

Adolph Lippe



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Adolph Lippe (1812-1888)

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1846 - A letter to the Editors of the Homoeopathic Examiner

Carlisle (Cumberland Co., Pa.), April 7, 1846

Drs. Gray and Hempel -

As the discovery of the high potencies opens a new field for our science, some of our too scrupulous friends may be induced to try them; no follower of Hahnemann and his principles, ought to judge of them before he has tried them fairly.

1. A young lady (aet. twenty-four,) of a very delicate constitution, complained of great weakness. Constant pain in the heart, by times stitches through the heart and left shoulder-blade, the palpitation is felt very sensibly by the patient, the pulsation of the heart irregular, intermittent and too slow, sometimes a fluttering of the heart, and if this fluttering is worse, she feels very weak and fainty, and is obliged to lie down. Pulse too slow and irregularly intermittent. Burning between the shoulders, and various pains in the back at different times, complains of great weakness, principally in the back after walking. Hands and feet cold, hands often numb, sometimes the whole arm numb so that she is obliged to rub them. Sleep is unrefreshing. She feels best some time after rising in the morning, and begins to feel worse by 10 or 11 o'clock, A. M., till she goes to bed again in the evening. No appetite. The palpitation and pain in the heart and the intermitting pulse, are of very long standing, (ten years,) she has taken no medicine for a considerable time. I administered Natrum mur. 300^o a single dose. The next day after taking it, the pulse became more accelerated and less intermitting; on the third day she felt stronger in general, and the improvement became more perceptible every following day, and at present, a month after she took the remedy, the pulse is nearly normal, all the pains are gone, and the strength is still improving.

2. A gentleman, aet. thirty-five, who had been syphilitic at various times, and had always taken large doses of mercury, with the exception of the last time about five years ago, when a homoeopathic physician attended him, called on me eight days after he had contracted the disease. I found a small ulcer on the edge of the preputium, a great deal of inflammation around it - he complained of much itching in it. I gave him one dose of Merc. viv. 200^o. In a week after he took the remedy, I examined him again, and found that the ulcer, the inflammation and itching had completely disappeared, and nothing has returned for now three months.

3. I have treated three cases of scarlet fever exclusively with high potencies. Belladonna 400 was the principal remedy, and served as well to bring out the eruption, as it was beneficial during the stadium efflorescentiae. In one case, I gave on the second and third day after the appearance of the rash, one dose of Aconite 300 in the evening, as the pulse was then above 160. In another case, I gave on the third day, when the angina was accompanied with great flow of saliva, one dose of Merc. vivus 200, which remedy produced a very favorable change in a few hours, so that I was able to continue the Bellad. 400. In the third case the patient received the sixth day, a few doses of Lachesis 800. The fifth day every one of these patients was able to sit up, and was left without any further medicine. On the ninth day no after-disease made its appearance. I repeated the doses every two or eight hours, guided by the severity of the fever. The cases were quite severe. Belladonna 400 had a more salutary effect than I have ever seen before of the same remedy, when used in the 1st up to the 30th potency.

I might communicate a great many more cases, but I leave that task to more able writers than I am, and only hope that the profession generally will make further trials with the high potencies.

Most respectfully yours,

ADOLPHUS LIPPE.

(Letter from Dr. Lippe, The Homoeopathic Examiner, New series, vol. 1 (1846), p. 417-419)

1851 - Hochpotenzen

"Wie sich Verdienst und Glück verketten
Das fällt den Toren niemals ein;
Wenn sie den Stein der Weisen hätten,
Der Weise mangelte dem Stein."

Goethe.

"Von Vielen ist Vieles über Hochpotenzen gesagt und geschrieben worden, und noch sind wir so weit, ja scheinbar weiter von der Lösung dieser für die Förderung der Heilkunde so wichtigen Frage entfernt wie zu Anfange. Aber wie sollen wir denn zu einer Gewißheit kommen? Einzig und allein durch vorsichtige Versuche und der Erfolg muß den Ausschlag geben. Die Theorie "Similia similibus curantur", auf deren Wahrheit die Homöopathie beruht, läßt sich nur genügend beweisen durch Tatsachen, und nun diese zu erhalten, müssen Versuche und zwar Versuche im Großen angestellt werden; der Erfolg solcher Versuche verglichen mit dem Erfolg von Versuchen, die mit andern Heilmethoden angestellt werden, muß den Ausschlag geben und die Richtigkeit der Theorie beweisen. Diese Versuche konnten anfänglich freilich nicht im Großen oder in eigens dazu bestimmten Hospitälern angestellt werden, und es war dann anfänglich nur der Austausch persönlicher Erfahrungen von günstigen, ja erstaunlichen, früher nie gehörten Resultaten in der Heilkunde, die nach und nach der Homöopathie überall Eingang, und dann allgemeine Aufnahme verschafften. Es steht nun mit den Hochpotenzen wie es mit der Homöopathie überhaupt stand, als dieselbe der Arzneiwelt wie der leidenden Menschheit dargeboten wurde. So wie die Homöopathie von den Ärzten fast allgemein schimpflich und unziemlich behandelt worden, weil sie die zur Überzeugung nötigen Versuche anzustellen sich weigerten, so geht es in neuern Zeiten gerade mit den Hochpotenzen, und aus demselben Grunde und statt Versuche anzustellen, nehmen jetzt wie damals die Ärzte ihre Zuflucht zu unzulässigen Argumenten, die eben nicht auf Erfahrung beruhen, und so alt und abgeschmackt diese Argumente auch sind, werden sie uns doch wieder aufgetischt, und wie sie damals durch die Übermacht der Wahrheit, gegründet auf Resultate vieler Versuche, d.h. Tatsachen, zu Nichts gemacht worden, so wird es ihnen auch jetzt ergehen. - Auch jetzt, wie im Anfange der Homöopathie, müssen wir uns mit Versuchen, die von einzelnen Ärzten gemacht und den übrigen mitgeteilt werden, begnügen, aber bald wird es sich aus diesen Versuchen herausstellen, welche Wichtigkeit die Hochpotenzen für die Förderung der Homöopathie haben.

