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1907 - My Convictions regarding Materia Medica and Therapeutics after over thirty Years Practice

"In giving my conviction regarding materia medica and therapeutics, based upon nearly forty years' practice, it will be necessary to use the first personal pronoun more frequently than modesty would ordinary warrant, but one cannot give his personal experiences without speaking of himself. Personal experiences, when honestly and intelligently recorded, offer the best evidence bearing upon any subject under discussion. The mental make-up of the witness is an important factor. Fearless desire to find and tell the truth is the first essential. Intuitive conscientiousness and a sceptical and inquiring turn of mind are valuable accessories.

I am sceptical by nature. Although a prize Sunday-school scholar in the old United Presbyterian Church at the age of ten, my questions propounded to our good old pastor on the tenets of the Confession of Faith, the shorter catechism, etc., when I was but twelve years of age, banished him from our home where he was wont to come twice a week to catechise us boys. He couldn't convince me of the justice or mercy of infant damnation; nor tell me where heaven and hell were; nor why the Omnipotent - the all-powerful - needed rest and "rested on the seventh day"; nor why it was right for the birds to twitter and sing on Sunday, while it was so venial a sin for me to play and be happy; nor how we were to know when Saturday ended and Sunday began if we had no clock.

When I concluded to take up the study of medicine I knew nothing whatever about it, of any school, excepting the vile taste and results of "the senna and salts" prescribed by our dear old family doctor and friend, Dr. Trevor of Allegheny, of whom we thought as much as we did of members of our own family. I observed, however, that many of the best citizens were patrons of the new school, and that the physicians of that school stood as well socially, morally and intellectually as any in the city. It occurred to me that the former were not all fools nor the latter all knaves, and I resolved to learn the truth for myself.

Homoeopathy was probably as well represented in the city (Pittsburgh, Pa.) as in any city in the county, not excepting even Philadelphia. The four Dakes, J. P., B. F., D. M., C. M. (these letters have no reference to potencies), Cote, Herron, Childs, Burgher, and others were among the leaders. When our old family physician in answer to inquiry said the homoeopaths were all frauds and quacks, he could not reconcile his opinion of them with their success and standing in the community, and that of their clientele. Many conversations with different physicians of both schools gave me a strong inclination to favor of homoeopathy, and I entered the office of Dr. Jas. A. Herron as a student. I had opportunity for learning but little before going to Philadelphia for my first course of lectures. (I would say, in passing, that I am convinced that students of medicine should begin their studies with a course of lectures. They can learn 50 per cent. more in the same time after that course that they could before it). What I did learn of materia medica and therapeutics was the doctor's favorite prescriptions for certain diseases, and I have since observed that he had selected the remedies (he always prescribed two in alternation) most often called for in such conditions; as rhus and bryonia in rheumatism and typhoid fever; belladonna and tartar emetic in one kind of cough, and phosphorus and bryonia in another and in pneumonia; ipecac and sabina in metrorrhagia; nux vomica and sulphur in constipation and hemorrhoids; belladonna and nux vomica in convulsions; arsenic and ipecac in asthma; arsenic and veratrum in cholera morbus, etc.

With this foundation for a knowledge of homoeopathy, I entered the old Homoeopathic Medical College of Pennsylvania, where I had the great good fortune during two sessions to listen to the teachings of Hering, Lippe, Henry N. Guernsey, Raue, Frost, and others, and I can freely say I never have known a more earnest and enthusiastic group of teachers than they. The clinics were especially interesting and instructive. I also frequently attended clinics in the University of Pennsylvania and in Jefferson Medical College, conducted by such men as Meigs, Pancoast, etc., and, my mind being unprejudiced and open for truth, I had an excellent opportunity of comparing modes and results; comparing later gave away to contrasting. Before the first winter was half over, I was a confirmed homoeopath. When I contrasted the method in prescribing of Lippe, Guernsey, Foote or Raue with that of the teachers in the institutions named, I, as a reasonable being, had no other choice. I will give an instance illustrating the difference:

One old school clinical teacher had printed lists of diseases and the drugs used in each hung behind the rostrum and when a patient was found to have a certain disease the first drug on that list was prescribed; when the patient next reported, if no better, the second was given, and so on to the end, unless the victim became discouraged or died.

