

John Henry Allen



J. Henry Allen, M.D.

John Henry Allen (1854-1925)

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1892 - Two successful homoeopathic operations

“CASE A. - Mrs. C, age fifty-one, large and fleshy, of a bilious temperament, subject to rheumatism, and catarrhal colds of the head and lungs; has family history of psora. Has always been treated homoeopathically. Six years ago I removed a large tumor from the left scapular region, from which she suffered much pain in using the arm. After the removal of the growth, which was a large one, the wound healed kindly and I discharged her in a few weeks apparently cured. I did not see nor hear from her until one year ago, when she presented herself for another operation, a tumor of a similar nature, which had for the past two years been growing on the left shoulder about three inches from the seat of the former growth, but more anterior, extending toward the neck. I made a diagnosis of the growth similar to the one I had operated upon. When I inquired why she had not applied for treatment sooner, she replied that she knew that nothing, but an operation would be of any benefit to her, and as long as she was suffering no inconvenience from it she thought it best not to interfere. It was now causing her considerable pain and annoyance and wished an operation. I should think it would weigh about five pounds. Within the last two months it has grown rapidly, and, in appearance, it looked as if it might become a large growth. I assured her that we would not have to operate this time and prescribed Psorinum ^{10m}, Fincke, followed by no medicine for two months. I do not remember now the symptoms I prescribed it on, but at the end of this time there had developed the following symptoms:

Feet, hands, and face bloated in the morning. No pain in the tumor now, but can see no change in its size or shape. She perspires freely under the arms, which has a very offensive odor and which rots her clothing. The feet also perspire a great deal, the odor from which is horribly offensive. Has much rawness between the toes, and, for weeks at a time, the skin peels off them.

Silicea ^{cm} was given, and during the period of ninety days, when all the above symptoms disappeared together with the growth. The rapidity with which this growth disappeared under the profound action of this highly potentized Silicea was truly remarkable; it was as much of a surprise to myself as the patient.

What a pleasure it is to cure one of these cases without the aid of the knife. We have in this case a double cure; not only have we cured the abnormal growth, but we have removed that underlying principle that predisposed her from ever in the future being a tumor-producing patient.

CASE B. - Mrs. B., age twenty-seven, brunette, married eight years, has one child, age seven, family history good, father and mother living and well. She has had almost perfect health up to three years ago, when she began to suffer with severe pains in the uterus during the menses and almost constant neuralgia of the ovaries during inter-menstrual period. For the past year

she suffered more or less with chills which were very severe, coming on early in the morning and lasting for an hour or more, followed by fever which lasted until about two o'clock in the morning, when she would break into a profuse sweat. She seldom slept until the sweating began. She has emaciated rapidly within the past six months of her illness. Her weight has decreased in the past two months thirty pounds. During the past two months she has been confined to her bed and treated for lung trouble, though she has neither cough, soreness, or any pain in the lungs, nor is there any history of a lung trouble in the family. But on a careful examination of her case I find a cancer of the uterus in an advanced stage and that of a sycotic nature. My opinion was confirmed by Dr. E. E. Sawyer, of Kokomo, Ind. The whole right anterior half of the body of uterus was involved, it also extended, in the form of a band, around the rectum, which had begun to ulcerate and is discharging at each stool bloody pus and mucus. The bladder is being infringed upon somewhat, which causes urination to be more frequent and painful. The chills come every day, followed by fever and profuse and debilitating sweats, for which China was prescribed. The menses have not made their appearance for three months. Previous to the suppression of the menses she had been treated for a profuse acrid leucorrhoea by medicated injections. The urethral orifice is very much swollen, vagina sensitive, ovaries somewhat enlarged and sensitive to pressure. There is a slight watery discharge from the uterus, which produces intense pruritus, and which is relieved by frequent bathing, and has an odor of decayed fish.

Medorrhinum was prescribed in the CM potency, followed by no medicine for two months. Marked improvement followed this prescription; in one week all her pains had ceased. The ovaries are less sensitive and the symptoms much better in every way. Menstruation came on at the end of the second week after this prescription - though painful, it seems quite normal otherwise. The pruritus has ceased, and she cannot detect that peculiar fishy odor nearly as plainly. Chills do not come on nearly as often; for the past four days has had none, which, is the first time they have remained away so long for six months. At the end, of the eighth week I gave another powder, as she was not as well. From that time on she rapidly grew better. The face grows less pinched and the color better. Her eyes have a less hollow look, and the dark circles are leaving them. The sweats are much less, and she sleeps all night, feeling less exhausted in the morning. No more medicine was given for sixty days, when a severe diarrhoea set in calling for Podophyllum, which was given in water, followed by no medicine for one week, when Conium was prescribed, based upon the symptoms of the mammary gland during the menstrual period.