Aber diese Versuche müssen in gehöriger Anzahl und vorsichtig angestellt werden - und keine Resultate, die von solchen Versuchen, wie sie früher Professor Andral in Paris mit der Homöopathie anstellte, ebenso wenig die Rede sein, wie von denen des Herrn Dr. Johannsen in St. Petersburg kürzlich angestellten mit den Hochpotenzen. Ersterer wußte von der Homöopathie nichts, gar nichts, letzterer weiß von Logik auch gar Nichts - z. B. ist das ein Beweis für die Unwirksamkeit der Hochpotenzen, wenn er einem Patienten für Heiserkeit etc. Phosphor 60 gibt ohne Erfolg und dann mit Spongia 1 heilt? Hätte Phosphor 600, 400, 200, 60, 30 nichts geholfen, und nachdem lange genug gewartet worden, Phosphor 1 die Heilung schnell zu Wege gebracht, so wäre das eine Art von Beweis, aber auch nur eine Art, wie ich weiter unten zeigen werde. Gegen ein Geschwür am Bein, berichtet er, gab er Silicea 6 - Oh! - und 18, dann 200, welches einzuwirken schien, aber es heilte nichts, und Mezereum 1 heilte: warum aber heilte Silicea nichts? weil es nicht das rechte homöopathische Mittel war, Alles. was der gute Herr Dr. hier logisch bemerkt, ist:

- 1) daß er zweimal wählen mußte, bis er das homöopathische Mittel finden konnte,
- 2) daß Spongia 1 und Mezereum 1, wenn sie homöopathisch angezeigt sind, heilen, d.h., daß man mit niedern Potenzen auch heilen kann.

Dr. Johannsen will aber beweisen, daß die Hochpotenzen nicht heilen, und das wird er eben nun und nimmermehr nicht tun können, denn hätte er statt Spong. 1 und Mez. 1 dieselben Mittel in der 200. oder 2000. Potenz gegeben, so hätte er aber eben auch, und vielleicht schneller und gründlicher geheilt.

Die Homöopathie ist eine Heilungstheorie, Allöopathie und alle anderen Heilmethoden eine Krankheitstheorie. Als Homöopathen ist das Heilen unsere erste Pflicht und das zu bewerkstelligen, haben wir nur eine Theorie "Similia similibus curantur". - Wenn aber die rationellen (d.h. so sein wollenden) Homöopathen dieser allgemeinen Theorie noch ein wenig von der Krankheitstheorie anhängen wollen, dann sind und werden sie nie Homöopathen sein, und müssen die Hochpotenzen, die sie durch ihre trübe Krankheitstheorie gar nicht sehen können, eben verwerfen, und wie der fortgesetzte Gebrauch dieser Brille nur noch immer kurzsichtiger machen kann, werden sie bald von Potenzen gar nichts mehr sehen, endlich Similia similibus nicht mehr und zuletzt auch keine Heilungen, d.h. sie werden in ungeheure Blindheit verfallen - ihre Kranken aber in's Grab - für welche Blindheit keine niedere Potenz, so wenig wie ein Aderlaß oder eine Purganz hilft, wohl aber eine Hochpotenz. - Wie es aber nun im 19. Jahrhundert noch Ärzte gibt, die ihre Kranken lieber allöopathisch, d.h. ohne Heilungstheorie zu Grunde gehen sehen, als daß Homöopathie sie heilen sollte, und wie es noch Kranke gibt, die das auch vorziehen, oder sich doch dazu bereden lassen, so gibt es auch Ärzte, die sich allem Fortschreiten entgegensetzen und eben sich selbst unbewußt rückwärtsgehend in ihrer alten Heimat der Krankheitstheorie ankommen: - denen helfen nur Hochpotenzen, wenn sie noch Mut genug haben, dieselben anzuwenden. Den Tatsachen, die sich ihren neubelebten Gesichtssinnen darstellen, werden auch die rationellen Zweifel, die sie über Arzneikraftentwicklung durch Potenzierung hegen, weichen. Es wird ihnen Tag werden und auch ihren Patienten.

Seit drei Jahren habe ich in einer bedeutenden Praxis mich der von Herrn Jenichen bereiteten Hochpotenzen von 200 bis 2000 bedient, und nur höchst selten ausnahmsweise andere Potenzen und dann nur die 30. angewendet. Von den niedern Potenzen genüge hier nur zu sagen, daß uns Hahnemann nach langen und aufmerksamen Beobachtungen bei der 30. Potenz gelassen hat. Die Anwendung einer niedern Potenz ist nur zulässig, wenn unsere Arzneimittellehre kein den Krankheitssymptomen ganz entsprechendes Mittel aufzuweisen hat, was nur selten, sehr selten der Fall sein wird, dann heilt auch die niedere Potenz nie die ganze Krankheit, sondern es wird nötig sein, für die nur geänderten Symptome ein passenderes Mittel zu wählen: die Verteidiger der niederen Potenzen geben ganz deutlich zu erkennen, wie es mit ihrer Arzneimittellehrekennntnis aussieht. Wenn die Heilkunde, wie sie uns von Hahnemann übermachtet worden, noch nichts Vollkommenes war, wie überhaupt keine Wissenschaft je ganz vollkommen werden kann, so behuft es seinen Nachfolgern Alles zu tun, was in ihren Kräften ist, um diese Wissenschaft zu fördern, dahin gehören Prüfungen, und darüber sich Alle einig; aber über die Gabengröße sind wir nicht einig, da es aber eben so wichtig ist, darüber in's Reine zu kommen, wie es wichtig ist Arzneisubstanzen zu prüfen, so sollten aber auch die Erfahrungen über den Erfolg der verschiedenen Gabengrößen mitgeteilt werden und hier genüge es zu sagen, daß die Verteidiger der niedern Potenzen weiter gar nichts zu tun haben, als das rechte, d.h. dem Krankheitsfall homöopathisch entsprechende Mittel zu wählen, dieses in einer hohen Potenz, z. B. 400, zu verabreichen, und wenn es nicht hilft, solches samt den Symptomen bekannt zu machen, dann aber die niedere Potenz desselben Mittels zu geben, und wenn solche Gabe hilft, d.h. vollkommen heilt, solches auch bekannt zu machen. - Ohne Tatsachen können wir heutzutage keinen Beweis führen - die Tatsachen sind der Beweis. Gegen die Hochpotenzen habe ich in der homöopathischen Literatur noch keinen Tatsachenbeweis finden können, genug Beweise, wie der des Dr. Johannsen, d.h. einen Beweis ohne Beweis - wohl habe ich Tatsachenbeweise für die Hochpotenzen gefunden, die mir so weit genügten, daß ich selbst Versuche mit denselben anstellte, und wäre es bisher gelungen mit solchen Mitteilungen das Vorurteil der Widersacher zu überwältigen, so wären weitere Mitteilungen und auch

gegenwärtige Zeilen überflüssig, da dem aber leider nicht so ist, so fühle ich mich bewogen meine Erfahrungen der Arztwelt hiermit zur gefälligen Beachtung zu übergeben.

