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SYMPTOM VALUES

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Homœopathy is sometimes wrongly criticised for treating symptoms.

This is a more excusable error than some that are made, in view of the emphasis placed by the followers of the system upon the symptoms both of the patient and of the remedy.

It is however allopathic medicine than can be more fairly said to treat symptoms, when it prescribes anodynes for pain, sedatives for insomnia and even when it gives strong ointments for eczema or vaccine injections for catarrh.

It will, of course, be objected that eczema and catarrh are not symptoms but diseases.

From the Homœopathic point of view, if any outward manifestation of disease be treated without reference to the whole patient that is symptom-treating and is equivalent to lopping off the branches of a giant weed, and leaving the roots unchecked.

Not only is each successive illness in a patient connected with some one basic disorder; it is more than possible that in many cases each successive illness is due to inadequate treatment of preceding ones.

Each named expression of disease is then, in reality a symptom of a fundamental dyscrasia, which may be

unnamed and unnameable, but is all the same capable of being treated through the totality of the patient's symptoms.

We see, then that for real cure we must take into account all the symptoms manifested by the patient. As a matter of fact paradoxically enough the symptoms of least value for prescribing are those upon which the patient is likely to place most emphasis—the symptoms of his complaint itself.

This is because such symptoms are common to all who are suffering from that complaint and they do not help to differentiate—except when modified, by the individual patient's expression of them. As for the rest, symptoms have various degrees of value.

Seeing that Homœopathy aims at treating the individual patient, the symptoms of highest value in prescribing would naturally be those expressing the individuality. These are, of course, the mental symptoms, which rank highest in taking the case.

There is one exception to this and that curiously enough is in the cases of mental disease.

An unusual mental symptom, which in a person otherwise mentally sound might be of high value in prescribing, would in an insane person be a symptom of his disease and so of lesser value.

This circumstance, by the way, makes prescribing in insanity a very difficult thing. It is a help in such a case if one can obtain the earlier history of the patient, and glean any abnormal manifestations, such as delusions, which were noted before the patient became obviously insane as a whole.

Well, the mental symptoms themselves are not all of equal value.

Let us consider what is the most fundamental instinct of our nature. The instinct of self-preservation.

Therefore any attitude of mind that is opposed to this instinct will be of great value.

Such an attitude is the desire for suicide. Now here again it will be of great help if one particular method of committing suicide is threatened or attempted. Different groups of remedies apply to each method.

The next deepest instinct in human nature is probably the love for those attached to one by ties of blood or marriage. If then a patient suddenly turns against one he or she has hitherto loved and cared for, that is a symptom of very high worth. It may lead one to think straight away of a single remedy such as Sepia.

Another deep rooted mental state is expressed by our fears. These of course, are of most value if recently appearing (as all Symptoms are) but even if dating from childhood, as many fears do, they may be of very great help especially if they are obviously distressing the patient and interfering with normal life.

Some fears are more common than others to the human race, such as fear of the dark or of being alone. These should not be regarded with too much attention unless they are obviously very strongly felt.

As a general rule, symptoms that have an easy explanation are of less value than those which seem inexplicable.

But, a strong fear may sometimes be traced back to a shock or fright years before and then one may be led to think of a group of remedies related to effects of shock, e.g., Ignatia, Nat Mur, Opium, Phos Acid, etc.

Mental depression is important if regularly recurring at certain times or on certain occasions, or if otherwise marked by some special circumstance.

Another subdivision of the mental symptom is comprised in failures of memory.

These are of lesser importance than most other mental symptoms but often help to confirm the remedy. We have forgetfulness of the word or name wanted, of the idea about to be spoken, and mistakes in speaking or writing.

Under mental also might be counted the aversions and cravings regarding certain foods. Certainly when strongly marked these amount to mental states. But, of course, they *must* be strongly marked, not mere likes or dislikes.

Lastly, a mental symptom, which in the Repertory is placed under the heading of SLEEP, is the dream.

