

# THE SCIENCE AND ART OF PRESCRIBING

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Dr. A. Pulford, a brilliant prescriber is famous for his masterly speeches in the International Hahnemannian Association, of which he was an honoured member. His monograph on "Pneumonia" is a classic".

In the following article he answers a question—What is a Simillimum—in a most original manner.—S.P.K.

Not long ago we wrote a paper for the I.H.A., "The Predisposition, the *Simillimum*". In that paper we made the bold statements that : First, the potency was a part of the prescription and equally as important as the similar remedy in relation to the symptoms, the two together forming the *Perfect Simillimum* ; second, that in each and every case, no matter how severe, serious or complicated that disease might be, the *Perfect Simillimum* should carry that case completely through without the aid of any other agent whatsoever, and in the great majority of cases without a single repetition. Those are indeed bold statements and hard to believe, yet not made without good and sound reasons.

In some of our reports to the *Homoeopathic Recorder* and in our papers before the I.H.A., we reported a case (1) of uterine cancer (?) (allopathically diagnosed) the lady having had all arrangements made to be operated on the day after we saw her. We got her to postpone the operation for a month until we saw what we could do for her. Her history revealed that she had, before coming down with the present trouble, suffered with a typical *Rhus* rheumatism. Her present symptoms were so typical of *Rhus* that it was given to her. It restored the rheumatism,

dispelled the dreadful burning pains and the foul uterine discharges and haemorrhages, and to date the woman has remained in perfect health, and that without the aid of any other remedy and the operation has not yet been performed. We also reported (2) a case of cancer of the upper jaw (allopathically diagnosed) cured with *Phos.* without the aid of any other remedy, which had resisted an operation, radium and the X-ray. We also reported (3) a case of chronic syphilis of 30 years' duration that had resisted all kinds of allopathic drugging, serumizing and injecting, cured with *Hepar* unaided. Also (4) a most malignant carbuncle 8" in diameter by actual measurement and as foul as anyone has ever seen or smelled, cured with *Sil.* alone, unaided by any other measures and several other cases. These were not "maybe" cases, but actual and verifiable facts. These are sufficient to prove then that the *Simillimum*, unaided, will carry a case through without further aid from other sources irrespective of our miasmatic theories. The fact that we take into account miasms does not make the remedy any more, or less, similar, nor does it advance or retard its action or ability to cope with the situation in hand. If your remedy is *Not* the *Simillimum* you will have to do patch work by going as far as you can with one remedy then piece on with another, miasm or no miasm. This then disposes of the first of our contentions.

Now the second part, *i.e.*, the proof that the proper potency completes the *Perfect Simillimum* and that the *Perfect Simillimum* needs no repetition. (5) My wife's brother whose home is in New York city, and who up to the time of his illness had always been remarkably well, was taken with a crop of boils some of which looked suspiciously like carbuncles. His family doctor (an allopath) was unable to cope with them. He was advised to consult a homoeopath, which he did, and with very little better result. Both opened the boils before they matured. His illness was a long, painful job, confining him to his home most of the time and to his bed part of the time. Two weeks ago while visiting in Akron another boil about the size of a good sized bantam's egg and looking suspiciously like a carbuncle appeared on the

back of his neck. Remembering his past experiences he took the train for Toledo on November 16th. We took the case. There was no active chronic underlying dyscrasia, therefore, we decided, since such cases are never acute, that it was subacute and therefore needed not a low potency as in an acute case, nor a high potency as is necessary in a chronic case, but a medium potency, such as is needed in a subacute case. As his symptoms were such as to render the selection of the true simillimum a certainty, the next step was to make that true simillimum the *Perfect* simillimum and prove our contention correct. We therefore prescribed a single dose of the 1m potency of *Silicea*, the evening of November 16th. The result followed out our statement to the letter and verified everything we had said about the *Perfect* simillimum. The action was prompt, with no aggravation, and it was continuous. On the fourth day the core, much reduced in size, fell out after taking off the simple gauze covering. On the 23rd November he took the train back to Akron stating that "he did not know when he had felt so well", and that "that, while the largest, was the most painless, 'carbuncle' he had ever had". Then to verify the above, here is a case reported to me by one of the best and most accurate prescribers we have ever had the pleasure and honour of knowing. (6) "A maiden lady, 50 years of age, had suffered since the age of 8 years with headaches, for which she had doctored for 20 years. After every hard day's work she would be laid up in bed for several days with either a pressive pain beginning in the vertex and extending downward, or a pulsating one in the forehead extending to the occiput and down back to the stomach causing nausea, or a bursting pain from within outward. Pulling back of the head to the heels. Crawling as of worms over bones of skull and limbs. She received one dose of *Silicea* 1m and a second dose to be taken if she should need it. The remedy acted promptly, continuously with no aggravation". We heard not long ago that the lady still has the second dose, that in the 21 years there has been no return of the pain, and that she has remained entirely well. We could cite many other cases but those two are sufficient to illustrate our contention that the

***Perfect* simillimum needs neither aid nor repetition and that it acts promptly and continuously and without aggravation.**

Of course none of us likes to believe that we are not "past masters" in the art of prescribing, but the real truth of the matter is that none of us, not even Hahnemann, Boenninghausen, Kent or any one else who has ever [lived has ever attained that pinnacle. The very best they did or could do was to forge ahead toward this goal and point the way to others who had the intelligence and ambition to see and aim at the final goal. How sad that so very few have intelligence and perseverance enough to "carry on" ! Some of our best prescribers are slightly better than others, but only slightly, the modern homoeopath representing perhaps 10%, and our very best prescribers perhaps 25%. Our very best prescribers would become infinitely better than they are, were homoeopathy fully unfolded and completed and the rest of us would improve wonderfully under the same condition, but the real fact that any of us doubt what has been above put forth is from want of knowledge of unproven remedies ; we are obsessed with the idea that homoeopathy is complete and that we should be able to find the *Perfect* simillimum in each and every case and accomplish a complete cure in every case that comes before us with the very few perfect and the many imperfect tools we now possess. Some day it will all become clear to those who have the intelligence and the will to pursue homoeopathy's unfolding to its completion, but not before.

The only true mark, character, rule and measure of a man's intelligence is his ability to cast aside prejudice, become open to conviction, become willing to investigate, to be big enough to allow himself to admit when he is shown to be in the wrong, and bigger still, to henceforth discard the wrong and practice the right. How many doctors are big enough to measure up to that rule ?

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[*Courtesy* : The Homoeopathic Recorder, January 1929].