Nach dreijähriger Anwendung der Hochpotenzen habe ich folgende Beobachtungen gemacht.

- 1) Eine einzige Gabe der Hochpotenz ist in akuten wie chronischen Krankheiten hinlänglich.
- 2) Die Wiederholung desselben Mittels ist selten zulässig.
- 3) Die Wirkung **einer** solchen Gabe hält in akuten Krankheiten oft Tage, in chronischen oft Monate lang an.
- 4) Nach Verabreichung einer Hochpotenz stellen sich oft Symptome ein, die nicht unter den bekannten Mittelzeichen zu finden sind (z. B. aussetzender Puls nach *Silicea* und *Tartarus emeticus*, Ausschlag, wie Masern, nach *Antimonium crudum*). Solche Zeichen sind von großem Werte und denen von großen Gaben beim Prüfen erhaltenen wenigstens gleichzustellen.
- 5) Die Hochpotenzen heilen, wo die niedern entweder gar keine Wirkung hervorzubringen scheinen, nur kurze Besserung bewirken (z. B. in *Taenia*) oder bedeutend verschlimmern ohne dann zu bessern.

Es wäre mir ein Leichtes eine sehr große Anzahl von Heilungsgeschichten mitzuteilen, hier will ich nur einige geben, in denen die Heilung einer einzigen Gabe eines einzigen homöopathischen Mittels in der Hochpotenz gereicht, gelungen ist. Mich aller Krankheitsnamen enthaltend gebe ich nur die Symptome.

1. Ein junge Dame, schwächlicher Konstitution, klagte über große Schwäche, öfteren Schmerz am Herzen, öfters Stiche durch das Herz bis durch das linke Schulterblatt, Herzschlag stark, oft aussetzend, unregelmäßig und zu langsam; zuweilen Flattern des Herzens und dann muß sie sich legen aus Schwäche. Puls zu langsam (50) und aussetzend. Brennen zwischen den Schultern, nach Gehen große Schwäche des Rückens. Hände und Füße kalt, Taubheitsgefühl in den Händen, oft ist der eine oder andere Arm ganz taub, welches nach Reiben vergeht. Schlaf unerquicklich. Nach dem Aufstehen Morgens befindet sie sich am Besten, von 10 Uhr Vormittags ist sie mehr unwohl und das dauert bis sie sich Abends zu Bette legt. Das Herzklopfen, der Schmerz am Herzen und der aussetzende Puls ist ein jahrelanges Übel. Hat schon seit Monaten keine Arzneimittel genommen. Ich gab ihr eine einzige Gabe von *Natrum muriaticum* 300. Den nächsten Tag, nachdem sie das Mittel genommen, wurde der Puls schneller und weniger aussetzend, den 3. Tag fühlte sie eine Zunahme der Kräfte und wurde dann von Tag zu Tage besser, die Schmerzen am Herzen, das Herzklopfen verschwanden ganz und einen Monat, nachdem sie das Mittel genommen, war ihr Puls regelmäßig.

Da dieses eine meiner ersten Heilungen mit Hochpotenzen war, teilte sich sie unter dem 7. April 1846 im *Homoeopathic Examiner* mit, einen Monat darauf sprach ich mit meinem Vorgänger in meiner Praxis, der mir mitteilte, daß er derselben Patientin, die er jahrelang behandelt, *Natrum mur.* von der ersten Verreibung bis zur 30. Potenz oft und wiederholt, ohne die geringste Besserung bewirken zu können, gegeben habe - er machte sofort Versuche mit Hochpotenzen und wurde bald von der Wirkung derselben und dann von ihrer Vorzüglichkeit überzeugt.

2. Ein Mann, 35 Jahre alt, der häufig an Syphilis gelitten und dann stets große Gaben verschiedener Merkurmittel genommen, hatte sich diese Krankheit von neuem zugezogen oder die alte Syphilis brach wieder aus. - Ich fand ein kleines Schankergeschwür am Ende der Vorhaut, mit großer Entzündung der Vorhaut - unerträgliches Jucken im Geschwür. Ich gab ihm eine Gabe *Mercur* 200. Eine Woche nachher untersuchte ich ihn wieder und da war keine Spur der Krankheit mehr sichtbar.

3. Ein junger Mann, 19 Jahre alt, der das erste Mal an Syphilis litt und den 7. Tag nach der Ansteckung Mercur 400 eine Gabe nahm, wurde 2 Tage lang viel schlimmer, in einer Woche heilte Alles und seit einem Jahr ist und bleibt er gesund.

4. Die ersten akuten Krankheitsfälle, die ich mit Hochpotenzen behandelte, waren 3 Kinder mit Scharlachfieber. Belladonna 400 war das Hauptmittel, welches nicht nur den Ausschlag schnell herausbrachte, sondern auch im Stadium efflorescentiae gute Dienste leistete. Einem Kinde gab ich eine Gabe Aconit 300 am Abend des 5. Tages, da der Puls über 160 war. In einem andern Falle gab ich den 3. Tag, als die Angina von übermäßigem Speichelfluß begleitet war, Mercurius vivus. Den 5. Tag waren alle 3 Patienten wohl genug aufzusitzen - Nachkrankheiten keine. - Bei der Behandlung des Scharlachfiebers sah ich nie solche Resultate von Belladonna als in diesen Fällen.

