

Are our systematic writers on Homoeopathic Materia Medica justified for statements of opinions? Are college teachers teaching real Materia Medica? - Some thoughts and thinking on a research project.

ABSTRACT: At present our Materia Medica of Homoeopathy is a "Mixed Bag" of signs and symptoms of drugs / medicines. We have in it - wanted and unwanted symptoms and signs. What we need is "what is curative in medicines?" for "what is curable in diseases (1, para 3)" which is not there. It contains proved, unproved, assumptive, unauthenticated, unverified, imaginative, speculative, figurative, picturised, hypothetical, false conjectures and fictions, mis-interpreted, hallucinative, illusionary, delusionary, dreamy, abstract, pathological, poisoned and poisoning, emperical and theoretical and of opinions - a Chaos. A dilemma - of students, beginners and practitioners failures.

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Our "one hundred (and more in India) teachers of Materia Medica, all lecturing on *Aconite*, all give you the same grand totality and pathogenesis, the same symptoms, the same illustration, in fact the same grand therapeutic application of the whole Materia Medica (Kent; 2, p 31)". Is there any difference in proved, unproved, clinical, miasmatic, opinions, speculative, imaginative, abstract and theoretical symptoms of the drug/medicine taught in classrooms and seminars?

"Students come here (colleges) to learn a therapeutic based upon universal law that guides to the use of a *Materia Medica*, which, like a diamond glows no less brilliant and like the gold coin brightens on rubbing (Kent; 2, p 32)".

"Students come to colleges to learn relation existing between the drug and disease features. We can show similarity but we cannot demonstrate why there is a similarity. It is not a work that caused a drug picture to be similar to the disease symptoms. Yet the discovery of this similarity was the work of *Samuel Hahnemann*. It is greater than any common place work of man,

that caused the similitude in pathology and pathogenesis (Kent; 2, p 32)".

No headway for real Homoeopathy to know "what is curative in medicine?" We have "to separate the wheat from the chaff (3; p 32)".

"An army of soldiers without the line of officers could not be but a mob; such a mob of confusion is our *Materia Medica* to the man who has not the command (Kent; 2, p 356)".

Much has been placed in our drug monographs and many are in an unarranged condition. Let us straighten all. Trash can be eliminated from our Materia Medica by reliable, authenticated, verified and confirmed signs and symptoms through cures by the use of **Repertory** especially Dr Kent's Repertory (4) which has served us like an undissolvable solid rock of Gibraltar for more than 100yrs. It is the backbone of our success in the practice of Hahnemannian Homoeopathy, when Dr Kent writes; "This third edition completes my life work. I have brought it up-to-date. I have rearranged and made numerous corrections in addition to adding many new remedies. I have verified ev-

ery symptom in this book. You will find all remedies of any value contained herein. The book is complete (Preface to 3rd. edition)". Million and million of cures are made by the use of this Repertory in hands of our able users by verifying and confirming signs and symptoms of drugs again and again for more than a century. Proof lies in eating the pudding. **We learn Homoeopathy through the language of the Repertory (5; p xix)".**

"Yet again, - examination of the sources of the symptoms in question shows that they are of very unequal value. Sometimes they are records of poisonings, when they are of unquestionable value. Sometimes they are the mere statements of systematic writers on **Materia Medica**, which must be taken *quantum valeant*. Very often, however, they are narratives of cases of disease treated by the drug in question, and the symptoms are such as were supposed, either by the observer or by the citer, to have resulted from (so to speak) the *obiter facta* of the medicine. It is obvious that **great discrimination is needed here (6, p x)".**

Recent **New Materia Medicas** and Repertories which are flooding the homoeopathic market come in this category. You can only refer them. With these latest **Materia Medicas** and their additions of signs and symptoms without verification and confirmation in Repertories you hardly can repertorize cases and teach to students (our future wealth!) in classes of our colleges. You do not get during repertorization newly added drugs/medicines in Repertories as "**additions of rubrics and remedies are rare commodities**", in our daily practice for acute as well as for chronic conditions. Where are we? We go from "**reliability to unreliability**" area. We are getting lost. Instead of verifying and confirming rubrics (symptoms) and their remedies what we have, we are invading unknown territory. **Kent's Repertory is a basic work and our standard instrument** to teach the subject of Repertory in our colleges as it is based on homoeopathic philosophy and directions given in the *Organon of Medicine* by Hahnemann for the practice of Homoeopathy.