It was in the clinics I first heard mention of potency. My preceptor hadn't spoken of any preparation higher than the 3rd, and as I have said before, he habitually used the tincture and 1st and 2nd dilutions, and 3rd triturations. At the college the 200th potency was the usual one prescribed. To me it was a far cry from the tincture to the 200th, so that at first I was more than sceptical - I was an absolute unbeliever. But there was no gainsaying what my eyes and understanding so often saw during these two winters. It was the rule rather than the exception that those old chronics, afflicted with all sorts of ailments, from syphilis to ague, were cured or perceptibly benefited. This was especially true of ague - acute or chronic, clear-cut or obscured by drugging. The marshes along the Delaware Bay coast furnished many cases of intermittent fever to the Philadelphia clinics, and those old fellows cured the patients almost without exception, and with the 200th potency. Hence I was *almost* convinced that there was potent curative influence in that preparation. This "almost" became a real conviction after my experience in Smyrna, Delaware, in which town I had my first responsible practice.

I went into partnership with Dr. Charles L. Mahon, the only homoeopathic physician in the place. His health was broken by the results of a combination of malaria, quinine and hard work. He was as bright and well-read as any physician I had met; an exceptionally upright and able man and physician. On leaving college I had provided myself with a complete set of Boericke & Tafel's 30th potencies. I had thus compromised between the mother tinctures of my preceptor and the 200th of my professors. When I opened my "kit" and showed it with pride to Dr. Mahon, he smiled and shook his head, saying: "those are no use here, in this aguish locality we all use quinine and crude drugs." (I neglected to say in its proper place that Smyrna is situated only a few miles from the Bay, and was filled with ague every spring and fall.) Naturally my faith in what I had seen done in the clinics was for the moment sadly shaken; but second thought recalled what I had seen so often and raised my confidence. I said to him, "I am convinced I have been neither dumb nor blind during all my time in college, and I am going to try these potencies."

It happened that fully two-thirds of the ague cases the first season after I joined him called for *natrum muriaticum*, the typical cases having severe chill every second day between 9 and 11 A.M., followed by very high fever, frequently delirium, and a very severe headache, all relieved by profuse sweat; desire for much salt; almost complete relief next day, etc. Other cases where large doses of quinine, cholagogue, etc. had been taken were not typical, and the chill might begin at any hour of the day or night; but these had the craving for salt and the headache, and the history, where it could be gotten, showed that the case had been originally a typical natrum one. The result was that, with scarcely exceptions enough to prove the rule,

only one prescription was needed in each case, and the uniform report was that the patient had one light chill on his second day and that was the last. (Sometimes in such cases a light chill would occur on the seventh day.) Dr. Mahon was a much surprised man, and I but little less, but he was broadminded enough, so that facts swept prejudice aside. The result was that he was cured of his own ailments and thereafter used in the treatment of intermittent fevers only the potencies. I would say here, parenthetically, that I am convinced that if there is one disease more than another amenable to homoeopathic remedies, it is fever and ague. Every such case can be cured by the properly selected potentized drug, and *natrum muriaticum* is the "King bee", of them all.

The truly (to me) wonderful action of *natrum muriaticum* in these cases made me say to myself that it would surely cure the other cases in which it was not indicated by the symptoms, and I tried it, but I might as well have given a pinch out of the salt barrel! For it made no impression whatever, and about twenty other remedies were required to cure the non-*natrum* cases, it being necessary to select these according to their characteristics.

This experience laid the foundation for my second conviction, namely: to be in the highest degree successful "we must treat the patient and not the disease." The truth of this has been verified and the conviction strengthened by the experience of each subsequent year.

Both convictions were copper-riveted and clinched by seventeen years' experience as Professor of Materia Medica and Clinical Therapeutics in Hahnemann Medical College and Hospital of Chicago, where during that period I had charge of the general medical clinic in the college and the medical ward in the hospital.

