

High Blood Pressure.

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TREATMENT.

The treatment of high Blood Pressure is a most difficult and at the same time, most important problem to tackle, owing to the manifold etiological factors concerned with its production and the diversity of symptom complex which it presents.

As the only noble aim of Homœopathy is to treat the patient, a most careful investigation of the case is unavoidably required. For example, we must know the habit, the constitution, the occupation, the number of hours he has to work, the mode of dietary, the history of the present illness with any peculiar symptom, the past history of his illness especially of any infectious disease and the family history of the patient.

Most rigid attention must be directed to elicit the presence of any deep seated dyscrasia or any chronic miasmatic taint which is directly or indirectly associated with the causative factor of this common but unyielding malady.

There is no patent panacea which can be regarded as a specific as we find many so called "sure-cures" in the allopathic system. Each and every drug from A to Z which we ordinarily meet with in a good Materia Medica may be indicated in a case of high blood-pressure provided it is selected on the basis of totality according to the instructions of our great master Hahnemann. Since our knowledge of the materia medica is too meagre to admit of such a selection, a good repertorial work should be resorted to by every conscientious Physician. A cured case

of high blood pressure is appended herewith to indicate how a selection has been successfully made.

Before attempting to sketch in detail the treatment of high blood pressure we must at the outset carefully consider the advice of Sir Clifford Alburt who says "If we can catch hyperpiesia early and keep at work against it, it can be cured more often than not." He further adds "when the system has taken a new set, the whole has re-adjusted to the altered conditions and the new attitude is more or less permanent. Therefore to bring back the old equilibrium of pressures by active treatment is out of the question and diligently to attempt it is to do more harm than good." No matter how trivial a symptom of high blood pressure we meet with in a case it means the patient has entered into a dangerous zone, cardiac compensation is threatened, vascular accident is forecast or the activity of some vital organ is about to be interfered with, owing to diminished blood flow. So "sound sleep by night, study and ease together mixed with sweet recreation" must be the motto of his life, or as Cowper says, "It is pleasant through the loop holes of retreat to peep at such a world to see the bustle and not feel the crowd." We should preach plain living and the patient should be urged to lead a peaceful life bereft of all the worldly worries, anxieties and excitements.

Occupation :—These patients will do better if they retain their interests and do some work than if they give them up, for, relinquishment of work to which habit has accustomed them is not infrequently followed by rapid deterioration ; for example, if a businessman be asked, all of a sudden, to wind up his business and discontinue his work, he might have a high rise of blood pressure by brooding over the great loss he has to sustain, but if he is advised to continue his work in a limited

manner with shortened office hours, he would be much happy and this reassurance would have a beneficial Psychotherapeutic effect on the lowering of his blood pressure. We should advise him not to work for a long time at a stretch, to keep more assistants and do only light work for himself.

Exercise :—A light exercise such as walking, slow riding, breathing exercises may be recommended but short of undue fatigue or marked dyspnoea. Hurry in eating and work should be totally abandoned. Lifting of heavy weight and any form of exercise or exertion immediately after meals should be strictly avoided. The patient should not run to catch a train, bus or tram when going to his office or place of business.

Massage : Those who are unfit for active exercise should be advised passive exercise and massage. Massage and vibration have the distinct advantage of dilating the peripheral blood vessels, lowering blood pressure, favouring tissue metamorphosis, destruction of toxins and renal elimination.

It should be applied especially to the spinal column and should be heavy enough to convey deep percussion to the tissues below. Abdominal kneading decidedly reduces Blood pressure.

Rest and Sleep :—Rest is the keynote of the treatment of high blood pressure. Mental, Physical and Chemical activities are expressions of life; with their cessation life ceases, but they can be kept within normal limits, so rest does not necessarily mean abeyance of function, it means the economy of functions as well, especially the function concerned in digestion, circulation, metabolism and excretion. Rest for an hour after each meal and at least nine hours in bed at night should be strongly advised. The patient should sleep in a

room with fresh air but avoid exposure during the night. If there is sleeplessness a light warm bath and a glass of hot milk should be taken before going to bed. Gentle rubbing of head, feet etc. would soon lull a man to sleep.

In case of very high blood pressure complete rest in bed should be advised until the optimum reduction in the pressure readings occurs.

Clothing :—The Patient should dress warmly at all season of the year, for a warm skin means that there is more blood in it than when cold. Light woolen or silk next to the skin takes up the moisture and preserves an even temperature. The Patient should not expose himself to the sharp cold of winter even for a brief period. He should also avoid walking against high wind or walking out into the cold improperly clad.

Diet :—We really know very little of the effect of diet on blood pressure but common sense is as important an ingredient of the dietaries of high blood pressure as calories and vitamins. The keynote of dietetic treatment is to maintain general nutrition but these patients have generally good appetite which they indulge without stint and so they are apt to exceed their Protein and Caloric requirements, consequently a limitation of the quantity rather than the quality of food should be strictly enjoined. The amount of food to be allowed depends on the constitution of the patient. For weak and undernourished individuals a full nourishing diet should be advised but for an obese a reduction in the amount of food consumed is unavoidably required.

The usual advice is that these patients should never eat until hungry and then eat a small meal slowly and after thorough mastication, consuming no fluid during a meal thus preventing as much as possible :—

- (a) a dilution of gastric juice ; this means easy digestion.
- (b) Hyperaemia of the splanchnic vessels thus relieving the heart of an extra-strain.

They should avoid or minimise :—

- (a) Meat, fat fish, (c.g. Hilsa) highly spiced dishes, salted butter etc.
- (b) Tobacco.—The use of tobacco in any form should be discontinued as it causes Tachycardia and Cardiac irregularities.
- (c) Strong wines.—These should be given up or at least greatly restricted.
- (d) Tea and Coffee.—Excess of these beverages are distinctly deleterious to health but may be allowed in moderation (say a cup a day) without much harm.