Each symptom of our proved drug in **Materia Medica** has to go through vigorous filtering test procedure. It is a principle of Homoeopathy to which there is no exception, that you shall learn the action of a drug on the healthy organism before you use it in practice. That is a rule which you cannot neglect. First to know whether the symptom is proved one. If it is proved one it has to be analysed followed by evaluation according to Para 153, 210, 213, etc. of the *Organon of Medicine*. Then, again it has to go through miasmatic analysis and evaluation according to Hahnemann(7) - predisposition factor and latent taint, primary, secondary or even tertiary states and finally gradation according to Hahnemann, Boenninghausen and Kent. Only then can be taken in the totality of symptoms of the drug as well as for the patient having acute or chronic disease conditions. If our approach is guided in this direction we will have better success for "**Evidence Based Homoeopathy**" which is our final goal.

This is to be done through Kent's Repertory (4) by consulting source books and clinical works for the research project. At present let us take three miasmatic nosodes - *Psorinum*, *Medorrhinum* and *Syphilinum* for the study. Nosodes are the end products or ultimate results of the processes of diseases. These are studied and proved on healthy people, just like other homoeopathic drugs. These can be used according to signs and symptoms produced by them as other medicines. Also, there are situations when indicated medicine does not work further or does not relieve diseased condition and the state or there is a miasmatic **block** due to heavy miasmatic load or there is a history of acquired miasmatic diseases associated and suppressed or never well since ... or ailments from ... or family history of miasmatic diseases; then, we can think of giving nosodes as alternation or intercurrent or interpolate or interpose (Hahnemann) to lessen the miasmatic load or **block** or to break the **bond**. Hahnemann has advised and justified for anti-psoric or anti-syphilitic or anti-sycotic drugs in a foot-note to para. 246, 5th Edition and in para. 40

and its foot-note, 6th Edition of Organon of Medicine. Also, we find in Ch. Diseases, Theoretical part (7), on pages 151, 152 and during his active life from 1835 to 1842 Hahnemann was interposing *Sulphur* in many reported cases to relieve psoric miasmatic load or **block**. This is in the history of Dr Hahnemann's active life and Homoeopathy. We can use these three miasmatic nosodes as **miasmatic taint or block removers** or **bond breakers** as advised in the foot-note to para. 40 of the Organon of Medicine (1) instead of giving anti-psoric, anti-syphilitic or anti-sycotic drugs / medicines, if symptoms agree or otherwise as stated above to interpose. **These nosodes go deep at the root.**

Each nosode may present signs and symptoms of other miasm(s) while proving and not of a particular disease product taken and proved eg; *Psorinum*, *Medorrhinum* and *Syphilinum*. Mostly nosodes produce in their provings signs and symptoms of mixed miasms which is evident from our research work. Further research work we would like to carry on first for the medicines which are proved and their signs and symptoms are verified and confirmed in *Materia Medica Pura* and *Chronic Diseases* in order of anti-psoric, anti-sycotic and anti-syphilitic.

There is some misunderstanding, misconception and misinterpretation among many students, teachers and homoeopaths about anti-miasmatic drugs/medicines including nosodes which are called by name anti-psoric, anti-sycotic and anti-syphilitic which are only to be used against - Psora, Sycosis and Syphilis. This is absolutely wrong thinking or notion.

While proving drugs from 1790, Hahnemann never thought of classifying drugs or medicines as anti-psoric, anti-sycotic and anti-syphilitic. It was only after 1816 and later between 1816 and 1828 when he was failing in the treatment of chronic diseases even though he used meticulously the universal Law of Similars. Later when he discovered miasms and formulated the theory of chronic miasms, he coined - anti-psoric, anti-sycotic and anti-syphilitic and used it at many places in *Organon of*

Medicine (1) and *Chronic Diseases* (7) by giving and using one word - anti - miasmatic; for drugs/medicines, and finally used anti-psoric, etc to be specific to prescribe on predominant signs and symptoms of a particular miasm in a drug or patient.

