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1887 - Thoughts on the exclusion of irrelevant symptoms from our **Materia Medica**

"From the earliest days of our school this subject has received a large degree of attention, yet to-day it appears still as far from a satisfactory solution as it was nearly half century ago. We must apologize for consuming valuable time in again presenting it, hoping withal that we may elicit such animated friendly discussion as will lend valuable aid in bringing it to a successful and profitable issue.

The utility of a thorough revision of our materia medica, one which shall have in view the expurgation of all irrelevant symptoms, none will deny. The necessity of the work is patent to all. The manner of its accomplishment is yet to be determined upon.

Important and difficult though this subject be, it has been handled by inexperts as glibly as though it were a mere bagatelle. The more experienced have hesitated as to the method most fruitful in good.

Various and unsuccessful have been the methods suggested. By some, the materia medica has been pathologized and by others physiologized out of every vestige of usefulness, when considered from the homoeopathic standpoint, i. e., from the standpoint of curative medicine.

Condensation has been tried, and though meeting with fairly good results, it still falls far short of giving us a scientific materia medica. To make a brief work it is difficult enough, but to make it at the same time sufficiently comprehensive is a task beyond the power of any who have as yet attempted it.

A condensed materia medica is but an imperfect epitome of the effects of drugs, and like all epitomes loses in attractiveness and serviceability in proportion to its brevity.

As well strip a tree of all its foliage and then seek shelter under its bare branches, as to cut out all of the apparently minor symptoms, and still hope to discover the fulness of applicability, the true sphere of action, of any given remedy.

The characteristics are, indeed, as root, trunk and branches to a tree, but without the so-called minor symptoms they become as a tree without leaves.

As the leaves aid in giving health and beauty to the tree, so do these lesser symptoms, when understood and utilized by the physician, lead to accuracy and effectiveness in his prescribing.

On a first reading of the symptoms as usually presented in the text-books of homoeopathic materia medica, the student will invariably be impressed with the appropriateness of Hamlet's expression, " Words, words, words."

Words which convey no connected thought, composing sentences which awake in the mind no definite idea! Yet even the least apt will after continued study begin to see light glimmering through this cloud of words. Nevertheless, the whole study, even to the most gifted, presents obstacles which at first sight seem practically insurmountable.

This should not and in fact this need not have been, if we as a profession had applied an amount of energy to the development of the materia medica commensurate with its importance.

Will the analytical chemist be deterred from study because he must master many trifling but difficult minutiae? Will not these very difficulties fire his determination and act as an

incentive to the mastery? Should the physician hesitate to apply at least as much study to the accomplishment of a still higher object? Thus far we have assumed that no definite plan has been offered the student. Are we right in this, and are the difficulties indeed so great if we follow in the footsteps of that master in medicine, Hahnemann; working in the field as he wrought and taught?

True, the schematic system adopted by Hahnemann while possessing some points in its favor, presents infinitely more important ones adverse to it. In fact we can say but little in its favor, save as a classified register of symptoms, unless accompanied by chronological reports of the drug provings, or by careful analyses of the more characteristic order or sequence of symptoms.

Hahnemann saw the importance of preserving a record of such sequences, and though poverty prevented the publication of both day-books and the schematic arrangement, he carefully noted, in brackets, the time of occurrence of many of the important symptoms. Had the same been done by all subsequent editors of proving, we to-day might be in possession of elaborate works, suitably arranged for ready reference.

Based as our system is upon one of Nature's most potent laws, we have a right to expect that out of all this complexity of provings a practical materia medica shall be evolved. But dare we demand that form of extreme simplicity in detail which is so much sought after?