Now there are as many pages allotted to dreams in the Repertory as to fears, but in general it may be taken that a dream should not be used in selecting the remedy unless it be recurrent perhaps at intervals of months or even years but recurrent. Such dreams are for instance those of falling or of flying, while there are many others less common.

Dreams as showing the working of the subconscious, by far the greater part of our mental state should receive more attention than is usually given to them.

There are still various mental states that have not been mentioned, such as anger, anxiety, jealousy, indifference, etc., all of which are important if recently occurring and if well marked.

In fact, there are too many mental symptoms to note in one short article. So let us pass on to the next category the "strange, rare and peculiar symptom." This is an arrestingly unusual symptom, which is either strange to the particular patient or strange to any patient.

Some of the symptoms in this group may be so rare that only one remedy is known to be associated with that symptom. As an example take the symptom "Sore throat relieved while swallowing" which at once brings to mind the remedy Ignatia (which is par excellence the remedy of the unexpected).

Next come the Generals, the symptoms relating to the patient as a whole. When the word "I" or "me" is used in recounting a symptom, that symptom may be placed under the heading of Generals.

I feel the cold: the wet affects me (as a whole) though this class of symptom, is one concerned with the whole

patient and not with particular organs or parts, if enough of the latter be affected by the same circumstance then the particular symptom may become a General.

Under Generals may be included the aggravation from certain foods. The patient says "I am upset by so and so" not "my stomach is upset by it." Should it be only the stomach that is affected, the patient as a whole remaining well then of course it is a stomach symptom not a general.

Care must be exercised in ascribing the proper importance to general symptoms. Patients are apt to forget during one kind of weather how they are affected in the opposite kind. Also a patient may fail to differentiate between aversion to a certain condition and being made worse from it. For instance, Lycopodium patients not infrequently hate the cold weather but have to admit they are better in it.

A class of symptom which it is difficult to place in a definite category, but which may be extremely useful, is the time of day when aggravation occurs, of the patient as a whole or of any of his symptoms. There is no space to include all the time aggravations with their remedies, but here again it is recurrence of a given time that makes the symptom valuable.

Lastly, and purposely lastly, the symptoms of the disease—the so called common symptoms. If you can leave these altogether out of the reckoning in selecting the remedy, do so. In any case use them if at all, for confirmation only. Except, as has been already hinted, when such common symptom has been modified by the patient as an expression of it.

For example, pain in the chest in pneumonia is of no use at all in finding the remedy, but if this pain be found to be relieved by hard pressure and by applied cold instead of heat, it may serve to bring the remedy Bryonia into the picture.

—So much for the various symptoms and their values. One must not be deluded into thinking that the more symptoms the patient presents the better. A voluminous mass of symptoms may lead nowhere except to confusion and especially if constantly changing may show the workings of a neurotic mind—which always adds to one's difficulties. In a case with many symptoms it is advisable to run through them first, underlining those of most value for prescribing.

We trust that the foregoing has made it clear that Homœopathy does not treat symptoms, but treats the *patient* through the symptoms.

—*Health Through Homœopathy, March, 1948.*

NON-ROUTINE SKIN PRESCRIPTIONS

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Among our great difficulties, we count the cases which, according to the symptoms present, seem to require a certain remedy, yet fail to respond to the apparently well-chosen medicine. Often the correct prescription cannot be arrived at from the symptoms which the case presents on its surface. In such instances we are confronted with the strange phenomenon that the organism produces a deceptive remedy indication, resembling, as it were, a surface mirage, while the true condition hides in the depths of an unrevealing, silent vital force. For a completely satisfactory explanation we are at loss. Sometimes an engrafted drug miasm may produce the mirage. In other instances, a constitutional weakness may prevent the expression of the true dynamic nature of the disease: The deeper defense mechanism is temporarily paralyzed and only the surface, as it were, produces symptoms, comparable to the deceptive *fata morgana* of the desert. When even this surface reflec-