5. Ein junger Mann, 19 Jahre alt (Student), der früher öfter Anfälle von biliösem Fieber gehabt hatte und natürlich in den großen Krankheiten große Gaben Calomel genommen, klagte über Halsschmerzen. Ich fand folgende Symptome: In den letzten 36 Stunden hatte er gar nichts schlucken können. Im Halse bedeutende Entzündung mit kleinen Geschwüren, aashafter Geruch vom Munde, der äußere Hals ist sehr schmerzhaft bei Berührung. Angesicht und Augen gelb, das Angesicht besonders um die Augen geschwollen, viel Speichelanhäufung im Munde - kein Schlaf. - Eine Gabe Lachesis 800, Morgens verabreicht, besserte sofort - er konnte schon zu Mittag etwas genießen, und war den nächsten Tag ganz gesund.

6. Ein Kind, 5 Monate alt, hatte seit 2 Monaten an Wundheit um den Hals, unter den Armen, zwischen den Beinen, trockenen Blüthen auf dem Kopf und harten kleinen Knoten in den Fußsohlen gelitten. Alle Versuche diese wunden und sehr feuchtenden Hautstellen zu trocknen hatten zum Glück des Kindes keine Wirkung. Nach einer Gabe Sulphur 400 wurde die Entzündung und Absonderung viel schlimmer, besserte dann, bis in 3 Wochen Alles geheilt und eine völlige Hautabschälung erfolgte.

7. Ein Herr, 50 Jahre alt, hatte an einer sich durch Erkältung zugezogenen Otitis gelitten, er hatte für die Entzündung selbst Pulsatilla und für den nachfolgenden Eiterausfluß Mercurius vivus genommen. Der Eiterausfluß war in 2 Wochen beseitigt. Er klagt nun über Trockenheit und Verstopftheitsgefühl im rechten Ohr, kann fast gar nichts hören, was um so beschwerlicher war, als er das Gehör des linken Ohres schon in der Kindheit verloren hatte. Petroleum und Nitricum acidum hatten ihm nichts geholfen. Eine Gabe Lachesis 800 (vide Dr. Hering Wirkungen des Schlangengiftes, Sympt. 556, 559, 561). Den nächsten Tag wurden alle Zeichen schlimmer, aber nach Verlauf einer Woche war das völlige Gehör ohne den Gebrauch irgend anderer Mittel wieder normal geworden und die übrigen Symptome auch verschwunden.

8. Ein junger Mann klagte über Kopfschmerzen von Verkältung, die rechte Kopfseite schmerzt vorzugsweise, schlimmer Morgens und dann macht kaltes Wasser den Kopfschmerz viel schlimmer - zu Verstopfung geneigt. Ich gab ihm 3 Gaben Nux vomica 30 mit der Anweisung sie zu nehmen, wie die Umstände es erheischen würden. Einige Tage nachher sagte er mir, daß ihm jedes Pulver Erleichterung verschafft, daß aber nun Alles schlimmer sei. Eine Gabe Nux vomica 300. wirkte schneller wie 30. und die Schmerzen verschwanden ganz und kehrten nicht wieder."

"Der von mir den 17. Februar 1849 in Carlisle, Pennsylvanien, geschriebene und vollendete Aufsatz wurde durch die gütige Besorgung des Dr. Hering damals an Dr. Buchner geschickt, da aber später Dr. Buchner seine Zeitschrift nicht fortsetzte, von ihm an die Allgemeine Homöopathische Zeitung geschickt und in derselben unter Hering's Namen den 9. und 16. Juni 1851 publiziert.

Ich nehme mir nun die Freiheit Ihnen die Fortsetzung zu überschicken.

Es sind nun 2 ½ Jahre seit meiner letzten Mitteilung verstrichen, seit dieser Zeit habe ich ausschließlich Hochpotenzen und zwar die Jenichenschen Zubereitungen angewendet, und hier nun der Erfolg meiner Erfahrungen.

Wie ich mich in meiner Mitteilung vom 17. Februar 1849 ausließ, kann nur durch sorgfältig angestellte Versuche die Frage über die am besten anwendbaren Potenzen entschieden werden. Um diese Versuchen anstellen zu können, muß sich aber der Versuchende mit der Kunst des Mittelwählens vertraut gemacht haben. Zur Kunst des Mittelwählens ist zuerst notwendig die Kunst das Krankheitsbild gehörig aufzunehmen (Krankenexamen) und setzt ferner eine sehr genaue Mittelkenntnis voraus. Wer Pneumonia allemal mit Aconit und Bryonia oder mit Phosphor und Tartarus emeticus heilen will, der ist nicht zur Anstellung solcher Versuche geeignet.

Die Mittel müssen nicht nach Krankheitsnamen, sondern nach Krankheitsbildern gewählt werden. Ist aber nach dem ganzen Krankheitsbilde das rechte homöopathische Mittel gewählt und dem Kranken in der kleinsten Gabe gegeben worden, dann kann mit Zuversicht gewartet werden auf die dann nie ausbleibende gute und lange Wirkung der gereichten Arznei. Entspricht aber keine der jetzt bekannten Arzneien dem Krankheitsbild und muß daher dann die Wahl entweder nach der vorliegenden pathologischen Falle oder nach ganz allgemeinen, nicht charakteristischen Symptomen getroffen werden, welcher Fall nur sehr selten vorkommt, dann ist es geratener, die Arznei in einer größeren, aber immer noch homöopathischen Gabe, d.i. in einer Potenz zu geben, zuweilen ist dann eine Wiederholung nötig, worauf sich dann gewöhnlich die Symptome so gestalten, daß eine Wahl des ganz homöopathischen Mittels möglich ist, was auch dann in **einer** sehr kleinen Gabe sofort und lange heilbringend wirken kann.