For the past two months she has done all her own housework and is improving every day. On examination I find the growth has disappeared and the hypertrophied walls of the uterus have almost resumed their normal condition. A slight thickening remains in the uterine walls, but the tenderness and soreness have all disappeared. I prescribed for her before I left for this meeting what I considered in her case a good prescription, NO MEDICINE.”

(John Henry Allen, M.D., Logansport, Indiana, Two successful homoeopathic operations, Proceedings of the Thirteenth Annual Session of the International Hahnemannian Association held at Narragansett Pier, R. I., June 21-24, 1892, p. 225-227. Reprinted in: The Homoeopathic Physician vol. 13 (1893), p. 14-16)

1893 - Pyrogen in sepsis

Case 1

January 10, 1893, I was called to see Mrs. P., aged 32 years; dark complexioned, nervous temperament; who has been suffering for forty-eight hours with chills of a very severe character.

She was then in the midst of one, and never recollect of seeing one more severe.

Her teeth were chattering and the whole body shaking; limbs cold; heart action weak; pulse small and thread-like.

She complained of feeling cold to the very bone.

The chills last fully an hour and are followed with high fever and a burning sensation in the skin; severe aching in all the muscles; restlessness, with a desire to change position as in Rhus; also worse by uncovering and better by warmth and covering up warm.

The paroxysm ended with a profuse, sour perspiration, which produced smarting and itching. Rhus tox was given in the cm. potency, but with no result whatever.

Chills continued to, return every three or four hours.

On questioning her more closely I find that she has been pregnant three months, and that six days previous to my being called, mechanical means had been employed to produce abortion, and for four days she had had a thin, dark colored, badly smelling discharge per vagina, with no signs of a pain, although hot injections, ergot and violent exercise had been resorted to in order to induce them.

Pyrogen, cm. (Fincke), in water, was given, a dose every hour for six times, when the chills, fever and sweating disappeared.

Forty-eight hours later the contents of the uterus were expelled, with a few plains and very little hemorrhage, though it had undergone marked dissolution; but what was most peculiar in the case, it was almost inodorous; the brownish discharge had ceased soon after taking the potency of Pyrogen.

Recovery was perfected in this case without further treatment.

Case 2

Annie C., age thirty-two, mother of two healthy children whose ages are two and four; aborted April 10, 1893.

Her mother had previous attended her during her confinements and felt confident she could bring her out all right this time as she formerly had, but, unfortunately, after trying forty-eight hours failed to remove the placenta, which she decided was adherent.

Being ten miles away from a physician she had taken chances, hoping it would be expelled at any time.

After failing they called me, and on investigating her case I found the placenta almost entirely extended from the uterus, and had become very soft and was rapidly breaking down.

From the very fetid odor I anticipated a septic condition had already developed in the case which suggested a dose of Pyrogen, but the hemorrhage had been so profuse after the expulsion of the foetus that her whole being seemed to be calling for China, which was administered, giving her prompt relief.

Twelve hours later, I was hastily summoned by her husband, who said that she was having severe chills every half hour and that he was sure she would die in one of them, they were so severe.

Not feeling inclined to ride ten miles after night in a pouring rain, I sent a substitute in the shape of three doses of Pyrogen DMM. (Swan), which reached her about midnight. She informed her husband that during his absence she had had four chills, and insisted on his returning at once for her physician, but after some persuasion he induced her to take a powder of the potency, and within thirty minutes she went to sleep and slept until late in the morning. Improvement followed, with no return of the chills.

Discussion

Dr. Custis: That was a wonderful experience. I have had some considerable experience in chills and threatened abortion, and generally found that the remedies indicated would avert the danger and carry the woman on to term. I had a case of such a character a few days before leaving home. The lady had had two chills during the night. Nothing had been done by her to bring on an abortion. I found her temperature 103° , pulse rapid, very restless. I gave her Rhus. At the second visit made soon after I found her temperature had dropped to 101° . Later she had two chills, one at 9 A. M. and one in the evening. There was aching in the bones, vomiting of bilious matter and a number of characteristic *Eupatorium perfoliatum* symptoms. I gave it to her and during the night she expelled a pair of twins, one of which had evidently been dead for some time. The placenta came at the same time. Temperature normal two hours after expulsion. I studied over the matter considerably; I felt sure that the uterus ought to be emptied, but I felt such confidence in the remedy that I was perfectly willing to wait, holding myself in readiness to act if anything occurred to render it necessary.

Dr. J. H. Allen: In the first case, the Pyrogen case, the symptoms were very similar to Rhus. The contents of the uterus were not expelled until the next day, coming out about 3 in the morning. The interesting feature is this, that the chill stopped before the expulsion, and when the foetus was expelled, it was perfectly inodorous. The second case was not so interesting, because the prescription was empirical.