We never know before whether a drug substance to be proved is miasmatic or non-miasmatic unless it produces signs and symptoms on healthy human beings of a particular miasm or combination of two or three miasms as for example; *Lycopodium*, *Phosphorus*, *Nitric-acid*, *Sulphur*, etc. It depends only on signs and symptoms produced by the drug and only then after comparing symptoms of the drug with symptoms of one or two or three miasms we can say or classify the drug as anti-psoric or anti-sycotic or anti-syphilitic or of a mixed miasms. **This is only possible** if we know symptoms of each miasm. That is why Hahnemann writes and emphasizes that; **"the physician must know every symptom and condition of this obscure primary evil** before he could hope to discover **one or more fundamental remedies** whose symptoms cover the **totality of the symptoms of the primary affection** (8, p 169)". This is what Hahnemann wrote about Psora, Sycosis and Syphilis.

On this point Dr Kent writes thus; "... **so called diseases** are not disease as the homoeopath thinks, **but the results of diseases known as miasm**. Psora, Syphilis and Sycosis are the chronic miasms to be arranged in schematic form and the arrangement in such form includes all the symptoms of each of three. **Thus we have foundation to build upon** and all curable cases, **if properly studied, will be cured before they become structural** (2, p 357)".

Hahnemann classified anti-miasmatic medicines/remedies for three miasms according to **"their dominant miasm or miasms"** in their signs and symptoms produced during and after provings and not beforehand. There are always possibilities that one or more drugs/medicines in our *Materia Medica* can cover one or more than two miasms but we have to have eye on symptoms of predomi-

nant miasm.

We have, through research project at the Institute Of Homoeopathy, developed a computer program called Kentian which can classify symptoms of any three miasms - single, double or mixed miasms of any drug/medicine; **old** or **new** one, according to their proved and verified symptoms **within the parameter** of Kent's Repertory.

It was impossible even for Hahnemann to find out and identify the dominant miasm in the beginning but in his later life he managed the problem by solving and publishing book on Chronic Diseases (7) but now, still it remains a difficult problem with many present day homoeopaths. For me it was very difficult until I was seriously involved with my life. It took nearly thirty (30) years to solve my problem to know dominant miasm first through chronic diseases by Hahnemann and then our research work (9) and later by Kentian. Now, we have a way to identify the miasms even in their latent symptoms or states, in active progressive miasmatic symptoms or states and also blown-up symptoms or state in pathology, though **pathology is a poor indication of identifying a particular miasm or mixed miasms**. At present time, we get most of the cases of mixed miasms.

We can not identify miasms merely by objective signs and symptoms expressed in the body of particular part of the body - face, chest, genital organs etc; as these **signs and symptoms are fragments of the whole miasmatic disease** for which Hahnemann writes in Chronic Diseases (7, pp 28,29). Only through signs and symptoms of Chronic miasms (Ch D; 7) no longer an obstacle in our practice for better results when we understand their application. Signs or features can point to study deeply one or other miasms.

"What is curative in medicines?" are signs and symptoms which are produced by a drug in healthy human beings (Male and Female) ie drug proving in which **"each remedy expresses what it can positively cure (6, p 6)"**.

All symptoms in our Materia Medica are not of **equal value and classification**. There is a need to differentiate according to the teachings of Orga-

non of Medicine.

While these signs and symptoms which are not produced by a drug while proving but disappear after the medicine given to patient, are the results of our practice which are **clinical symptoms**.

"For estimation, then, as well as **for verification and illumination, it is necessary to trace Hahnemann's cited symptoms to their originals**.

The work has been done from time to time for individual medicines (6, p x)". Such research project we would like to carry on at our Institute of Homoeopathy.

"Being well aware that these two kind of symptoms, viz: those **produced** and those **cured**, are **essentially different**, we still have, after long and mature consideration, decided to give both without marks of distinction. The marking of such **different origin**, should always be done **with utmost care in the monograph of the Materia Medica**; it should be considered as a matter of the highest importance, **never to mix indiscriminately**, symptoms *reported as cured* (not having been observed on the healthy), with the symptoms *produced* by the drug.