Ein Stillstand in der Wissenschaft ist nicht denklich, und ich betrachte nun die Anwendung der Hochpotenzen als einen Fortschritt, das Herabsteigen zu Tinkturen, Verreibungen, ja von Substanzen als einen Rückschritt in der Heilwissenschaft, wie auch die mannigfach mitgeteilten Krankengeschichten zur Genüge beweisen, und daher will ich es mir angelegen sein lassen, meine Erfahrungen auf dem Felde der Heilungen mit Hochpotenzen von Zeit zu Zeit mitzuteilen. Um dieses besser zu können, habe ich seit dem 28. Mai des Jahres hier in Philadelphia ein "Dispensary" eröffnet, wo wöchentlich zweimal die Armen Arznei gratis erhalten: es werden da nur Hochpotenzen - von 200 bis 40,000 - angewendet, und zwar erhalten die Kranken die **eine einzige** Gabe auf der Stelle. - Das Buch aber, in welchem die Krankengeschichten, Mittel, etc. sofort eingetragen werden, hält einer der anwesenden Studenten. Diese Anstalt soll sehr bald dazu dienen, öffentliche Berichte über den Erfolg der Anwendung von Hochpotenzen zu liefern. Sobald über 100 Fälle behandelt worden sind, werde ich einen Bericht einschicken.

Meine Prognose vom 17. Februar 1849 ist leider nur zu wahr geworden, wenigstens die erste Hälfte davon. Die Krankheitstheorienbrille hat ihre Wirkungen zu entwickeln nicht versäumt: vide Juli-Nummer des "British Journal of Homoeopathy", in welcher Nummer sich Heilungsgeschichten von Dr. Liedbeck vorfinden, der wendet dann Liquor Ferri mur. oxyd., löffelweise, und Kali hydroj. à la Lobethal in Gaben von 20 Granen an. Hätte ein Rademachianer solch eine Mitteilung gemacht, so hätte sich die aufgeklärte Arztwelt darüber gefreut, daß diese Herren auf dem rechten Wege zur richtigen Heilmethode sind, und daß sie auch die unnützen, oft gewiß höchst schädlichen großen Gaben mit der Zeit mit den kleineren und später mit den ganz kleinen zu vertauschen lernen werden. In **dem** Falle würde es ein Vorwärtsschreiten anzeigen und erfreulich sein.

Im vorliegenden Falle aber ein Rückwärtsschreiten anzeigend, ist die Mitteilung durchaus nicht erfreulich, und muß eine gute Portion Freisinn von Seiten des Journalisten dazu gehören,

solche Heilungsgeschichten aufzunehmen, die viel besser ihren Platz in den Oppositionsblättern finden würden.

9. Ein Kind, 2 ½ Jahre alt, wurde zu mir gebracht; die Mutter sagte, daß es öfters Stunden lang schreit, bis dann zuweilen Konvulsionen ausbrechen - beim Schreien ist das Gesicht dunkelrot - Schlaf sehr unruhig, Leib sehr bedeutend aufgetrieben, Stuhl dünn und grün. Das Kind hat schon alle Arten Nostrums genommen. **Eine** Gabe Belladonna wurde ihm gegeben, in zwei Tagen hörten die Anfälle von Schreien auf; nach einer Woche gingen eine große Menge kleiner Würmer mit dem Stuhle ab, ich sah das Kind 3 Wochen, nachdem es **eine** Gabe Belladonna genommen hatte, und fand die Auftreibung des Unterleibs sehr vermindert und später gänzlich verschwunden, alle Funktionen normal und kein weiteres Arzneimittel nötig.

10. Eine unverheiratete Dame, 45 Jahre alt, nahm meine Dienste in Anspruch. - Als ich sie besuchte, fand ich, daß sie erste einige Stunden krank war und einige Tropfen Campher genommen hatte. Ich fand sie im Bette höchst unruhig, wirft sich immer herum, Extremitäten und Nase kalt, Gesicht bläulich, sehr frostig, Brennen im Magen, alle 15 Minuten wässerige und stinkende Stühle, Puls klein und häufig (140 in der Minute), Kreuz schmerzt wie zerbrochen, starker Durst auf kaltes Wasser, Zunge trocken und rot, sie fühlt sich äußerst schwach.

Sie erhielt **eine** Gabe Arsenicum 800. In 15 Minuten wurde der Puls voller und wurde nach 4 Stunden voll und hart (120 in der Minute), Unruhe und Kreuzschmerz nehmen 4 Stunden lang zu, aber die wässerigen Ausleerungen und Leibschmerzen ließen nach, später brach Schweiss aus, in 12 Stunden beklagte sie sich nur noch über Schwäche und wurde ohne weitere Arznei gesund.

11. Ein Mann, 33 Jahre alt, klagte über Kopfschmerz, schießend, linksseitig, von der Stirn nach innen zu, der Schmerz fängt morgens 8 Uhr an, nimmt dann allmählich zu bis 10 Uhr, dauert dann sehr schlimm fort bis 12 Uhr mittags, nimmt dann ab und verschwindet um 4 Uhr nachmittags, hinterläßt dann einen Unterschworenheitsschmerz über dem linken Auge. Er hatte denselben Schmerz vor einem Jahre (im Juni) gehabt, und jetzt seit einer Woche täglich. Er erhielt Sulphuricum acidum 400., eine Gabe. Den darauf folgenden Tag hatte er das Kopfweh sehr heftig, dann aber verließ es ihn.

NB. Warum Sulphuricum acidum? Unter dem Mittel findet sich doch kein dem ganz entsprechender Schmerz? Dieser Fall ist ganz dazu geeignet, einige Bemerkungen über Mittelwahl zu machen. Die Schmerzensart an dem Ort ist wohl schwerlich unter irgend einem der bekannten Mittel zu finden. Es gehört also etwas mehr Mittelkenntnis dazu, um richtig wählen zu können, als ein gewöhnliches Symptomenaufsuchen verlangt. - Das Mittel war nach Ähnlichkeit gewählt - und zwar nach Bedingung und Ort - Zeit und Seite.

Von Schwefelsäure war es schon lange bekannt, daß ihre Wirkung sich mehr auf die linke Seite erstreckt. - Ferner ist die Vormittagsverschlimmerung eben so charakteristisch für Schwefelsäure.