Dr. Davis: I have been especially interested in this paper and its discussion. The remedy is new to me; I have never used it. I have been in the habit of giving *Caulophyllum* in a low potency in such cases. Generally a dose or two, and then wait until nature had shaped things up a bit. When the chill comes, whether there is hemorrhage or not, I have used it universally and it has never failed me. I never feel any concern about the recovery of the patient if the womb contracts firmly, and I believe that if Dr. Allen will follow this hint and use *Caulophyllum* he will have good results from it.

Dr. J. H. Allen: Dr. Yingling is very anxious to get all the information he can about the proving of Pyrogen. Any member possessing verified symptoms will favor him if they will forward the same to him at Nonchalanta, Kansas.

Dr. Fowler: I have had only two experiences with Pyrogen. One was an old injury to the hand, in which the pus had broken through the skin. I prescribed several times without success, until finally I gave Pyrogen, which cured the trouble very quickly. The other experience which I had was at a clinic last winter. The patient finally died, but Pyrogen helped her wonderfully, and I believe would have cured her if I had had entire charge of the case.

Dr. Holmes: The first part of Dr. Allen's paper recalls an experience I once went through and reported in the Clinique. The patient had had one healthy child and the second pregnancy seemed to be all right, but on making the first examination I was puzzled to know what I had run across. It was a case of Acrania. It was a full sized, well developed boy, with the head as if it had been sliced off from the vertex to the base of the occiput. Another peculiar feature

was the enormous quantity of water that came away. It ran out as if from a spring. I have no doubt but what there were twelve quarts. Dr. Leavitt said that it was not uncommon to get that quantity of water.

Dr. Davis: I have attended more than a thousand ladies in childbirth, and quite a number of times I have had that great quantity of water where the child would live and the mother do well; and also such cases, when the child was still born. I have never broken the membranes unless it was unusually tough. When the waters come away too easily I consider it a bad sign and look for bad results.

Dr. H. C. Allen: I should like to ask if an excessive amount of amniotic fluid is known to be an accompaniment of Acrania.

Dr. Custis: You nearly always have chill with threatened miscarriage, but not rise of temperature. You might easily have this without Caulophyllum being indicated, and hence I cannot approve of a routine prescription of Caulophyllum for miscarriage. I do not think it is indicated by chill alone; you must also have other characteristic symptoms, such as pain in the small joints. If you can individualize your case, and get the right remedy, you will have no need to enter the uterus for any operative measures. Almost all physicians, other than Hahnemannians, empty the uterus, curetting it if necessary.

Dr. Davis: If Dr. Custis will pay attention to Caulophyllum, he will learn that the os uteri is rigid, and the uterus incapable of expelling its contents. If he will give the Caulophyllum and wait until nature can shape up, the rigid condition will change for a lax one and the contents will be expelled.”

(John H. Allen, M. D., Logansport, Ind., Pyrogen in sepsis, Proceedings of the International Hahnemannian Association 1893, p. 244-248)

1894 - Medorrhinum, The Nosode

“I hesitate somewhat in introducing this wonderful remedy to the Indiana Institute of Homeopathy for a number of reasons: prominent among them are the following. The profession as a rule is prejudiced against the use of nosodes or diseased matter as remedial agents; also that it is thought by some to be drifting away from Hahnemann's inductive method as laid down in the Organon.

The first objection time will obliterate from your minds as it did from mine after I had used it a few years and saw the wonderfully gratifying results it brought. In answer to the second objection I will refer you to Organon Secs. 18-28-29, also to an article on Artificial Diseases and their Treatment to be read at the International Hahnemann Association to be held this year at Niagara Falls; to appear later in the MEDICAL ADVANCE and where I will give proof that I think will be fully convincing to most minds that the so called Isopathy is but the highest phase of *similia* in the highest sense.

Medorrhinum was discovered, as most of you know, by Dr. Samuel Swan, of New York, lately deceased; and further proven by Doctors Ren. Dell, Finch, Farrington, Cleveland, Higgins and Berridge, of England; besides, we have clinical provings of it without number.

I have been using this remedy nearly five years and have proven it to be a wonderful remedy in many respects. It is prepared from the gonorrhoeal virus taken in the acute or inflammatory stage and, of course, potentized very highly. I for my part, have not used it in any potency lower than the ^{cm} and higher; which works very satisfactorily. All provings, of course, have been made from very high potencies; and here is another reason for which I hesitate to

introduce this remedy, as it must be used with care and good judgment. It is one in which it is dangerous to repeat, especially in cases where gonorrhoea has been previously suppressed by local means, as I have seen serious disturbances produced by repeating the dose the third time. I never give but one to two doses of a very high potency, and wait. I have seen abscesses form, followed with profuse hemorrhages from nose, rectum and penis in old chronic cases of suppressed gonorrhoea by repeating the dose frequently. It will, as a rule, restore a gonorrheal discharge that has not made its appearance for years. With me it seldom fails to confirm a diagnosis that has been made doubtful by either sex emphatically denying ever having had gonorrhoea.