I had no prejudice in regard to high or low potencies; in fact, used the former less than the latter. I was aware, however, that a great majority of the students knew about and believed in the lower potencies, but that very few of them knew anything of, or had faith in, the higher. I was also aware that many of the leading teachers and writers in our professional history, and successful physicians in practice, believed in and used the higher potencies.

"When one has to do with an art, the end of which is the saving of human life, any neglect to make one's self thoroughly master of it, is a crime." - (Hahnemann.)

I laid these facts before the students and told them that we were there for the purpose of learning all we could of truth and fact about medicine; that we must as fully as possible lay aside all prejudice, and, with minds alert and conscience fearless, observe and accept truth and reject error. I assured them that they would never have a better opportunity of testing for themselves the question of potency, because in the clinics they would not have to risk pocket and reputation, as would be the case did they make such experiments in the beginning of their private practice; nor risk the lives of their patients, because the cases were nearly all chronic, in which a week or a month of no result would not mean danger or death, and these are the chief obstacles in the way of the young physician treating the question for himself. I had not faith in preparations made by uncertain and unscientific methods, labelled with fancifully high figures. I used the 30th, 200th and 1,000th of Boericke & Tafel. That firm assured me they would make affidavit at any time that their potencies were made by hand according to the Hahnemannian rule, and were exactly as labelled. The results were surprising to myself as well as to the thousands of students who graduated during the period of my connection with the college, and to this host of bright men and women witnesses I refer the doubting. The patients were examined before the full class of students and the symptoms elicited in their hearing. One of their number kept records of the cases and another prepared the medicines and gave them to the patients. There was thus no possible opportunity for deception; and, as I said before, the results were surprising. They could not be gainsaid. One colleague accounted for the results by claiming that I hypnotized the patients! However explained or accounted for, the results firmly fixed at least my faith in the "Science of Therapeutics" and in the curative action of the

potentized drug; and that faith has not only not been shaken, but has been, if possible, more firmly fixed by the experiences of subsequent years.

It must not be understood that only high potencies were used, or that I advocate only such. High and low were prescribed indiscriminately, and good results obtained with each. The higher were used more frequently for the reason given above, namely: because we all knew of and believed in the low, while but a small number had any confidence in the higher, and *we were there to learn*. I am convinced that sometimes a higher potency will do better than a low, and *vice versa*; that until we have a law to guide us in the selection of one or the other, it is best to use both; and that, other things being equal, the physician who uses both will be more successful than one who uses either exclusively.

To the average student, his first glance into the materia medica is discouraging to the last degree, also many subsequent glances. There is much that seems contradictory, superfluous and confusing; it seems cumbersome and far from perfect. To the beginner it seems as if he never could master it to a useful extent. But cannot all this, with equal truth, be said of other great and useful problems, and of other epitomes of great sciences? Place a novice in mechanics before an acme specimen of the modern printing press, and ask him to master and duplicate it. How utterly helpless and hopeless he feels! Give one unacquainted with mathematics to solve a problem of Euclid, or ask him to measure the distance between the stars. Will he have less cause for discouragement than our prospective student of materia medica?

But all and other equally great problems have been mastered by study and hard work. "There is no royal road to learning." That which is of most value is most difficult to gain. Idlers accomplish nothing. But, unfortunately, we are all naturally lazy and prone to follow the line of least resistance; with us work is artificial stimulus. He is an exception who labors for the love of work. It requires hard and *continual* study and work to acquire and retain a useful knowledge of the materia medica; and not one in a hundred of us puts in the necessary work. But if one does not know the materia medica and will not study it, he cannot apply it successfully, and when he lamely attempts to do so he fails, loses confidence and resorts to expedients. These, I am sure, are the reasons for the lamentable and unwarrantable lack of confidence in the efficacy of the "Science of Therapeutics", and resort to unscientific and palliative practice. I am ashamed to acknowledge that I know less of materia medica now than I did fifteen years ago, and it is because since I ceased teaching I have not had the same stimulus to study.

