mookerjee said that through such meetings the examples of the great sons of Bengal like Mahesh Ch. Bhattacharyya must be kept before the eyes of our boys. It was regrettable, he said, that there was a belief that Bengalees were being cornered in the field of business because of “a lack of honesty.” If there was at all such a belief it must be falsified and that by citing the examples of such illustrious lives.

Whatever Mahesh Chandra did, was inspired by an ideal to which he stuck throughout his life. He was a man of character in the fullest sense of the term. At such a time when Bengal was in a labyrinth of problems and when the problems were least cared for by responsible persons it would be good to remember men of character like him.

QUESTION OF MEMORIAL : Dr. Mookerjee suggested that a residential institution to teach pharmaceutical subjects according to his dream be established near Calcutta. He said that a suitable site was being sought for a long time without any effect. The Government was also approached but there was no response. He appealed to private individuals to come forward with the offer of a suitable site for such a school.

Shri Bidhu Bhusan Sen-Gupta, President, Tripura Hitasadhini Sabha, said they had assembled to pay respectful homage to a great son of Bengal. Mahesh Chandra Bhattacharyya was a pioneer in the field of pharmaceutical business and had popularised homœopathy among the people. He rose from a very small beginning by his uncompromising honesty, sterling character and an iron determination not to swerve from the high ideals of service to which he had dedicated himself.—*3rd April, 1952.*

Hindusthan Standard * * * * —Dr. Mookerjee, who was presiding over the death anniversary of the great philanthropist of Tipperah Mahesh Chandra Bhattacharyya in Calcutta on Wednesday said that they should try to establish in West Bengal public institutions in the model of those established in East Bengal by the late Sri Mahesh Bhattacharyya.

Sri Bidhu Bhusan Sen Gupta, President, Tripura Hitasadhini Sabha, said * * * * Mahesh Chandra gave away the profits he earned to suffering humanity anonymously and to the establishment of institutions for turning out future citizens of his ideals.

The meeting adopted a resolution requesting the Calcutta Corporation to rename a Calcutta Street after Sri Bhattacharyya to perpetuate his memory.—*3rd April, 1952.*

HAHNEMANN'S PREVISION OF BACTEREOLOGY—A MISCONCEPTION.

*(Read at the Calcutta Homœopathic Medical College
Students' Re-union, 1952)*

BY DR. G. DIRGHANGI.

Mr. President, Ladies, Physicians & Student friends :

Seldom in my life have I indulged in controversies unless compelled by repeated requests of my near friends and appeal from dear students awakening in my mind a deep sense of duty. To-day it appears to be my imperative duty at their demand to express freely my views regarding the miasms of Hahnemann and the Bacteria etc. of modern times as to their parts in connection with diseases ; because this controversial question has of late been introduced into the discussional field of Homœopathy by some learned friends of the Orthodox School who have honoured us by coming over to our fold. I love them for their search and respect them for their research in their new field. But all new things are somewhat bewildering in the beginning if they are not approached with meek and earnest spirit of learning avoiding reckless dogmatic or hasty conclusions. So it is no wonder that one of them had been so much pleased on reading a pamphlet in Hahnemann's Lesser Writings that he unceremoniously dubbed Hahnemann as the Father of Bacteriology, to my mind rather unguardedly, without spending necessary thoughts on its reaction on our science. He has advanced able arguments : literary, logical, psychological etc. from various angles to prove that Hahnemann had a foreknowledge or rather prevision of Bacteria long before Hoch's discovery of Comma Bacilli of cholera as the causational factor of spreading agent of that fell disease. He is pushing his theory with great speed in the leading Homœopathic Journals of Calcutta in both English and

Bengali. His friends also speak from platforms or in private talks with students supporting the same theme. I would have been glad to agree with those friends in some way if the writings of 1831 had been repeated or at least referred to by Hahnemann in his subsequent writings of years near about from 1832 to 1843, but not blindly as their followers. Among the new comers there are certainly many who try to follow Hahnemann and his faithful followers but only a few others with experience of only few years dare criticize adversely Hahnemannian works in their own way and failing to derive beneficent effect from newly invented methods of their own declare their liberty to cure the patients anyhow i.e. without any fixed principle of any pathy. They take pride in begging and borrowing from other pathies medicines and methods, caring little for well-established principles of practice of Hahnemann and the reputed elders in the family of Homœopaths. Ignorant people take their liberty reverently and regard them as masters of many pathies, little understading that the 'Jack of all trades is master of none.' Bengal is noted for credulity which produced duplicates of Hahnemann, Kent and others. It is difficult to speak with reason in a place where blind following takes the place of rational procedure. A High Court Judge said—In Bengal everyman is a born Homœopath.