The following symptoms may assist you in making sure that your patient is still suffering from this disease in a suppressed form: Often by that peculiar greyish, greasy appearance of the face or by the presence of blotches of a deep red color, but more frequently by a small red star-shaped spot, usually below the right eye or upper part of the face close to the eye, though it may be found anywhere. It resembles somewhat a small naevis but the lines are more defined and not so diffused. Again, we may find the sycotic wart but more frequently we find little cherry-red spots known as a sycotic mole. They are to be found on any part of the body. This is very characteristic of a form of sycosis that is often cured by medorrhinum. There are many other symptoms, but these are a few that will call your attention to this remedy.

The mental symptoms are quite marked. I reported almost two pages of symptoms in the "Homeopathic Physician", in 1892, which are worthy your study. The mind symptoms are very characteristic: Forgetful - cannot remember the least thing. On giving the patient instructions with reference to taking the medicine he would invariably write it down, saying he could not remember anything any length of time: cannot trust himself to remember it: Great irritability and disgust for life. "Hering's Guiding Symptoms" give great weakness of memory in reading. He cannot remember even a previous line, so he gives it up in disgust; forgets names; has to think hard to recall his own name. He is always in a hurry but never accomplishes anything; time moves too slowly, (like lac caninum). He has a disgust for life, with a tendency to suicide, (like aurum). If these patients do commit suicide they generally do so by poisoning. I have frequently seen these patients so confused in their thoughts that after having almost completed telling their cases would begin over again or begin in the middle, or they will hesitate or commit themselves in many ways (like morphine). They have no fear of death. This horrible disgust for life makes death preferable to life.

In women, we have that wild, desperate feeling: a feeling as if they were going crazy. Everything is dark and clouded, (like actaea) always worse by weeping. Has a dread of something going to happen. A heavy cloud hangs over her similar to actaea. Feeling as if she had committed an unpardonable crime. She says her body is foul or smells foul or that she cannot wash herself clean (lac caninum has a similar symptom in insanity. "She stands with her fingers spread apart, as she cannot bear to have them touch each other-they are so unclean.")

In the head we have aches and pains without number: sudden attacks of vertigo with danger of falling. It is not a whirling vertigo like we find in many remedies, but a sensation of falling forward. There is also in this remedy a sensation of a band around the head. Both these symptoms are worse on moving and better on lying down. He walks like a drunken man; (like strychnine and alcohol ;) differing from the latter in that he tries to or makes every effort to walk straight in. In medorrhinum he makes no effort. The headaches are worse in temples, especially the left; also at base of brain we have an intense cerebral headache, causing a boring or rubbing of the head into the pillows, similar to hellebore.

We have many eye symptoms of importance, which you will find in "Hering's Guiding Symptoms." The nose is stopped up; cannot breathe through it in the morning, soreness of

nose, with intense itching on tip and in nostrils, with a desire to rub the nose constantly; snuffles in children often, having a history of gonorrhoea in the parents.

Face: Pallor very marked; greenish or grey color of face: brownish bands across forehead close to the hair: oily appearance of the face: profuse sweat about head, neck and face. It differs from Calc.c., that it is oily, greasy sweat, when in Calc.c. it is clear and in large drops, like water, and inodorous, generally. Acned of the face, blotches of a reddish color. Small boils break out during menses, especially in young girls; blood boils generally. Usually no itching and not very sensitive to touch. I have cured many cases of painful and often profuse menses in young girls from the face symptoms above. Quite frequently it is accompanied with a flow that excoriates or a leucorrhoea following the flow that is acid. There is generally a history of gonorrhoea on the father's side; usually suppressed before marriage.

The teeth decay easily and very early, often as soon as they come through, (like creosote;) crumbly and soft. In the mouth we have canker sores, especially under the tongue ; very sensitive and painful; looking like small blisters. Throat: Back part filled with mucous coming from posterior noses. The sore throat is worse by swallowing saliva or empty swallowing (like Bell.)

The thirst in this remedy is very marked. Thirst for enormous quantities of cold water. Dreams she is drinking (like arsenic or phos); craves salt (like natrum); also craves beer and strong drinks, sour fruits, ice, etc.

In stomach, we have vomiting of a glary, frothy mucous, black bile tasting bitter and sour, often without any nausea. Gnawing sensation in stomach. Burning like coals of fire in pit of stomach. Severe cramps, with sensation of tightness.