12. Ein starker Mann, 30 Jahre alt, hatte vor 3 Wochen eine Art Ruhr gehabt, welche sehr schnell nach sehr bitteren Pillen, die er von einem Allöopathen erhalten hatte, wich - gleich darauf hartnäckige Verstopfung und teilweise Lähmung der rechten Hand. Die rechte Hand fühlt wie eingeschlafen, an der Außenseite. Die Hand schwitzt immer, der Arm aber bis in die Achselgrube ist kalt. Die Finger sind halb gebogen, wie eine halbgeschlossene Hand, er kann die Hand weder schließen, noch die Finger gerade machen, ohne mit der gesunden linken Hand zu helfen - nur den Daumen kann er sehr wenig, die andern Finger gar nicht bewegen. - Häufige Schwindelanfälle, plötzliche, wie zum Umfallen, am schlimmsten in der Mitte des Tages.

Er erhielt 1 Gabe Causticum 200. Darauf wurde der Stuhlgang ganz regelmäßig, Schwindel besser und in 2 Wochen war der Arm warm und die Hand ganz gesund, so daß er seine gewohnte Arbeit (Schuhmachen) fortsetzen konnte. Vide: Chronische Krankheiten 1096 und 1099 - ferner 1031.

13. Mrs..., 35 Jahre alt, hat schon seit einem Monat eine Augenentzündung. Das **linke** Auge wässert stets, Lichtscheu. - Das Weiße ist blutrot. - Stechende Schmerzen im Auge und der linken Schläfe. Die Schmerzen beschreibt sie als ganz fürchterlich, schlimmer nachts, sie hat schon seit 2 Wochen gar nicht mehr schlafen können, obgleich sie alle nur erdenkliche schmerzstillende Mittel angewendet hatte.

Sie erhielt eine Gabe Spigelia 200. Die Besserung fing erst den 3. Tag an, dann wurde es täglich besser, bis nach 3 Wochen, als ich sie das letzte Mal sah, auch alle Spur von Krankheit verschwunden war.

14. Ein Mann, 60 Jahre alt, schwächlich und schlecht genährt, Schneider, wurde um Mitternacht von Cholera befallen. Durchfälle, Erbrechen und Krämpfe sehr schlimm, er brauchte erst Hausmittel, heißen Tee, Kaffee, usw.; als er schon völlig kraftlos war, schickte er erst zu einem Geistlichen, der ihm Veratrum gab - ferner wurde ich gerufen und fand folgendes Krankheitsbild:

Der Kranke liegt fast sprachlos da, Puls klein und schnell, Haut kalt - eisig - Hände und Gesicht bläulich, Nase ganz spitz. Stuhl wässrig und schießt von ihm - Krämpfe im Unterleib und Beinen, heftiges Erbrechen, fürchterlichen Durst, Harnverhaltung.

Er erhielt morgens 7 Uhr Jatropha curcas 30., eine Gabe.

Darauf ließen die Krämpfe nach und er hatte keine Stuhlentleerung mehr - statt der Krämpfe klagte er über brennenden Schmerz im Magen. - Um 9 Uhr erhielt er Arsenicum 200. - Brechen hielt an. - Er wurde sehr durstig. - Eispillen linderten den Durst etwas, doch nicht hinlänglich, er trank dann viel Wasser auf einmal, dann musste er gewaltsam brechen, lag dann 10 Minuten sehr erschöpft, stöhnend und winselnd ganz ruhig, dieser Zustand hielt den ganzen Tag an. Er erhielt Arsenicum in verschiedenen Potenzen, Ipecacuanha, Nux vomica, aber keine Veränderung des Zustandes. Abends 10 Uhr erhielt er **eine** Gabe Phosphor 2000., sofort hörte das Erbrechen auf, er schlief etwas, den nächste Morgen klagte er über große Schwäche, hatte Harnabgang gehabt, Kopfweg, als ob der Kopf zerspringen sollte, später aber Stiche im Kopf. Er erhielt in einer Woche noch 2 Gaben Phosphor 2000. und war dann ganz gesund.

Obgleich ich nie gerne Heilungsgeschichten mitteile, in denen mehr wie **eine** Gabe **eines** Mittels zur Heilung nötig waren, so ist dieser Fall so einzig in seiner Art und bestimmt das für Phosphor so charakteristische Erbrechen so genau, daß ich diesmal nicht umhin konnte, ihn zu veröffentlichen. Das Arsenik-Erbrechen ist gleich nach dem Trinken, und hier fehlte auch die Unruhe - und Phosphor-Erbrechen, nachdem das kalte Getränk im Magen warm geworden."

(Adolph Lippe, M.D., Hochpotenzen, Allgemeine homöopathische Zeitung Bd. 41 (1851), S. 209-213, 225-228; Bd. 43 (1852), S. 70-72, 81-84)

1862 - Arum triphyllum in Scarlet Fever

"The few symptoms published in the thirteenth volume of *The Archiv* of Arum maculatum are very similar to those of Arum triphyllum. This very valuable medicine was first introduced as a remedy in scarlet fever by Dr. C. Hering, and the attention of the profession was first called to it in number nine of *The Homoeopathic News*. Since then many cases of malignant scarlet fever have been successfully treated by this new remedy, and some indications for the administration of this medicine can now be given.

I shall first relate one of the most malignant cases in which *Arum triphyllum* was administered with marked benefit. The case is taken from my Journal, Vol. I, pp. 24.

The patient was a boy six years of age, who had always been under my care and who had enjoyed general good health. His older brother had scarlet fever and was attacked on the 14th February, 1861. I saw him in the morning, he complained of headache and had vomited some food and mucus; he declined to rise in the morning, pulse 120 full and hard, gave one dose of *Belladonna*²⁰⁰; at two, p. m., he continued to vomit, had much thirst for cold water, face very pale, coma, *Tart. emet.*²⁰⁰. At seven, p. m., I found him much worse, the face very much paler, continued coma, when aroused he complained of much headache; every ten or fifteen minutes a watery, very offensive involuntary stool, pulse over two hundred a minute, *Sulph.*²⁰⁰, six pellets dissolved in half a tumbler full of water, and every two hours one tea-spoonful to be given. At one, a. m., he became very restless and the eruption began to appear all over his body.

In the morning at seven, of the 15th of February, he was fully covered by the scarlet fever eruption, the diarrhoea had ceased, the headache was almost gone, he had slept and the pulse was now one hundred and twenty. Medicine was discontinued.

