



# Materia Medica Mind: *Opium*

## Kingpin of *Opium* "Fear, Extravagance of"

The meaning of Fear, Extravagance of, is "In excess of what is, in one's estimation, the right limit, scared to cross the limits they have in their minds. This is to be considered not only in matter of regarding money; that this is the limit of the man, regarding his expenses he cannot bear any more it has to be generalised.

This was the third eye of great scientist Dr M L Sehgal He applied this rubric for the first time regarding illness and it is the CENTRAL theme of *Opium*. The patient may be having coryza or cancer, he will not bother for the ailment, remains indifferent towards that ailment, but when the limit crosses then he comes to the Physician. See the questions and answers to understand it:-

Question: Since when have you been suffering?

Answer: For the last.....days (May be 5/10/15 days)

Question: Did you take any medicine?

Answer: No. Sir.

Question: Why did you not take any medicine?

Answer: I didn't bother.

Question: Then why have you come today?

Answer: Now the problem has increased "*Hun Eh Varh Gayi*" (increased crossed his/her limit) "*Pehlan Parvah Nahi Kiti*"

So this small case taking for *Opium* will guarantee success 100%. It is really mathematical. You have to follow the patient's words seriously.

RUBRICS: 1 "Indifference to suffering"

2. "Fear extravagance of".

3. "Stupefaction, arouses with difficult" means he was indifferent to suffering, family members said many times

to consult doctor, means "Rouses with difficulty" and rouses only when limit crossed.

The situation of extravagance during the treatment is very important and you will never fail. The patient says "I am taking medicine from so many days but there is no improvement, there is not even 1% improvement [1% *Vi Aram Nahi, Thoda ja Aram Hunda*] in irritating tone, I should have improved a bit, it has taken many days. It has never taken so long previously whenever I took medicine from you Dr Sahib" the patient can say this either after 5 days or after 5 months means-whenver his limit is crossed. So the rubrics

i) Fear extravagance of ii) Irritability, pain during

At this point you give him/her *Opium* 30/1 dose and you will see wonderful results.

It shares with *Belladonna* to which it is very close, the Rubric "Superstitions"

Question: Why did you think of Homoeopathy?

Answer: My friend has been cured by you, some one else also advised me to take Homoeopathy, as he was cured and suggested your name. I have heard that Homoeopathy cures the disease from the roots.

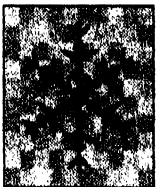
RUBRIC: "Superstitious" (No logical reasoning)

### OTHER SET OF RUBRICS

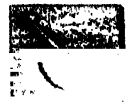
1. Aliments from fright, accident, from sight of an.
2. Anguish, Shock from, injury in (only *Opium*)
3. Anxiety, fright remains if the fear of the fright (only *Opium*)

He saw an accident at a particular period and has been suffering, since (from impact of accident) the shock remains. In such situations *Opium* is very effective. Many a case has been cured just on the cause.

ONE SINGLE RUBRIC SOMETIMES COVERS THE TOTALITY



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Rubric is "Delirium blames himself for his folly (only *Opium*)

**Folly:** To be silly or stupid. He/she narrated the story and gives stress on this wording means it is persistent, present, predominating "Because of my foolishness this has happened. Clearly blames himself/herself for the cause of illness"

Even very chronic cases can be cured, just with single dose of *Opium* 30.

Another example where a single rubric covers this totality.

Rubric is "Indignation, discomfort; from general" remedy is only *Opium*.

Though the supporting rubric is

"Aliments from shame" (*Opium* and others)

He/she feels insulted if you slightly ignore his/her means you not called him/her in your chamber or not offered chair and she feels ignored. At trifles she feels too much shame.

As regards sickness, *Opium* is very effective in cases of pimples/ scars etc. He/she will not go out of house, will not attend parties, will not go to school/college/ office, feels so much shame.

**Difference with *Belladonna*:** *Belladonna* feels ashamed of pimples/scars (Del poor she is means bodily/ beautiwise/poor feeling) but has not deep impact on mind (light desire for / Frivolous), he/she will cover pimples/scars by make-up and will attend parties, go to college/office (Hides things).