We also have a great many liver symptoms in this remedy. Hardening of liver; burning heat around back, extending to the region of the liver. In the abdominal region we have a great many symptoms, but we will hasten on to more important symptoms found in the urinary and sexual sphere. Severe pain in region of kidneys, relieved by urination. Sensation of bubbles of water in the right kidney. Cold sensation in the renal region. Much prostration after urination. After urination we have burning or urgent desire to urinate - cannot wait a moment. Burning in the meatus. Dull, heavy aching in the region of the prostate gland. Sore feeling in prostate extending to rectum. Bed vesicles on gland penis that burn and itch; very irritable.

In the female, we have a desire to urinate frequently at the menstrual period especially, every half hour or oftener - cannot wait a moment. The menses are frequently every two or three weeks; too frequent; too profuse, and usually dark colored and clotted; and, what is peculiar, it is very offensive. No other remedy except Psorinum has such an offensive flow. It is carrion-like and has the odor of dead fish or fish brine. No other remedy that I remember has this fishy or fish brine odor. Tellurium has an otorrhoea that has a fish brine odor, which comes nearest to it that I know of. The pains are usually pulling (like lil. tig.) Tearing, running from above down wards or from ovaries to uterus, or from uterus to rectum; uterus subinvolved; sensitive to slightest pressure. There is also a sensitive spot above and to the right of os uteri. Verified by myself in six cases. The flow is usually acid and more or less excoriating, producing pruritus. The leucorrhoea is thin and acid; excoriating, burning or blistering the parts that is touched (like the ammonias or creosote.) The pruritus is worse from rubbing (like coffee) and relieved by bathing in tepid water: verified many times: It also has the same fishy odor. Sycotic warts appear on the external genitals or often in vaginal canal.

In the rectum, we have sycosis in its worst form; characterized by intense itching of the anus; unendurable itching - drives the patient almost to distraction. When you find this symptom very marked you can think strongly of medorrhinum. You may require sulphur or thuja or some other remedy to complete the cure but medorrhinum will often cure the case alone.

Frequently it will restore an old, suppressed sycotic gonorrhoeal discharge that has probably been suppressed for years, when all at once the itching stops; then cure your gonorrhoea with the homeopathic remedy and you have no more rectum trouble. Here is a fruitful source of cancer of the rectum or a frequent excuse for an operation on what is often mistaken for piles, or for Pratt's operation. But do not deceive yourselves and think you have removed the disease: you have only palliated and you will hear from it again, and it will present itself in some other form, either in lung trouble, heart trouble, rheumatism, enlargement of the joints, paralysis, insanity, hemiplegia, induration of the testicles, or in some other way. Do not operate on sycotic hemorrhoids or a sycotic rectum, whatever you do. Get down at the cause with similia. We also have a thin, dark colored, watery discharge from the rectum that produces this intense itching; usually the color of the integument around the rectum is dark red; often of a blistered appearance. Sometimes you will find it in newborn babes where there is a history of gonorrhoea in the family.

Often the same thing will be found in the urinary sphere. It produces scalding or a burnt and blistered appearance, and when the commoner remedies fail you will usually find medorrhinum the remedy, even if you cannot trace a venereal disease in the parents. The burning and itching prevents sleep and I have known patients to suffer so from this form of pruritus as to be compelled to use opium suppositories to induce sleep. Cured with this remedy.

In the ovarian region we have an admirable remedy in medorrhinum. The most characteristic pain is a pulling pain or sharp, shooting or knife-like pains; much soreness and tenderness to pressure; worse on the left side; or pains run from ovary to ovary or from ovary to uterus - better by pressing upon the abdomen (like *lil. tig.*); worse on moving limbs. The mammary glands are sore and sensitive to touch during the menstrual period.

Throat and lungs: complete aphonia, worse while reading. The cough is usually dry and produces a tearing sensation in the larynx. It begins with a tickling in the upper part of the trachea. As soon as she attempts to sleep this tickling begins. Coughing produces great pain in the chest. A medorrhinum patient takes cold on the slightest exposure (like *hepar*, *psorinum*, *calc. c.*). Begins in the head and goes down on the lungs. It has cured a severe burning sensation at the root of the tongue and extending into the bronchi, as if he had inhaled hot steam. We also have a raw feeling extending from the throat to the lungs: as if scraped with a knife: worse on breathing cold air. A sensation as if the lungs were stuffed with cotton. The expectoration is often greenish yellow, ropy; bitter taste. Acute catarrh of head, with burning of the septum and frequent sneezing. Hay fever that comes on almost the same day every year. Worse in the open air and better by warmth; with complete loss of taste and smell; cannot taste tobacco.