Hahnemann's warning must never be forgotten, see Chronic Diseases, Vol 2, second edition, note to *Alumina*. Hahnemann was right, when he advised us not to be ruled by former cures, but always by the symptoms produced (3, pp 12, 13)". And, on these basis we have also undertaken our present research work. How are we to utilise these signs and symptoms produced by various drugs on healthy human beings of both sex and also those symptoms not produced by drugs but disappearing after the use of drugs as medicines on the sick? Are they clinical symptoms of drugs? Or are they of drugs when reproving was/is done with different potencies as Hahnemann and Kent did and it has happened with *Bryonia-alb* proving in LM potencies in our college at Kottayam, in 1962-63?

For the development of a **new system of medicine** which Hahnemann coined 'Homoeopathy', he had to face a lot of difficulties, prosecutions and problems but he was determined like a rock of Gibraltar to go ahead step by step by solving prob-

lems one by one when they arose to make his discovery of Homoeopathy a perfect one, "The only true science and art of medicine (1, para 60; Footnote)". These historical events how Hahnemann faced them and solved them for the development of Homoeopathy which had reached to its zenith when Hahnemann wrote the sixth edition which was ready in his life time for publication in Feb 1842! "**the most nearly perfect of all**" and on this edition all our works should be with *Materia Medica* when he writes; ".....conditions dependent solely on a **psoric taint**, and easily curable by mild (dynamic) antipsorics remedies without emetics or purgatives (1, Introduction, p 38 Footnote 6)" and further he writes; "The various species of tapeworm are only found along with **psoric taint**, and always disappear when it is cured (1, Introduction; p 49)".

"Hahnemann was not able to manage psora until he had completed his long and arduous labors which ended in the anamnesis of psora. After he had gathered from large number of psoric patient all the symptoms in order to bring before his mind the image of psoric man (2, p.356)". The anamnesis of sycosis and syphilis must be arranged in the same way as of psora before the physician can treat them successfully. Again for syphilis Hahnemann writes; "The most deeply rooted syphilis may be cured, after the removal of the psora with which it is often complicated, by one or two small doses of the decillion fold diluted and potentised solution of *mercury*, whereby the general **syphilitic taint** of the fluids is forever (dynamically) annihilated and removed (1, Introduction, p 46 Footnote)". The same goes with **sycotic taint**. Unless the signs and symptoms of each drug in our *Materia Medica* classified we may not know its utility to treat Chronic Miasms.

Taint is a subjective phenomenon when miasmatic signs and symptoms are on dynamic and physiological levels without pathological signs and symptoms in tissues, organs and systems. We have only abnormal dynamic sensations and functional level symptoms. When miasmatic diseases progress they start producing abnormal and morbid sensa-

tions and functions leading to pathological changes in tissues, organs and systems of the body. When this happens it is a blown-up true miasmatic condition of one or two or three chronic miasms of Hahnemann. When fully blown-up they are incurable. But, in many such cases we can palliate and prolong the life of the patient with less sufferings and make the patient more comfortable. "Cure" claim shall be always guarded. Don't be a fundamentalist. "If we should ever have a complete collection of all important proved medicines printed, with all their symptoms arranged comparably, then our therapeutic advice may be given with differential marks (grades) (3, p 13)". The idea of grading medicines came directly from Dr Hahnemann when he writes; "A complete collection of such observations with remarks on the degree of reliance to be placed on their reporters, would, if I mistake not, be the foundation stone of a *Materia Medica* (10, p 311)".

Further he writes; "The more obvious and striking symptoms must be recorded in the list, those that are of a dubious character should be marked with the sign of dubiety, until they have frequently been confirmed (10, p 516)". Boenninghausen understood Hahnemann's teaching and started grading remedies/medicines in his repertories.

And this is our main aim to suggest for research workers and purpose to undertake the work, "to separate the wheat from the tares", as far as possible for better result-oriented practice of Homoeopathy.

"We of course know how our *Materia Medica* is made up. After the provings are made the question naturally comes up how shall we use them in the sick room (2, p 272)." ie in our clinics and hospitals.

Further; "Well, we study the *Materia Medica* until we have facts enough to make an image of the drug. We study, the verified symptoms as found in our repertories (Kent, 2, p 272)." This is exactly what we are planning and doing by giving verified facts through Kent's Repertory.

One should learn to understand the different symptoms mentioned in the *Materia Medica*. We have

to analyse and evaluate signs and symptoms of our *Materia Medica* through repertories as stated by Kent.