On the 16th he did well.

On the 17th his nose was much stuffed up, the corners of the mouth became sore, no evacuations, he had slept poorly because he could not breathe well except with his mouth open, *Lycopodium*²⁰⁰.

On the 18th he had had a bad night, very delirious, the nose discharged a good deal of thin watery ichorous fluid, nose sore, lips very sore, cracked and bleeding as well as the corners of the mouth, the mouth felt so sore inside that he was unwilling to drink, tongue red, papillae swollen and standing up, between the abdomen and the legs sore moist places, the same on the os coccygis, the submaxillary glands swollen, pulse one hundred and forty hard and full; voice hoarse. *Arum triphyllum*, six pellets of the sixth dissolved in half a tumbler full of water, and every two hours one tea-spoonful to be given.

On the 19th, slightly better, gave *Arum trif.*³⁰, which I had freshly prepared in water as before. On the 20th, still better, medicine continued every four hours.

On the 21st, a still more decided improvement, had passed a great deal of very pale urine, and hawked up a good deal of mucus. He continued to improve without further medicine up to the 13th of March, when he was seized with violent coryza, nose much stuffed up; *Nit. ac.*²⁰⁰.

One dose relieved him until he again complained on the 20th of March, at night, of a hoarse, dry, croupy cough and great hoarseness which yielded to one dose of *Hepar*²⁰⁰.

On the 2nd of April, he again became hoarse, worse in the morning, and hard of hearing.

One dose of *Causticum* fully relieved him and he remained well.

The similarity of *Nitricum acidum* and *Arum triphyllum* in the second stage of scarlet fever are very great. The coryza of *Nit. ac.* is more prominent, both have the stoppage of the nose but *Nit. ac.* has not the red tongue.

The most indicative symptoms for *Arum* are the great sore feeling of the mouth, the redness of the tongue, the elevated papillae, the cracked corners of the mouth and lips, and stoppage of the nose without coryza. Urine very abundant and pale, the submaxillary glands swollen.

The eruption all over the body with much itching and restlessness. *Arum* very often causes a great hoarseness and while other symptoms will improve, the hoarseness will become much worse if the medicine is continued too long."

(*Arum triphyllum* in Scarlet Fever, by Adolph Lippe, M. D., Philadelphia, The American Homoeopathic Review vol. 3 (1862-1863), p. 28-30)

1863 - Clinical Observations

"Mrs. C., aged 35 years, mother of four children, the youngest four years of age, had been suffering for more than three years before coming under my care, in May, 1862. Mrs. C. is emaciated and of nervous temperament. For more than three years she had not menstruated; she had frequent attacks of violent colic almost always at night, between two and four o'clock, a. m., those attacks came on at irregular intervals from three to ten days and were followed at times by vomiting of food or mucus, and, if this vomiting did not take place, by a severe headache the next morning. The day after such an attack she would feel very weak in body and mind, unable to fix her attention on any subject, and loosing herself in the street because she could not know where she was; when she thus spoke she could not find the right words. The pulse was small and feeble. Mrs. C. had had all sorts of treatment, she had found some palliatives at times, but the disease returned more violent when the palliatives ceased to relieve.

She took, on the 25th day of May, one dose of Kali carb.²⁰⁰ (Lehrmann). The first night after taking the medicine she had a severe attack lasting one hour, but she did not suffer so much during the day, the following night she had another attack, less violent than the first night and another still lighter came on the following night; all at the same hour, three o'clock, a. m. The repetition of attacks in this manner had never taken place before. The patient improved afterwards, had for some weeks considerable pain in the small of the back, menstruation returned and she has been remained well since.

In the month of April, 1860, the following case came under my care. Mrs. M., married six months and in the fifth month of pregnancy, has been sick for three days with headache, pain in the limbs and fever. I visited her on the third day; she had taken no medicine, complained of great weakness, severe pains in her head, in all her limbs, but mostly in her back; much worse when moving, no sleep, bitter taste, much nausea, tongue yellow and becoming very dry, moderate thirst, face red, skin hot and dry, pulse 120 beats a minute, full and hard, constipation, discharge of urine scanty and dark. Several members of the family had died during the last few years of typhus fever under allopathic treatment. I gave the patient several doses of Bry.²⁰⁰ and found her easier the next day, I omitted the medicine. The following day, the fifth day of the disease, she was much worse, she had vomited frequently during the night, mostly bilious matter; the headache had been much worse, she was now unconscious, delirious, talked incessantly, she passed urine involuntarily, picked the bed clothes, tongue dry and black, face very dark red, eyes wide open, glassy, pupils dilated, when she drank a loud gurgling noise in her throat to the stomach. I gave her Cuprum met.²⁰⁰ (Jenichen) six pellets dissolved in half a tumbler full of water, every two hours one tablespoonful to be given till an improvement was apparent. After the second dose she fell asleep, slept uninterrupted for ten hours, perspired profusely, and awoke feeling well but very weak. She took no more medicine and was able to take her meals with the family on the twelfth day of her sickness. The pregnancy progressed and at the proper time she was delivered of a healthy child."

(Adolph Lippe, M.D., Philadelphia, Pa., Clinical Observations, The American Homoeopathic Review vol. 3, February 1863, p. 372-373)

1865 - Kali bichromaticum

"This valuable remedy was introduced into the practice of medicine twenty years ago; a large number of provings, both voluntary and involuntary, have been published; yet in comparison to the abundant material furnished, but a small number of cures by this remedy has been published.

And in consideration that, since 1847, when Dr. Fr. H. Arneht's very complete and elaborate treatise appeared in the "Oesterreichische Zeitschrift," and the later rendition of it in the first

volume of "The Hahnemannian Materia Medica," by Dr. John T. Drysdale, in 1852, who ostensibly incorporated Arneth's essay into his work; and also the publication of it in 1848, in the "Symptomen Codex, (Jahr's New Manual,) by Dr. C. Hempel; - but little has appeared in the journals on the therapeutical use of this medicine, I will endeavor to add my mite towards showing where Kali bichromaticum may become the true curative remedy, - a diligent study of the remedy having enabled me to make frequent and satisfactory experiments in its therapeutic application.