Hence I am convinced that the chief cause of present dissatisfaction with homoeopathy and materia medica is lack of knowledge of what we already have, rather than defects therein. How many within the sound of my voice know the characteristic symptoms of one hundred of our seven hundred or more proven medicines? How does one expect to recognize an individual unless he knows his features? Each remedy has its peculiar symptoms. Of all the billions of human beings who have lived and died; of all the hundreds of millions who now are living; of all the uncountable billions who are yet to live and die in this world, no two have features exactly alike. Each has, or did have or will have, within the 6 by 8-inch space of his facial oval, one or more features or differences from all the others. These are his characteristics.

In the study of materia medica, I am convinced that the best plan is to learn and *commit to memory* the *characteristic* symptoms - say, three to five of each remedy - and connect them in the mind with that remedy, rather than to give especial attention to their general symptoms, which are common to many. It is not sufficient in describing a man to say he has a nose, eyes, mouth, ears and hair - all men have these. They are his *general* features; we must know his *peculiar* features if we are to pick him out of a crowd. Pathognomonic symptoms are not good guides in prescribing. This is called by some, in disparagement "symptoms chasing." So it is symptom chasing. But how else can materia medica be learned, since that is the way it is

made? The making of *Materia Medica* - the proving of drugs - is surely "symptom chasing" in all its pristine glory. When a drug is being proved, symptoms - not conditions - are observed and recorded. Pathological conditions scarcely ever result from provings; symptoms always do, and it is these we record and learn and teach.

Hence I am convinced that the only true way to practise the "Science of Therapeutics", is to learn the characteristic symptoms of each remedy and fit them as closely as possible to the peculiar symptoms of the patient. If one knows three or four peculiar symptoms to each of, say, one hundred and fifty medicines, he will not need to know anything more in nineteen of twenty cases he may be called upon to prescribe for. In the twentieth case he may need to consult his repertory.

While it is acknowledged that our *materia medica* is imperfect, I would offer a note of warning to whoever undertakes the task of revising it. Hahnemann and his students and co-workers, and the Herings, Lippes, Guernseys, Allens, Dunhams, *et al.*, have built a wonderful work in our *materia medica* as it is. Who among us are fitted to safely revise it? The attempt would seem to be something akin to a modern painter undertaking to retouch a Rembrandt. Efforts in that direction in recent years, while most commendable, have not been eminently successful, in so far as help in prescribing for the sick is concerned. The great danger in all these attempts is that the most valuable, because the least common, symptoms will be eliminated. Could we secure a committee of Hahnemanns, or Herings, or Dunhams to revise or re-prove the *materia medica*, we need have no fear but great hope of results. I, myself, have tried faithfully, in a small way, to make provings of drugs, but failed to accomplish anything worth publishing. Especially when I essayed to prove potencies above the 12th have I failed utterly of results. Hence am I convinced that the proving of drugs and revision of the *Materia Medica* is a very serious and difficult undertaking, and not be lightly entered upon.

In conclusion, let me earnestly say that notwithstanding its great difficulties, and many imperfections, it is my unshaken conviction that the Homoeopathic *Materia Medica* and the Science of Therapeutics, fairly well known and understood, furnish the best known guides toward curing the sick. For me, there is absolutely no temptation to go outside of the law in my efforts to cure, because a long and varied experience has convinced me that I can do better for my patients by following its teachings. This, of course, means only the administration of *medicinal* agents for the cure of the sick. All else is outside of the meaning of "*similia similibus curantur*," and belongs to no school.

Every fact discovered by science since Hahnemann's death, having any bearing on his teachings, instead of casting discredit upon them and him, has sustained the claims of homoeopathy and added lustre to Hahnemann's memory. And I make the prediction now that the younger among us will live to see the day when thinking physicians the world over will acknowledge the truth of "*similia similibus curantur*," as the discoveries of radium and radio-activity have already made all acknowledge the potency of imponderable agents, because both propositions are true."

(William James Hawkes, M.D., Los Angeles, Cal., My Convictions regarding *Materia Medica* and Therapeutics after over thirty Years Practice, *The Indian Homoeopathic Review* vol. 16 (1907), p. 164-175. Reprinted from Transactions of the International Homoeopathic Congress, Atlantic City, September 1906)