Dr Hahnemann always advised us through *Organon of Medicine* to give medicine to patients according to symptoms **in order of importance** considering Para 153, 210, 213; **and not** according to the names of diseases. **These pathological conditions and names of diseases are only mere abstracts.** However in our repertories many rubrics are there with names of diseases and their medicines which sometimes can be used by knowing the **sphere of actions which are confirmed and clinically verified in practice of drugs/medicines** as an aid for individualization. The list shortens the remedy search in a given case. Its utility in a given case of the disease is to confirm the remedy which is selected or the remedy clinically applied anytime previously. Other conditions which are pathological and yet are symptoms rather than diseases, are convulsions, dropsy, haemorrhage, etc. There is a third class of pathology, the importance of which consists in bodily tendency to produce such changes, such as, warts, polypi, fibroid, tumours. **These are the most important of the pathological rubric as they indicate the tendency of the whole constitution.** And this was the case in my personal life and the observations saved me after six years of search for a remedy for deadly spindle cell fibro-sarcoma when all medicines for six years failed. Forty-five years of living active life is enough proof of the discovery of miasms by Hahnemann on which my personal case was solved. Boenninghausen initially started in his repertories and Kent also included.

Teaching in a right way of *Materia Medica*, *Organon*, and *Repertory* can save future of real Homoeopathy **which is yet to come when we are matured enough.** Homoeopathy is alive but it needs more oxygen.

"The creator, who **arranged the symptom picture of disease** as a penalty to physical sin, **also arranged the symptom picture of pathogenesis**, and **since it must be that this similarity was ordered** or it would not be, it must have been ordered for

some great and wise purpose; to learn which, is **the physician's highest duty** on earth (Kent, 2, p 33)".

"So with a suitable state of civilization, a period of appreciation and greatest need came the doctrine of this immortal *Hahnemann*, a doctrine that stands against the arguments and tirades of its opponents, and like the oak that withholds the mighty storm, grows stronger and more sturdy (Kent, 2, p 33)". **Can we learn a lesson from the history of Homoeopathy that we have to have "Evidence Based Homoeopathy" when sleeping monstrous medical and drug cartels opponents are awoken in this century?**

"The student of our *Materia Medica* **must study a proving** until he feels image of the **totality of sick feeling of all provers** as if he had proved this remedy and felt all the morbid feelings of the provers (2, p 241)". Can we induce our college students and teachers for proving and re-proving of our drugs? Are they ready for Homoeopathy? Do students and teachers of our colleges know the dreadful **sacrifice** made with love for human race by our gallant "Provers of septic poisons, serpent viruses, and poisonous drugs (2, p 351, 352)?".

Hahnemann writes for them, thus; "At first, about forty years ago, I was the only person who made the proving of the pure powers of medicines the most important of his occupations. Since then I have been assisted in this by some young men, who instituted experiments on themselves, and whose observations I have critically revised. Following these some genuine work of this kind was done by a few others. But what shall we not be able to effect in the way of curing in the whole extent of the infinitely large domain of disease, when numbers of *accurate* and *trustworthy* observers shall have rendered their services in enriching this, the only true *Materia Medica*, by careful *experiments on themselves!* **The healing art will then come near the mathematical sciences in certainty** (1, Footnote to para. 145)".

Modern provings are commonly a farce and will not lead to the **elevation that Hahnemann's remedies sustain** (2, p 241)". **Hahnemann's Materia**

Medica is to-day standard, and will be forever. When a remedy is once proved it stands to the end of time; it waits its place to be of use (2, p 34)". Our aim is in this direction to bring out proved symptoms of drugs which Hahnemann proved on himself and his trusted disciples through Kent's Repertory to 'weed out' farce, trash and tares as far as possible by going to books of original sources ie provings. We do not need speculative information in our Materia Medica which Hahnemann opposed. (10, p 813).

Somebody may find any day not gold but a **diamond** in this article.

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Can we Save the Marriage? Part 3 (cont from page 37)

VP Points (compare with your own)

1.	H + 1	
2.	H + 1	
3.		W - 1
4.	H + 1	
5.		W - 1
6.		W - 1
7.		W + 1
8.	} H - 1	
9.		
10.		
11.		
12.		W - 1
13.	H - 1	
14.	H + 1	
15.		W - 1
16.	H - 1	
17.	H + 1	
Total	H + 2	W - 4

Some comments.