#### ONE BIG GROUP OF RUBRICS

1. Indifferent, suffering to
2. Indifferent, complain does not
3. Asks for nothing
4. Wants nothing
5. Content
6. Content and quiet
7. Content, forgets all his ailments and pain
8. Courageous
9. Delusion, well she is

10. Indifference joy to and suffering to

11. Irritability aroused when

12. Danger, no sense of danger has

13. Fearlessness

14. High spirited

You could see the group of rubrics indicating the same sense "whatever may be his condition, whether it is his illness or his family circumstances he is "SATISFIED, CONTENTED AND HIGH SPIRITED" He never raises any hue and cry (indifference complain does not and indifference, suffering to) this is the beauty of differentiation on mind symptoms. See the opposite state "Delirium crying help for" "Complaining, lamenting, trifles about" etc)

He never remembers his illness or pain [content, forgets all his ailments and pain] he has no desires, no demands One who knows the mind of *Opium* addicts need not be explained anything by us.

#### OTHER SET OF RUBRICS

1. Alert
2. Cautious
3. Elevation Mental
4. High spirited
5. Plans, gigantic (very big plans)

He is always alert, optimistic, high-spirited and making big plans (gigantic). He is first indifferent to suffering but when problem increases, then becomes alert and cautious (*Bell* is Light and Frivolous)

#### OTHER SET OF RUBRICS

1. Contented
2. Benevolence
3. Generous, too much

He can help, can give donation to needy persons

#### OTHER SET OF RUBRICS

##### 1. Groping as if in dark

He is not clear, does not know how to come out of his problem. When the problem increases and want to leave the doctor, he will ask the doctor to suggest him to

whom he should consult.

**2. Discouraged, lost all hope**

When problem increases he becomes discouraged but again courage comes to try till totally crossed his limit of tolerance. Such phases come when taking treatment

3. a) Insanity, masturbation from  
 b) Dementia, masturbation with  
 c) Despair, masturbation in  
 d) A/F shame

Such a group of rubrics we have never thought of in *Opium*. This collection became possible only after *Materia Medica Mind* formed

**CASE 1:** A boy aged 18 years, became depressed and shamed, due to excessive masturbation. He felt very guilty (though we medical persons know this is quite a normal process, when unmarried, or if life partner is sick). He stopped going to college and lost interest in commission agent shop/business where he was working side by side. He felt ashamed of the act and he thought he has wasted all energy and has done sinful act.

He was cured with *Opium* 30/1 dose followed by PLH He joined college with three months treatment and started working again.

In such cases, we can add here the rubric “Delirium blames himself for his folly” because almost all says, “I blame myself, why I did so, it is my mistake”

**CASE 2**

It often happens in Homoeopathy, in 50% cases, the similimum is selected after giving one, two or three medicines. Those who say otherwise are bluffing. We should always speak and write truth if we are true to Hahnemannian. We seniors should also write our failures and “when and How” I reached the similimum.

In this case of impotency having both, poor erection and early discharge, my first prescription was: *Nat-m* He consulted me on 12/4/05 and have following symptoms.

- 1) Reserve liking to live alone  
 2) Music liking for

- 3) Consolation aggravates in sad weeping mood  
 4) History of love disappointment  
 5) Salt liking for

Prescription: *Nat-mur* 30/1 dose – 12/4/05  
*Nat-mur* 6/1 dose- 19/4/05  
*Nat-mur* 1M/ 1 dose- 20/5/05  
*Nat-mur* 10 M/ 1 dose- 16/6/05

No result at all; he stopped the medicine, left the treatment and came to consult me again only on 2/9/05 and said;

Dr Sahib I was discouraged with your treatment and left the treatment. Now again I consult you with hope, as one of my friends told that he was cured from you. Then he said, Dr Sahib actually this problem is due to my drug addiction.

Then I asked the Question:

Question: To whom you consider responsible for addiction?.

Answer: I blame my self. I don't blame others for these addiction. I had done wrong

The rubrics worked out:

1. Discouraged, alternating with courage  
 2. Superstitious  
 3. Delirium blames himself for his folly.

**4. Presumption**

2/9/05 *Opium* 30/1, PL/TDS

10/9/05 He was happy, said I am 50% better PL/TDS

17/9/05 really happy and said I am 100% cured.

Note: See the action of medicine where it is similimum and patient could give you key to open the locked case, may on first time, may be second or third time.