I am so sorry to raise a voice of dissent here against the honour given to Hahnemann. For students and some of my friends of both old an new schools, who have examined my observations are keenly willing to carry on purely academic discussion regarding this impropriety. And I know for certain, that difference in opinion on any subject of general interest is not likely to alienate the minds of friends and free thinkers. The writer in the journals mainly based his arguments on quotations from Hahnemann's writings interpreting them in his own way. I must be pardoned if I take my stand on what our master had said in his latest as well as Lesser Writings as I understand them, to

examine critically what these friends have tried to prove ; leaving the truth to be determined peacefully by our unprejudiced colleagues and learned lovers of Homœopathy whose number is not a few now-a-days.

We should not forget, however, that we are here trying to find out the correct views of Hahnemann from his own writings in the subsequent years. My intention is that students of Homœopathy should know what Hahnemann had actually said and meant in his books. They might improve or modify that knowledge later in life. Is it at all desirable to make the defects of Hahnemann's writings loom large before the eyes of students before they are thoroughly acquainted with the truths of Homœopathy as is being done by our friends ?

Let us begin by giving you the plain facts of our case in a nut-shell which you are to consider. Hahnemann published a pamphlet in 1831 regarding what he then thought to be the mode of propagation of the Asiatic Cholera (see Lesser Writings, page 758). In this he used such expressions as "excessively minute invisible living creature so inimical to human life of which the contagious matter of the cholera *most probably* consist". 'The Physicians and nurses take away with them in their clothes, in their hair, probably also in their breath, the invisible (*probably animated*) contagious matter surrounding the cholera patient". Here I say to you "*most probably,*" those expressions being misunderstood turned the Allopathically prejudiced head of our friends to think that Hahnemann then believed, accepted or at least prevised even without microscope comma bacilli discovered by Koch and said to be the cause of cholera or spread of cholera. And that our friend was tempted to propagate this theory to achieve the honour of a discovery so palatable to the taste of Allopaths.

Now I put this question to you. Can my surmise be a reliable ground for holding that only the hope for his own honour impelled our friend to honour Hahnemann as

the father of Bacteriology? Surely you will say—No. Because, the friend may deny it and may put up some more positive assertions of Hahnemann to justify his action. You may also hold that merely my surmise or conjecture resting on *probability* cannot be conclusive proof of the honest friend's selfish desire for honour. Here, for the self same reason, you cannot Sir, take Hahnemann's conjecture resting on *probabilities* in 1831 to be his real conviction or his sure prevision of modern comma bacilli to be the cause or spreading agent of cholera, or I shall show that Hahnemann never repeated or confirmed by his subsequent writings upto 1843, the time of his departure from this earth, what he had doubtfully written in 1831. The thing is when the immaterial miasm of Hahnemann attacks and over-powers the vital force i.e. during the incubation period there are no bacilli, bacteria or parasites of Cholera, Pneumonia, Typhoid or Chronic affections of venereal diseases. Cause must precede the attack. The Bacilli etc., come later on as a result or ultimate issue of the disease. It is like the tension of feeling of two neighbouring governments going on surreptitiously and secretly before the ultimatum is given or armies are called in for open conflict.

In my opinion, Hahnemann soared so high from the depth of materialism of his time that he boldly promulgated that it is the vital force, the immaterial invisible force which keeps man alive, happy and prosperous when in health to realise the higher purposes of his existence. But when deranged by the *dynamic influence* of morbidic agents inimical to life, it produces *disagreeable sensations* and abnormal conditions etc. in the organism and inclines it to irregular process in order to draw the attention of the physician for help, which we call disease. These disagreeable sensations etc. occur during over-powering attack of immaterial miasm on immaterial vital force in the invisible immaterial plane.

[To be continued]

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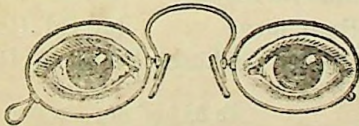
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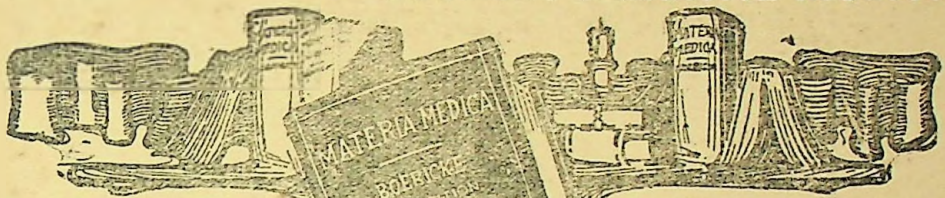
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