1. When one is tired, One does not bring up an important issue keeps it for when one is fresh and full senses. So motivation should be thought about. A tactic? One sleeps, to recover. He stays out of way to allow space to sleep. H +1.

2. In you there is much resentment. Resolve.
3. Both good people - but need to work on relationship.
4. H: a. Does not blow fuse- supports you and says cool down. b. Understood what your show of friendship and said not to do it because he knows both your mother and you and now issue is not so critical. c. Was hanging and decided to stop hanging and go for play.
5. VP: Think about all the above issue and get back to me.

ANALYZE SOME OF HER OWN COMMENTS: With her own mother, who she says demands much-Here the demand is not too harsh - all elders like to know where you are going more for the sake of safety and children resent it - especially teenagers - as if it is eating into their freedom. Pt too is behaving like in teens)

GIVING CAR AND DRIVER FOR MOTHER: Again we can see that she is not going out of her way to do much - but her concept is that she does so much and nobody values her.

YES TELL ME ABOUT THE INCIDENT. (Here we had to get the patient to focus. She is like a volcano- just wants to talk and talk. Has come ready to vent out. Have

to bring her to a point to focus. Then only can I put the plan and strategy which I have evolved while listening to the patient, into action).

INTERVIEW 3 WITH HUSBAND ON 02-03-07

H: I feel stressed.

VP: Why?

H: Don't know so came to you. Feel disconnect with wife at one level. At the stage where feel not going anywhere and want to tell. After coming to VP I look at self - objectively. Wife after session with you, said I feel small. To H asked do you feel you made mistake in marrying me? (She is now begging for re-assurance)

H: To make light of it said: Don't ask questions which you do not want the answer to!!

Today I went to Gym and when came back found Wi weeping. Plus with hormonal up and down - so temperament + hormonal. For wife everything is personal.

One uncle, when I was to marry her, took me for a walk and warned me about his niece, my wife! She is self-obsessed one min and cool next min. First Husband not given happiness. No details. Potent combination.

Her niece - sister's daughter - 5yrs old is exactly like her. If can't get her way, she kicks and wants to leave home and tells mother - I wish you were dead!

VP: You knew her from before. What were the qualities you like about her?

PT: Never knew her. Just fell in love with her. Got married. Irrational thing. Got to know her really only after marriage. When she fought with MIL I couldn't recognize her. Some moments are as if she has no control at all - cannot control anger. Later storm over and she is fine. Like Jeckel and Hyde She needs a lot of attention. That way this job is important and good for her. It gives her much attention. For her too it is everything, so she talks about it continuously. Even in a group, no one else

talks about their work but she is always on the subject. Loves job, but on flip side. She has to travel a lot. Much responsibility. Tired. But she should appreciate - see I am not cribbing. About house, too she has no stress. I handle all purchases. She is a guest.

VP: So what is your stress?

Pt: It is just there. But my hair is Okay, so I am great! No problem. (He came to me for hair fall and it is fine so he is OK. Plus he has learnt to stand up to wife and also to feel that he can be OK without her!)

3RD FOLLOW UP OF THE CASE

1st let us discuss the remedy of the CASE Anxiety levels very high. Pt Hot and > exercise leads to *Kali-iod* as the constitutional remedy with *Arg-nit* as the acute for panic and depression states.

PT did a see-saw Follow ups

1st FU: I feel very small

2nd FU: I don't know what impression I gave you. Actually we are quite a lovey-dovey couple, talk a lot and have fun.

She is now rationalizing their relationship. Her own image has to be quite good in doctor's eyes. The doc has to be positive and give positive feedback. Yes you are both very well-matched. We are just being the catalyst for making your good relationship the BEST.

3rd FU: She went into depression - it has to happen- the see-saw, before she settles on the remedy.

4th FU: Took a holiday. Is very optimistic and learning to handle her outbursts too.

This is what is termed as a CONFRONTATIONAL INTERVIEW. Here the patient is a self-obsessed, little child who has never grown up and needs to be protected and supported. The situation of marriage is very volatile and unsteady and can break any moment. Needs quick resolution. I took a decision that it required strong, wake-up technique - so used confrontation.



Amazing.... Scrabble

ELEVEN PLUS TWO: When you rearrange the letters:

TWELVE PLUS ONE