**ACONITE-N**

*Aconite* duration might mean only for acute problems of one day/night and not for chronic problems but we have so many beautiful rubrics which indicate its chronic use also. We are using *Aconite* in chronic cases from last 10 years with good results.



**MAIN RUBRICS OF ACONITE (KEY NOTES)**

1. Perseverance
2. Hopeful alternating despair
3. Despair alternating hope
4. Mirth heat during, cheerful heat during (That is as soon as one is in good health, improving)
5. Despair chill during  
(Loses hope and enthusiasm when symptoms of disease start increasing)
6. Light desire for (Either desire for tests to know the disease or I was taking medicine regularly but Dr Sahib why am I not improving?)
7. Delusion, disease incurable he has
8. Fear disease incurable, of being
9. Delusion, body, deformed, some part is.
10. Fear imaginative things of.
11. Delusion, sheep driving.
12. Death presentiment, predicts the time of death
13. Fear, death of.

Here the patient did not talk like *Opium* ie. Fear extravagance, but he/she says, I am taking medicine regularly, but Dr Sahib why am I not improving?

Fear extravagance of, while taking medicine

Dr Sahib I am taking medicine from so many days/months but there is no improvement, I should have improved at least a bit, it has never taken so long previously: that means it has crossed his limits. (But in *Aconite* he/she raises a question, why am I not improving "light desire for" to know the reason).

You have to go to the specific of the patient, to the actual words said by patient, so write always history in the mother-tongue of the patient in his own words".

*Aconite* patient fears imaginary things, (fear imaginary things of), he thinks his disease is incurable (Del disease incurable of being) some organ of his body has some disease (Del body, deformed some part is) when his condition deteriorates he loses all hope (Hopeful alt despair), but when his condition starts improving then he thinks it is easily curable and it is some minor illness (Despair alt hope, delusion sheep driving ie minor

illness ie it is easy to control it ie it is like sheep who are easily controlled as walks automatically in a line, one after another) and the patient of *Aconite* tries and tries again (Perseverance) but when symptoms again worse then ask the question, "why am I not getting well though I am taking medicine regularly (Light desire for, Perseverance) he can directly ask you the question any X-Ray, ultrasound and scanning if needed Dr Sahib, I can go for that or he himself can go for tests and bring the reports (light desire for), and in contrast to *Belladonna* who is "unreliable in promises, frivolous" (That is cannot keep precautions as you advised), *Aconite* is cautious, he takes full precautions as advised by Doctor).

**Note:** Based on these rubrics *Aconite* can cure coryza to cancer. Diagnosis, is for the purpose of diagnosis and we should go for it, but as concerned medicinal part, our medicine is for sick person not for the name of disease.

Three more important rubrics of *Aconite*

1. Communicative, Expansive

It means, "does not conceal any type of information, inclined to give information in detail".

The patient will tell you the history in detail, he/she could not give information in short, you being physician will have to say please tell in short.

2. Carried and Caressed desires to be.

To be treated with affection, kindness, by way of caressing, embracing, want to be loved, to take due interest in knowing him/her.

3. Anxiety, cold drinks amel

Any word which has cooling effect, the ideas, suggestions, drinks, which have the cooling effect (consoling, caressing) the anxiety is over when a promise from anyone comes who can assure him some hope of recovery.

**A FEW OTHER RUBRICS**

i) Unconscious Vomiting amel

The state of ignorance about one's role in a particular situation reduced when one gives expression to his/her



inner feelings.

ii) Rocking amel

A swaying backward and forward, to be soothed to sleep. Patients version ie whenever I am in trouble, I ask my wife to do or talk something to take my mind away from the present thinking and soothe me to rest.

3. Meditations

The act of repeatedly revolving any subject in one's mind, to concentrate on something exclusively without diverting one's mind, to concentrate on something exclusively without diverting one's attention towards any subject.

I think best suited for the religious persons who follow any one "Saint", who do some "Prayer" daily in morning, its just like "obsessive compulsive disorder and the Rubric carried and caressed desires to be" support this because he/she needs "Caressing" and "Rocking Amel" his/her tension which he/she does not analyse logically, can not recognise the reasons behind such evil happenings.