As well might the student astronomer demand that his complex algebraic formulae, perplexing equations, and intricate triangulations be expurgated from his daily labors as to demand that materia medica must have all its intricacies and brain-racking problems simplified out of existence. Clearer and more concise characteristics must be sought, but the problem of the scientific development of the materia medica cannot be solved on the plan of reducing it to the plane of a primary reader. We must be educated up to it, not trim it down to suit the meagre ability of the least talented. Nevertheless, the schematic form as usually employed is not the one most consistent with true development. As before stated, Hahnemann recognized this, in that he noted the time of occurrence of symptoms, but he went farther. So soon as experience warranted, we find him detailing, in the introductory paragraphs to a number of the remedies, conditions rendering the choice of the remedy more certain, thus inaugurating the system of characteristics.

In the materia medica of 1822 we find but few such characteristics noted, but as experience ripened and power to speak with authority grew, we find that he epitomized the remedies more thoroughly, as witness the *Chronic Diseases*, 1835. Herein, for instance, we find alumina with 1161 recorded symptoms. In the introduction thereto, Hahnemann says: "Alumina will prove especially useful if, when suited to the general disease state, one or more of the following conditions exist." Then follows a page of characteristic conditions numbering fifty-seven. Many other remedies are treated in a similar manner. This plan enables one to quickly grasp the genius of each remedy, and if properly carried out, will enable the intelligent student to master the characteristic sphere of action peculiar to each drug.

Hahnemann taught, that in "taking a case," or in making a proving, every symptom and modality, however trivial, should be recorded (see *Organon*, § 84 to § 99). Nevertheless, he at the same time taught, that the selection of the remedy should be based upon the correspondence with the most characteristic and striking symptoms of the case.

In § 153 he says: "In this search for a homoeopathic specific remedy, that is in this comparison of the complex of symptoms of natural disease with the symptom registers of the various remedies, in order to select from among these an artificial morbific potency corresponding to the disease to be cured, it will be necessary to give especial, almost exclusive, attention to those symptoms which are striking, singular, extraordinary and peculiar (characteristic).

These must present marked similarity in order that the remedy may be best adapted to the cure. The general and indefinite symptoms, such as loss of appetite, headache, lassitude, restless sleep, discomfort, etc., deserve, unless more clearly defined, but little attention. Some such generalities will be found in almost every disease, as well as in the effects of almost every drug."

Had these words of Hahnemann received the attention which their importance would have warranted, what might not have been accomplished, during the past half century, in the expurgation of worthless and erroneous symptoms!

Only in this way dare we hope for simplicity without deterioration, condensation without mutilation of our materia medica. The daybooks must be retained intact, the schematic arrangement must be full, the sifting process reached in practice must be conscientiously performed, and then the condensation process may be employed in the hope - yea, in the full assurance - that the distinctive characteristics will be so summarized as to give us a practically complete working materia medica.

Brevity should give place to clearness just as surely as prolixity must give place to terseness. By these means we, metaphorically speaking, retain the tree in its fulness in the daybooks of the provers; yet in our practical working edition we will find such characteristic portions, from root to flower and seed, as will enable us to promptly and unerringly distinguish the various remedies, as indicated by the symptoms of the sick.

For the accomplishment of this much-desired end it will be necessary that we understand more fully than heretofore the combining relationship of symptoms, for here, even as in chemistry, much depends upon a correct knowledge of such combining effects. Again, more heed must be given to the mental symptoms; these, reflecting, as they do, the effects of the perverting force upon the higher forces of the human economy, should at all times receive our most serious consideration.

One feature which should receive especial attention in the process of weeding out useless symptoms is the needless multiplication of words expressive of but one idea; thus we find sticking, stitching, stinging, piercing, each but types of one sensation, representing conditions so nearly akin that save when etymological knowledge has advanced beyond the common grade a definition of the difference can scarcely be obtained.

While on some accounts it may prove desirable to retain these verbal differences, the relationship of such expressions should be distinctly kept in view. This alone would overcome one serious drawback to the ready use of our materia medica, while at the same time it would be an onward step toward a proper condensation of the same.

Let then a clear idea of the specific sphere of action of each drug be well wrought out, and it is astonishing to find with what few symptoms, or rather combinations of symptoms, we have to deal. Not that such combinations would contain all the really reliable symptoms, but that where such symptoms or combinations are not found the remedy will not be indicated. Thus instead of the impossible feat of memory now before the student of medicine, a comparatively easy task will be his. Let such a plan be carefully developed and aconite, for instance, may be summarized within twoscore characteristic conditions.