In the extremities we have all sorts of aches and pains, but it is especially adapted to gonorrhoeal rheumatism, especially of joints and more frequently in the small joints, dating sometimes from suppressed gonorrhoea. Here we find a wonderful remedy in medorrhinum. Enlargement of the joints in rheumatism, especially of fingers and toes and often knees, will call your attention to this remedy. Those cases, as a rule, usually have a sycotic history. This remedy has cured gouty concretions where they extended over the whole body. I reported a case in the *Homoeopathic Physician* in 1893, cured by this remedy that surpasses anything I have ever met. There is almost complete loss of power in the effected joints in these patients, similar to rhus in muscular forms.

The rheumatism in these patients is always worse in cold weather and better in warm; also worse in the winter or in damp weather. They complain of heaviness of the limbs when walking, with a giving-away sort of feeling. They lack the power to support the body. Often we have a burning pain, with a desire to or relief from fanning the part. Epilepsy or spasms in

children that have a history of suppressed gonorrhoea in the parents. Nightmare, night-walking, dreadful dreams of ghosts and dead people. She dreads for night to come for that reason.

The neuralgic pains, or any pains, for that matter, are always worse from sunrise to sunset. This especially is true of sycosis; syphilis is just the reverse - worse at night.

In bowel troubles, dysenteries or summer complaints in children are also worse during the day. These children are prone to these diseases. They emaciate rapidly, are liable to enuresis. They assimilate nothing, not even water; are whiny, peevish, fretful; have colic from the time they are born. Their discharges are foul smelling and excoriating. Even their bodies smell sour or offensive. We find as pernicious a form of anemia in these children as we do under syphilis. We frequently find these children stunted in their growth and are prone to suffer from rheumatism.

Tumors and abnormal growths: Here is a wide field for medorrhinum. I never have had much success in curing tumors until I began to use this remedy, and since using it have had marvelous results. Have stopped the growth of two large, cystic ovarian tumors, greatly reducing them in size, and cured a number of smaller ones entirely with this remedy. It will not often cure the case alone, but it will clear up the case and bring it to that point where some other remedy or remedies will complete the cure. With the use of medorrhinum, followed by iodine, I am curing a cancer of the left breast, that had been operated upon within a year, removing every vestige of the growth. It had reached the second stage of the disease - just beginning to break down. I have reported a number of cases of cancer cured where this remedy was the principal in the cure. Often you will find these cases depend on a history of sycosis or sycotic gonorrhoea which has not been treated homoeopathically, and when you restore the gleet or gonorrhoeal discharge the tumor will begin to disappear.

In conclusion, I want to mention one other sphere in which this remedy is to be thought of, and that is, in sterility. Women who have had gonorrhoea or have contracted the disease from their husbands, especially when it has been suppressed by local means, are prone to be sterile. They seldom have more than one child. This is, of course, in the sycotic form of gonorrhoea. The history of the case will invariably demonstrate that fact to you, and I am doubtful if you can cure these cases without the use of this remedy in some stage of the case. Of course, the husband will require treatment in every case in order to ensure success. A restored gleet or leucorrhoeal discharge will demonstrate the fact that you are on the right road toward a cure of these cases.

For the chill and fever symptoms we are indebted to Dr. Berridge, of England.

The chill begins promptly at 10:30 A. M. with chattering of the teeth and shivering; usually the chill begins in the lower limbs; there is no thirst during the chill. The fever is accompanied with thirst and a severe headache; usually during the fever we have a frequent desire to urinate. After fever we have profuse exhausting sweats, which begin as soon as he falls asleep.”

(John H. Allen, M.D., Logansport, Indiana, Medorrhinum, The Nosode, The Medical Advance vol. 32 (1894), p. 59-66. Indiana Institute of Homoeopathy, Indianapolis, May, 1894.)

1895 - Pyrogenium in typhoid fever

“Dr. J. H. Allen treats of this remedy at length. Of its use in typhoid he says: “In typhoid fever running over for weeks there is very apt to develop a condition calling for this remedy; of course, depending on the character of the symptoms. Cases coming from the Old School after having run along for three or four weeks, and being treated by the usual methods, either run into typhoid pneumonia or a septic condition is set up.”

“The symptoms that will first call your attention to this remedy are usually the foul smelling discharges, the breath, the diarrhoea or perhaps urine, while the patient may be suddenly taken with a chill, with a rapid rise of temperature; pulse so quick it can scarcely be counted, tongue dry, nose pointed, upper lip drawn, exposing the teeth, which are covered with sordes, and a cadaverous smell from the mouth; it will often follow *Baptisia* or *Rhus*, especially if we get a high temperature, with rapid, feeble pulse, more especially if we find a subnormal pulse or temperature after the disease has run a course of three or four weeks, or about the time the temperature should begin to decline. These cases, whether treated homoeopathically or not, never had any similia, or this dreadful condition would not have developed. When a case of typhoid fever dwells on my hands longer than three weeks, I am fully convinced in my mind that I have not benefited the case and that similia has not been truly applied. A case of typhoid fever treated by the true similimum should have very little, if any delirium, no sordes on the teeth, no subsultus tendinum, and the diarrhoea should not last longer than a few days.”