4) Delusions sleeping while awake, insists that he was the persons, looks to be intelligent, alert but tries to be naive i e we can say the highly educated class going to the "Baba's tantriks" means sleeping while awake.

Sheep: An easily lead person like sheep who queue in a line one after another, very easy to handle/to control them, can easily be taken care of.

Patient says, I thought the problem will be like a lion (Cancer or some other dreaded disease) but actually after diagnosis after improvement in my problem, it turned to be a sheep (A minor disease which can easily be managed) and I am feeling relaxed and cheerful.

**ACONITE**

There group of rubrics we usually know about *Aconite*

1. Fear death of.
  2. Death presentiment of, predicts the time of death.
  3. Delusion, die, about to die he is
  4. Fear suffocation of.
  5. Fear accidents of, crossing busy street, crowd in.
- In such fearful conditions, *Aconite* is the answer ie

whenever patients clearly predicts the time of death, and all these fears related to death *Aconite* never fails.

**OTHER RELATED RUBRICS**

1. Ailment from (A/F), fright; accident, the sight of an. (*Aco*, *Calc-c*, *Opium*)
2. Timidity, fright after (only *Aconite*).

The rubrics may be helpful to differentiate other Drugs:

1. Jestng aversion to
2. Jestng, joke cannot take
3. Music aggravates
4. Music aversion to
5. Weeping, music from

**CASE OF ACONITE**

1. Mrs Nirmala aged 50 years of village Kanjila, came to my dispensary for consultation on 10/9/01. She was suffering from Joint pains involving fingers, wrist, knees. She has already taken allopathic pain killers with short relief.

She narrated that she was on treatment since one year, when the pain subsides, became cheerful and hopeful but Dr Sahib when pain again starts I become sad and hopeless (there you will see many patients remain hopeful even if no relief or worse even).

RUBRIC: Hopeful alt despair, Despair alt hope"

Then she said if any blood tests, urine test needed Dr Sahib, I can go for that.

RUBRIC: "Light desire for"

Then she told that she cannot see accident, she fears accident when ever going on scooter/car. I always say please drive scooter slowly, please drive car slowly.

- RUBRIC: i) A/F fright, accident, from sight of an.  
ii) Fear accidents of

On asking about precautions in eating and drinking, she told that she is very serious regarding precautions told by the Doctor.

RUBRIC: CAUTIOUS



Note: *Belladonna* is frivolous, unreliable in promises, though promises Doctor to take precautions but he cannot keep promise, he is frivolous, means not serious and eats, drinks the things prohibited).

PRESCRIPTION: 10/9/01 *Aconite* 30/1  
 17/9/01 Better PL/ TDS  
 25/9/01 Better PL/ TDS  
 7/10/01 Better PL/ TDS.

12/10/01 She told that he had fever for 3 days along with diarrhoea but taken no other medicine (Means expulsion of Toxins as explained by Dr M L Seghal)

20/11/01 Now she has joint pains from 10 days and pains are increasing *Aconite* 6% 6/1 dose PL TDS  
 10/12/01 Better PL/TDS  
 06/1/02 Better PL/TDS  
 28/3/03 Better PL/TDS

Then she was kept on PL and had been given *Aconite* 30/on 7/1/03 and last *Aconite* 6/1 on 7/7/04.

Now she reported on 20/8/05, she has remained free of all symptoms, now has fever from 3 days and was given *Aconite* 30/1 dose, PL for 7 days.

Note: Could you suppose for *Aconite* in chronic cases. It was only the third eye of late Dr M L Shghal, don't bother for miasms, don't bother for short acting/ deep acting medicines, medicine is medicine may be any, supported by rubrics with firm footing, you have to individualize the case with unprejudiced mind.

#### SECOND CASE OF ACONITE

Mrs Swarm Kaur aged 40 yrs came to me on 29/3/05. Problem: She has very severe pain in left side of face and teeth. Diagnosed "Left sided Trigeminal neuralgia" started from 10-11 years but severe from 2-3 years and now daily. It did not subside by injection, eyesight is normal, no vertigo, no vomiting.

#### TEST/INVESTIGATIONS

MRI (scan head) from PGI Chandigarh.

Report: Lt C.P angle epidermoid with extension above

into ambient cistern Arachmoid Cyst?

Medicine taking "Tab Zeptol 200mg. TDS.