How much more simple and at the same time more reliable in its practical application to the treatment of disease would not such a summary of characteristic effects of a drug prove than the generalizations common to the allopathic Pharmacopoeia, where, for instance, under aconite, we read that "the action of aconite and that of its alkaloid aconitia are so nearly identical in nature that both may be described in the same article," while farther on we learn that "several experimenters have thrown doubt upon the identity in action of aconite and aconitia, some expressing their views of the difference between them by saying that the former is acro-

narcotic and the latter narcotic;" and again: "In regard to the action of aconitia, experimenters are not agreed; some maintain that it paralyzes the central nervous system; others that it paralyzes the peripheral motor nerves; still others that it affects simultaneously the cerebral nervous system and the muscles, paralyzing both; and finally it is held to act essentially on the centres of the medulla oblongata and spinal cord proper, first exciting and then paralyzing them." In regard to its utility as a remedy in neuralgia, rheumatism, inflammatory fevers, dysentery, pneumonia, etc., nothing favorable is said. We find only doubt added to uncertainty, until the conscientious prescriber must feel that he stands in helpless ignorance beside the suffering patient longing for even a single ray of truth-revealing light.

What need we then care to know that most writers claim that aconite's great centre of action is upon the ganglionic system, or that some lesser lights claim that its effects are produced through the cerebro-spinal nervous system, as is learnedly given in one of our text-books? They, one and all, are but playing a sorry game of chance, the patient, in any event, being the likely loser. Such method shows but guesswork based upon crude experimentation.

Much valuable time has been wasted and many precious opportunities lost in these efforts to reach some such physiological basis for prescribing.

Little have these writers heeded Dr. Hering's saying: "Homoeopathic provings will lead to a new physiology, and with it a new pathology." But there is an indescribable charm to the human mind in this search not only after the unknown but also after the unknowable. Hypothetical views possess a fascination for the average mind which, like some fabled power, holds the victim spellbound until a lifetime has been fruitlessly spent pursuing myths. Hahnemann felt the force of this truth and cautioned against placing any dependence upon hypothetical surmises relative to the internal dynamic causes of disease; Rau, echoing his views, truly says: "The physician who engages in a search after the hidden springs of the internal economy will hourly be deceived."

In conclusion we would suggest that to develop a materia medica which will meet all the requirements of scientific practice we must preserve the full reports as per daybooks of the provers. The provings should be made as directed by Hahnemann, and upon many individuals. The superintendent of such provings, himself competent and sincere, should be personally assured of the honesty and intelligence of his provers.

Personal supervision and, if possible, daily examination as to the exact nature of the symptoms experienced, as well as to the chemical and microscopic character of the secretions and excretions, are needed. Careful physical examinations should also be made.

The characteristic symptoms, regardless, however, of any existing theories of physiological relationship, should then be summarized, after which we may apply these facts under the law to the treatment of the sick.

But, you ask, what about all the non-essential symptoms? We answer: Every genuine symptom is essential, even as every line is to the finest steel engraving. In viewing such a picture we do not discern each line thereof individually. In fact, we recognize it rather as a whole, without minute examination of the minor points of detail; we know not the number, though we can appreciate the essential character of each line. Each must be just where it is and as it is that the picture may be perfect.

The most useful knowledge of a remedy may be likened unto that of the picture. It can be acquired only through long and earnest study. Once, however, knowing its true characteristics, we ever after, through them, recognize it even as the connoisseur will, through certain characteristic individualities, speedily recognize an artist's work in every line from his pencil."

(August Korndoerfer, M.D., Philadelphia, Thoughts on the exclusion of irrelevant symptoms from our Materia Medica, Transactions of the Homoeopathic Medical Society of the State of Pennsylvania, Twenty-Third Annual Session, Philadelphia (1887) p. 93-100)