

## John Hall

### 1888 - Remedies for Post-partum Hemorrhage, Ipecacuanha

"The above medicine and the disease for which it is named were given me by the Hahnemann Club, of Toronto, with the request that I would write on them an essay. In beginning I may remark that while all Hahnemannians believe in the totality of symptoms as furnishing the only guide for selection of the remedy, it is not so well known that it is not merely the *totality* that we require, but a *totality of characteristic symptoms*, for it is well understood that not unfrequently there will be a totality among two or three different remedies, and which then to choose with confidence is the knowledge which we most want.

As an illustration, and that my meaning may be better understood, let me refer to some, say two, remedies as confirmatory - for example, the oedema of Kali carb. and of Apis mel., both of which are very much alike. We have in each bag-like swellings above and below eyes, swellings of the face, hands, and feet, which by careful analysis will give us differences sufficient, perhaps, on which to prescribe; but if we possess some *characteristic conditions* of each remedy, the minor examination, which takes much time and is often a source of trouble to the busy practitioner, may frequently be avoided. The characteristics of the remedies referred to are, mainly, that *Kali carb. is a chilly remedy*, the patient, with very rare exceptions, seeking warmth, while that of *Apis mel. is usually the opposite*, almost every one under its influence desiring and seeking cold, cold rooms, fresh air, etc., the knowledge of such symptoms often enabling the practitioner to prescribe both rapidly and with accuracy - no small acquisition by our school. The object, then, of this paper will be very briefly to show, *in cases of emergency*, how a few prominent symptoms will often be of the greatest service, in the light of which conditions Ipecac. will be treated lastly.

CASE I. - I was called suddenly to see a Mrs. - , a young, sanguine woman, threatened with miscarriage at the third month, and was no sooner in the room, than, observing that the pains were both frequent and strong, was ready to fear that the threatened loss was beyond my ability to arrest, and promptly making an examination, found, very much to my surprise, that the womb was perfectly intact, not apparently disturbed by the terrible pains which were going on. I waited awhile and then made another examination, the pains being severe, and during the latter of these I learned that the *abdominal walls were doing all the work*, so that I had difficulty in preventing the uterus from being pushed through the vulva, which could only be prevented by very firm counter-pressure with the hand. Fortunately for my patient (who had all confidence), and also for her physician, I had been reading Hering's *Guiding Symptoms*, and there noticed under "Female Sexual Organs" of Amanita or Agaricus musc., "*Awfully bearing down pains, almost unbearable*," nothing being there said that they were *merely abdominal*, but knowing my patient as being *sanguine and very sensitive to cold*, prescribed on these two symptoms, giving one dose of Amanita <sup>59m</sup> (Fincke), which quickly and completely arrested the pains, the patient making a very rapid recovery. In this case one was called upon to act promptly; indeed, any failure would soon have taken her from my hands.

CASE II. - I was called by a professional homoeopath to visit a lady who was in premature pains of the seventh month, and which could not be arrested. Being left alone with my patient, and supposing from the examination that her case was beyond the power of medicine, the os having enlarged and pains steady and severe, I had made up my mind for a night of it. While conversing with my patient I learned that she had suffered from a severe fright during the day. I at once thought that such a complication had better be out of the way, and gave her a dose of

Opium <sup>2c</sup>, when, to my surprise and pleasure, the opium so removed the *cause* of her malady that the pains soon ceased, and I went home, she going her full term. Of course, all homoeopaths know that we have no remedy so frequently indicated in recent frights as Opium, it being a characteristic symptom of this remedy, to know which, though only giving us a single characteristic, is to prescribe correctly.

This subject is voluminous and might be pursued *ad libitum*; one thing is certain, that the characteristic conditions of aggravation and amelioration should be the study of every physician, on the attainment of which no labor can be too great, where I may well mention a little work on this subject by Dr. E. J. Lee, well worth its weight in gold to all the busy men of our school.

Let me, then, proceed with the subject of this essay, Ipecac., which I will do very briefly in accordance with the cases named, wishing mainly that it shall be presented in its *salient* points, enabling every practitioner to give it without fear when needed. Bearing in mind the foregoing, let us look at Ipecac. in their light (i. e., agg. and amel.), which can also be best conveyed by illustration.

CASE III. - I attended Mrs. - in labor, which went through naturally; the placenta discharged, the uterus contracted, and all apparently doing well. I was about leaving the house when my patient, a stout woman, exhibited a great and ominous paleness of the face, and very soon after this (almost immediately), nausea and vomiting; so, quickly placing my hand over the uterus, which not being found, I was led to look below, and found that the womb had suddenly expanded, while the vessels were pouring out *bright red blood* in profusion. I immediately inferred, from the terrible loss which was going on, that my patient could hardly live more than ten minutes unless she could be promptly relieved, and to call in aid at such a moment was impossible. I had then only two symptoms, but they were invaluable, *nausea and vomiting* and *severe loss of bright red blood*, on which I gave without delay, in pellets (for there was no time to dissolve any), Ipecac. <sup>2c</sup>, repeating every five minutes. After the second dose the womb began gain to contract and hemorrhage lessened; the third dose brought a full contraction with an entire cessation of the bleeding. I watched by the bedside a long time but finding no return of these symptoms, finally left, giving directions for good living to make up the loss (which I usually do the first two days), and my patient made a full and rapid recovery. I may add that, having attended this person in subsequent labors, the very same symptoms, threatening speedy loss of life, set in about half an hour after each delivery, and in the last case Ipecac. <sup>1m</sup> was used with the same success. Much may be said about this remedy; all the writer would now observe, is that whenever these two symptoms co-exist, *bright red blood* with *nausea and vomiting*, the hemorrhage will be controlled. Of course, I recommend the medicine high, having tried all. But some who write (so-called homoeopathic books) do not know that our remedies manifest their curative effects almost in proportion as they may be triturated or succussed, being very wisely called *potencies*; but those who do not see these things should be docile and learn, for they are "hidden from the wise and prudent but revealed unto babes."

(John Hall Sr., Remedies for Post-partum Hemorrhage, Ipecacuanha, Proceedings of the Hahnemann Club of Toronto, The Homoeopathic Physician vol. 8 (1888), p. 117-119)