“Threatening paralysis of deglutition or the voice are symptoms frequently calling for this remedy in typhoid fever. She speaks as though the mouth was full of masticated food, or she complains of a numb feeling all over her, with a taste of blood or pus in the mouth. Abscesses following typhoid fever, typhoid pneumonia, typhus or other septic fevers, which discharge a dark-colored, foul-smelling pus, often blistering the part it passes over; neglected pneumonia, especially where pus has remained long in the lungs, where the cough has been suppressed by cough syrups, or there has not been vitality enough to raise it.

In tuberculosis we have received no benefit from it whatever, although my good friend Dr. Kent, in his article on *Pyrogen*, to the “Advance”, some time ago, highly recommends it in septic fevers of tubercular patients. With all due respect to the Doctor, I think he is very much mistaken. For my part, I can see no relation between the sepsis produced by the breaking down of the tubercle in tuberculosis and *Pyrogen*. A potency of the tubercle is better. The symptoms of *Pyrogen* are quite unlike that of tuberculosis, and I think you will all readily see the difference. The cough is like *Pulsatilla*, being better by motion and worse in a warm room, and is accompanied by rattling in the chest, similar to *Tartar emetic*. The face is often pale, chlorotic, greenish, hippocratic, sunken, bathed in cold sweat.”

(Pickings from the Transactions of the Indiana Institute of Homoeopathy for 1895, The Homoeopathic Recorder vol. 10 (1895), p. 564-565)

1900 - Tuberculinum clinic

“Tuberculinum finds its similia in the tubercular diathesis or taint.

It become more useful each year as we study it clinically and becomes acquainted with its peculiar symptomatology.

We have already seen and tested the depth and profundity of action on the vital forces and there seems to be no limit to its clinical sphere of action, where this tubercular basis is present.

I have tested it in Typhoid Fever, Abscesses of lungs and of the tissues in general, Abscesses of middle ear also with excellent results, and especially upon the skin in such diseases as Eczema fissum where it is to be differentiated from Graphites, Psorinum, Syphilinum, Silica and other minor remedies as Kali sulph., Petroleum, Kali carb., Teucrium, Bryonia, Phosphorus.

In the skin fissures predominate the skin is dry, hard, thickened, bleeding, slightly scanty discharge, if any, and always worse in spring and fall worse from cold, moisture, damp weather.

It differs from Graphites in that the fissures are less pronounced and have no honey-like secretion, usually bleeding slightly instead.

It differs from Sulphur from the fact, there is not the intense itching of Sulph nor the aggravation by warmth, and at night.

In the pustular forms of Eczema Kali sulph is often complimentary to it, usually the Kali sulph has yellowish- isolated pustules, with very scanty discharge and marked soreness and tenderness compared with the size of the lesion.

In cases of Eczema fissum of the hands, when the skin is dry, hard, thickened as in Graphites, with slight bleeding, worse fall or spring, worse snowy weather and especially if accompanied with some form of anychia or paronychia.

These later lesions when Tuberculinum is indicated are usually found at the ends of the fingers, under the nails beginning in pin point lesions, accompanied with great soreness, tenderness, aching with great burning; burning takes the place of throbbing as in Hepar, there is seldom any suppuration, usually dry, and in a few days disappear only to occur again in a few months.

Styes upon eyelids are of frequent occurrence and act in most particulars like scrofulous lesions.

Clubbed shaped fingers are typical of these patients, nails are usually hard, dry and brittle.

Should you find marked ridges the nails, we may suspect sycosis, upon a tubercular basis.

Isolated tubercles, especially in acne on the face, coming out in a fresh crop about the menstrual flow, often calls for Tuberculinum, especially if they dry up with little suppuration.

The pus from the abscesses resembles Hepar, as it is copious and thick, but Hepar is of bright, yellow, while the tubercular pus is of a dark greenish, yellowish or brownish.

If of a marked dirty brown, the patient is sycotic.

The tubercular abscess is not as a rule painful, pus is usually offensive.

Many cases of malignant skin lesions have been cured with this remedy some of which are reported in the clinical cases reported in this article.

The la grippe cases that have been reported cured in the past two years by this remedy are truly remarkable.

The cough resembles both Bryonia and Kali carb.

It is tight and dry as we find in both remedies, seldom any expectoration in the earlier stages of bronchitis or pneumonia.

There is not the thirst of Bryonia, and while it jars the whole body it is not marked like Bryonia, nor so aggravated by motion, cough comes on in paroxysms like Kali carb, but there is not the marked gagging at the height of the paroxysm.

Tuberculinum in my experience affects the left lung more frequently than the right; they are better lying down, by warmth and by rest.