They may with advantage take the following :—

- (a) Barley water, green-coconut water and milk—These act as best diuretics.
- (b) Fermented milk.—Which inhibits intestinal fermentation and acts as an excellent preventive of arteriosclerosis.
- (c) Fresh fruits and green vegetables which serve as laxatives.
- (d) Lemon juice—This acts as a best decalcifying agent for atheroma of large arteries and is also a laxative.

(N. B. The supper should be very light and should be taken before 8 P. M. daily.)

- (1) *Meat* :—Physiological economy in nutrition means temperance and not prohibition, so a patient, with no Nitrogen retention (to determine which the estimation of Blood urea and urine urea is

advisable) may be allowed meat of any variety, of course, in moderation.

The best course would be to follow Foster's Rule. Foster has recommended 8 gm of Protein per Kilogramme of body weight, allowance being made in the obviously obese. The extractives of meat are believed to be especially harmful and therefore Soups, Sauces etc. are best avoided and such meat as is taken is safer boiled than roast.

- (2) Carbohydrates—If there is an increase in the blood sugar, carbohydrates should be gradually cut down until the blood-sugar returns to normal
- (3) Salt—The intake of salt should be limited to that which is cooked with food it may be totally abolished with advantage if there is œdema.
- (4) Ingestion of fluid should be cut down especially when there is œdema or signs of circulatory failure.
- (5) In sudden crises of high B. P. during which the Patient is kept in bed, a diet of milk only is the most pressure-reducing.

Climate :—These patients should be encouraged to take long vacations seeking a warmer climate during the cold winter months and a cooler climate in the hot summer.

A dry inland climate of moderate elevation that is bright, sunny and mild in winter is decidedly the best.

Hydrotherapy :—Hydratic measures possess a particular value in the treatment of sclerotic vessels by reducing undue constriction of the vessels and augmenting the blood flow.

- (a) Mud and heat baths are said to reduce blood

pressure and accelerate the flow of blood through the Periphery.

- (b) Warm saline baths (95° to 100°F) have a beneficial effect in reducing Blood Pressure.
- (c) A partial rub at a temp. of 68°F is the best ; if the Patient stands this, more stimulating measures, such as the full cold rub at a lower temperature may be allowed. It should be noted in this connection that cold baths are generally contra-indicated.
- (d) The application of cold to the Pericardium and head is of great service, it not only meets the effect of the disease but also counter acts the added strain placed thereon by diaphoretic measures.

Physiotherapy :—

- (a) Autocondensation is useful in simple hypertension. Difficulty is that one should be very careful in applying this in cases of arteriosclerosis and that periodic treatment is required.
- (b) Light bath—relaxes the Peripherel Capillaries, promotes diaphoresis, favours elimination of toxins through the emmectory organs and drives the blood from the interior to the Periphery. In this way it diminishes the blood pressure and thereby relieves the heart and the kidney of an extra load.
- (c) A combination of body cabinet radiant light bath for 10 to 20 minutes (until the patient perspires profusely) followed by a warm shower or Pin bath, gives very satisfactory results.
- (d) Exposure to superheated dry air, application of surface high frequency current along the

spine are also suggested as pressure reducing measures.

Remedial measures :—

Following drugs have been found to be most useful and generally needed in the treatment of high Blood pressure.

Glonoine —

If the principle of homeopathy is worth anything at all, Glonoine must occupy an important place among those drugs which are concerned with some active changes in the cerebral circulation. It produces cerebral hyperaemia as a result of excessive heat or cold, mechanical jarring, suppression of menses and emotional disturbances. It is a vagotonic drug and acts on the vasomotor nervous system, and the cerebral symptoms such as severe congestive and throbbing and bursting headache might be explained by its action on the vasomotor centre, controlling the arteries, and sudden increase in the frequency of the heart's action is due to the depression of the vagus. The validity of the above statement is quite perspicuous from the absence of any head symptom in some of the provers of Dr. Dudgeon. Experimental researches carried on with frogs have shown that it produces tetanic convulsion followed by general paralysis, even mammals get convulsions beside dyspnoea, quick pulse mydriasis and general paralysis. The convulsion seems to be of cerebral origin because when the cerebrum is removed before poisoning, the frog does not get convulsion. Autopsy reveals hyperaemia of the cranial contents. Riehle says that it produces fullness of the head and throbbing of the temples. Hughes says that it is a capital remedy for the disturbances of the inter-cranial circulation, and those which result from menopause and menstrual suppression. It has proved to be a great remedy for sunstroke. The

patient is afraid to shake his head lest it should fly to pieces.

Long lasting pain in the occiput with vomiting—
Nankivelle.

According to Dr. Lippe—it produces severe headache pulsation in the temples, fullness and heavy pain on the vertex; least motion greatly aggravates; cuts his hair short to relieve the heat and heaviness, no appetite, such weakness of the limbs that he cannot stand.

Lilienthal observed that it produces tooth-ache, pain continued with sudden aggravation, it produces great lassitude and vertigo on assuming an upright position. Headache instead of menses. Sunheadache, choked feeling in the throat. Gnawing pain in the stomach, constipation with hemorrhoids or diarrhoea. Tachycardia and fainting spell, itching all over the body.

Some other guiding symptoms are:—

- (a) Fear of being poisoned, of impending evil or of death.
- (b) Loquacity, confusion, forgets the location of his own house, well known streets seem strange, frantic, attempts to run away, to jump out of window."
- (c) Nervous temperament, alternate congestion of head and heart.

Modalities :—

Better—Brandy.

Worse—in sun, overheating, stimulants, left side, from 6 a. m. to noon.

(to be continued)