History: She was laughing while telling her history. Has "light desire for" as happily gone for CT scan, MRI to know what is the disease. She has anger "Momentarily, during pain she desires "Quiet, wants to be repose and tranquility desires". Her husband told that she is "Benevolent" in nature.

PRESCRIPTION: 29/3/05 *Bell* 30/1, PL-TDS

28/4/05 Report: I have relief for 3 days but again pain started and pain increasing day by day and not subside. *Bell* 6/1 PL/TDS.

16/5/05 Report Relief for 3 days but again started pain and increasing.

Rx- *Bell* 30/1, PL-TDS

23/5/05 "No relief". Then we took the case again.

Question: Have you any fear of operation as advised in PGI.

Answer: I have no fear of operation but I worry who would look after my children, my house and more I might not be as physically strong as now after operation. My husband died 12 years back in accident.

Her relative told, "She is very energetic, she looks after not only household work, also agriculture work.

Question: As your husband died, you look after all work, OK now you tell me what comes in your mind at present about your disease?

Answer: I doubt whether I would be cured or not. As I started your medicine and there was improvement for 3 days, I was happy that I would be cured; but as pain started increasing, all my happiness/ cheerfulness faded away immediately. I thought it is not curable, again same thing happened when again there was improvement with your medicine I though it is a small thing, I would be cured but as pain again increased, all my hopes vanished.

RUBRIC: i) Hopeful alt despair.  
 ii) Despair alt hope.  
 iii) Mirthfull heat during  
 iv) Delusion sheep.



v) Despair chill during.

Question: Then I asked one leading question to confirm *Aconite*. Do you have fear that you have some serious disease in your head?

Answer: Yes, Dr Sahib yes, that is why I gone for CT scan, MRI.

Rubric: i) Delusion, body, deformed some part is.  
ii) Light desire for

Question: If someone gives you encouragement, shows you love, handles you with concern, how you feel?

Answer: I like that very much Dr Sahib

Rubric: Carried and caressed desires to be.

23/5/05 Prescription *Aconite* 30/1, TDS.

20/5/05 No pain at all after that dose PL/TDS

27/7/05 No pain after that dose. PL/TDS

8/9/05 I am very much better, "Bahut thik Hai Dr Sahib" only some tolerable pain occurred for 4 days 1/9/05 to 4/9/05 and I took no pain killer (Dr Sehgal has said such phase can come, would go away with PL) but intensity and duration of such phases should be less.

Note: She has been advised to go for MRI scan head, I will report about it in next issue, but you see really great was Dr M L Sehgal who gave us such a confidence to prescribe such a short acting medicine in 30 potency, in 6 potency, in single does. □

# Family of Strychnine and its relatives

## ABSTRACT

This study is done based upon the action of Strychnine and the alkaloids which have similar effect on nervous system especially Titanic spasms and convulsions. Their practical utility with relative comparison has been described on the basis of physiological action. Signs and symptoms appears during proving and poisoning as well as clinical observations.

## INTRODUCTION

Strychnine is an organic compound, a poisonous alkaloid. It has been used in rodent poisons. Within 20 minutes after ingestion, it causes painful muscular contraction and convulsions pulling the head back and arching the back. Death usually results from respiratory mus-

cular spasms. Strychnine is the common alkaloid of Loganiaceae family. The remedies of Strychnine family are *Nux-vomica*, *Ignatia*, *Gelsemium*, *Upas-tiente*, *Curare*, *Spigelia*, *Hoangnan* and *Strychninum*. Among them *Nux-vomica* (*Strychnos Nux-vomica*), *Ignatia* (*Strychnos-ignati*), *Upas-tiente* (*Strychnos-tiente*) contain only Strychnine along with very little amount of Brucine.

## COMMON EFFECTS OF STRYCHNINE

It produces excitation of all portion of the nervous system by increasing ongoing neuronal activity through blocking of post synaptic inhibitory influences, hence causes convulsions affecting all the muscles at a time. It causes first clonic then tonic type of spasm with shorter interval and longer paroxysms.

During spasms face becomes cyanosed and wears an anxious, apprehensive look.

Eyes are staring; eye balls prominent and pupils dilated. There is frothing at the mouth, frequently stained with blood.

Body is arched in the position of opisthotonos ie hyperextension with resting on his heels and occiput.



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