The aggravation of the cough from cold air is decided especially if out of doors.

They may be entirely free from any cough for days in the house, but on exposure to open air, it returns with all its vigor.

Where abscesses form in the ear with little or no discharge I think of this remedy.

Severe persistent pains about face and eyes coming on during La Grippe with marked prostration with no marked aggravation except that they are worse from cold.

Even going from one place to another, aggravates all these symptoms.

These patients sneeze many and from even uncovering of the hand.

They must be well covered up and steaming hot.

All these cases where Tuberculinum is indicated cannot endure the least draft of air for months after apparent recovery: They convalesce slowly, until everyone is out of patience.

In Lupus and Epithelioma of the face, marked results have been seen in the curative power of this wonderful remedy.

The following cases will give some idea of its action:

Case 1 - Epithelioma

J. B. G. farmer age 30.

Has suffered with bladder and kidney trouble for years.

Family history of Tuberculosis and cancer.

Has an epithelioma of left cheek for several years.

The lesion is about one inch by one and one half in size.

It has a puckered drawn look, looks whiter than surrounding tissue, large crust something in the shape of an oyster shell, loosely attached, this falls off every 3 or 4 months, and forms again.

Symptoms: crawling like ants; some burning and stinging; no appetite; no strength; gradual loss of strength; passes large quantities of wane which prostrates him; grows gradually thinner every month.

Prescribed Tuberculinum by mail and never have seen the case - this was seven months ago.

Last report says kidney and bladder trouble growing better.

He has again resumed his work on the farm, lesion on face only about one-fourth its former size, crust now about the size of a large pea.

An old school doctor is watching the case and says he never saw anything like it.

Case 2 - Tubercular Meningitis

Mablo C., age 5.

Tubercular Meningitis, sick going on five weeks, is now very weak, pale, emaciated considerably.

Semi-unconscious, bores head into pillow also desires to press head into bed.

Temperature 102; pulse feels small.

Knowing that an older sister had tuberculosis, advised the family physician to give Tuberculinum. CM.

Improvement set in at once and there was complete recovery.

I only remember a part of the case as it was 3 years ago and I did not see the case myself.

Case 3 - La Grippe

Mrs. B., age 42. medium height and weight, dark complexed, active, nervo-bilious temperament; no history of any immediate tuberculosis in the family, but has been in poor health all her life.

She has had retroversion of the uterus for years profuse hemorrhages at menstrual period now has a scirrhus condition of the uterus, was taken with La Grippe March 20th.

Began with slight chill, fever general, aching pain in left side of face, great prostration, some thirst, profuse sticky musty perspiration, desire to cover up warm, draws the bed clothes closely around the throat, has hot water bottles to feet and face.

Heat slightly relieves the pain in face, no appetite, no desire to talk, passed a restless night, awakened with same severe pain in left side of face, aching some better and fever almost gone.

Remedy given Gels, 1m.

No change during the day.

She has moist sores in the corners of the mouth, has had those for years.

Tub. C M one powder, pain relieved in a few hours, perspiration better by morning, musty odor that would seem to permeate the whole house, gone; also a dry bronchial cough which I neglected to mention, also relieved; convalesced rapidly, sores in corners of mouth disappeared in one week.

Case 4 - Epithelious spot of face

Mrs. Moore, age 67. Has had an epithelial spot on left cheek about the size of a large pea, has tingling sensation like ants crawling in it, cannot keep the fingers off it, desire to pick the scales off or to cut it. If she applies any applications of a medicinal nature she is soon attacked with a severe vertigo. The lesion is dry, bleed very slightly when the thin crust is removed as does all the superficial tubercular lesions.

She is very weak especially in the morning, no thirst, no appetite.

She is quite anxious about herself, and begs to be allowed to put some carbolized vaseline on the lesion.

Tuberculinum D. m. m. Swan removed it in three weeks; no return as yet, although she has had occasionally the sensation of ants creeping through the spot.

DISCUSSION.

D. C. McLaren, M. D.: Tuberculinum seems to be one of the best and most powerful of our anti-psorics. My own brief experience with it transcends anything that I have ever seen. A little child 7 years of age was taken, during my absence from the city, with a typhoid condition.

A mongrel was called in and after a day or two of failure he dosed the child with castor oil. Soon there was an attack of pneumonia on top of the original fever as a complication. I had little or no hope of its recovery. Something very serious happened to the left lung, because the whole left side collapsed; the ribs falling in. There was a hectic cough. I put the child upon Tuberculinum a dose a week; there was great improvement by October and by Christmas the child was well and is now the healthiest member of the family. I have had other striking results, but nothing so remarkable as that.”

(John H. Allen, M. D., Tuberculinum Clinic, Proceedings of the International Hahnemannian Association 1900, p. 100-104)