I will, at the end of this article, say a few words regarding its literature.

Kali bichromaticum is often the only remedy in morbilli (measles), especially if the cough, expectoration, and the other catarrhal symptoms correspond with the characteristic symptoms of this medicine.

The eruption is found, under Kali bichromaticum, vide Dr. Drysdale's essay, symptoms 315, "Solid eruption like measles."

The catarrhal symptoms are found in Dr. D.'s essay under symptoms 22 and 23, - (eyes) itching of the canthi.

After smarting, itching, and watering frequently during the day and morning, agglutination during the previous days.

(Pulsatilla has a similar symptom, but the itching of the eyes compels the patient to rub the eyes incessantly; and if this symptom prevails, Puls. will quickly relieve it.)

1. Dr. D. gives as corresponding remedies, Bell., Cop., Guaj., Merc., - Guaj. is new, - he has omitted Aconit., Pulsat., Ant. or Bry., Rhus, Sulph. etc.

The catarrhal symptoms of the nose are found in Dr. D.'s essay, symptoms 49, considerable flow of water from the nose, subsequently becoming acrid, burning the upper lip and excoriating the nostrils.

And in Dr. Arneth's essay, symptoms 260, a small quantity of acrid mucus is discharged from the nose, which causes burning in the septum; 261, nose full of thick mucus; 262, profuse discharge of thick, clear mucus from the nose; when this ceases, it is followed by pain from the occiput to the sinciput.

These symptoms show the general applicability of Kali bichromaticum in morbilli.

We will now give some of the special characteristic indications for its use in the various forms and individual cases of this disease.

We find, in Dr. Arneth's essay, symptoms 277, stiff, green-colored masses of an offensive smell are discharged from the nose.

Kali bichr. differs in this respect from Pulsatilla, which has long-continued coryza, with blowing from the nose of yellowish-green mucus, smelling bad.

The discharge of Kali bichr. is more stiff, more compact, more green and offensive than that of Pulsatilla.

In Dr. Arneth's proving (Oesterreichische Zeitschrift, vol. iii., 1847, page 300,) we find that the soreness of the nostrils under Kali bichr. consists in an ulceration, a formation of small, burning ulcers, first on the right side, later on the left side, within the nostrils.

Pulsatilla has sore, ulcerated nostrils, i. e., the edges of the nostrils are ulcerated.

The most important indication for Kali bichr. in measles, is the croupy cough accompanying this disease.

We find in Dr. Arneth's essay, symptom 641, roughness in the larynx, with hoarseness.

Symptom 642, suddenly in the evening great hoarseness and roughness of the voice.

Symptom 643, rough, hoarse voice.

Symptom 645, he is deprived of his voice.

Symptom 697, loud rattling cough for five minutes at a time, with retching and expectoration of tough mucus, so viscid that it can be drawn to the feet in strings.

Symptom 705, during sleep, wheezing and rattling in the chest, which can be heard at a distance.

Symptom 717, expectoration of thick, yellow mucus.

Pulsatilla has a similar hoarseness, but the expectoration consists of yellow, thick or greenish mucus, and the expectoration is only present during the morning or during the day.

Another great difference exists between Kali bichr. and Pulsat., not only in modifying their curative power in this disease, but in general; for Kali bichr. has an aggravation of almost all its symptoms from cold, - open cold air, - while Pulsatilla has an amelioration from the same causes.

During the prevalence of epidemic measles, I have seen frequent occurrence of cases that, as soon as the eruption developed itself, a hoarse, croupy cough set in, which much distressed the patient; the nose became sore, small ulcers formed in the nostrils, and the discharge became at once tough, thick, viscid, stiff.

The expectoration soon became stringy and tough, and detached with great difficulty; the patient was then generally much worse than in the ordinary measles.

Aconite, which corresponds with the slight, intolerable, hacking cough preventing sleep and causing great restlessness, gave no relief, nor did Bry. or Phosph. control this cough; but Kali bichr., which I always give in the 200th or a higher potency, promptly cured these cases; and the patients generally recovered fully without any other medicine.

Kali bichr. is not unfrequently the true homoeopathic remedy in croup - when the expectoration is tough, stringy, and ropy.

The indications for these characteristic symptoms are found under the morbid appearances, and also under the involuntary proving of one Emanuel, a workman in Kali Bich., and related by Dr. Drysdale.

As his symptoms will be found very instructive, they are given in full.

John Emanuel ¹, 46 years of age, of sanguine lymphatic temperament, but decrepit and wasted; soon after coming to the works, was seized with bronchitis, which continued in a chronic form for weeks.

The cough was loud, violent, and rattling; it seemed to proceed from a small spot in the upper part of the abdomen, which was painful to the touch, generally commencing immediately on awaking ² and after eating, preceding it, a sensation as if the stomach was swollen, nausea and palpitation of the heart continuing each time about five minutes, compelled to lie down and bend the body forward, accompanied with nausea and pain in the loins, so that he had to press these parts together with his hands.

The expectoration consisted of mucus which was so viscous that the strings were drawn down to the feet.

After the attack, he had pain in the forehead and giddiness, which almost made him stumble. In the evening, and when lying down, he was free from cough; but during sleep, the rattling and wheezing could be heard at a distance.

At the same time, he complained of heaviness in the head, swelling in the region of the stomach, weak digestion, so that the stomach felt overloaded, from even the slightest food.

Aversion to meat, and discomfort from eating it; constipation became habitual, and, finally, emaciation and great weakness, so that he was compelled to give up work.

He completely recovered, under homoeopathic treatment, in the course of three or four weeks after leaving the factory.

The principal remedies were Nux vom. and Phosphor.

The workman Gallagher has reported a similar symptom.

Dyspnoea, especially in the morning, with cough and expectoration of a white mucus, "*as tough as pitch*," and which could be drawn out into strings.

Whenever this ropy, stringy condition of the mucus prevails, Kali bichr. will be often the only curative remedy.³

While the presence of these symptoms may often lead us to give Kali bichr. in croup, as well as in diphtheria, or in bronchitis, there are other symptoms often present which will call our attention to this medicine.

In February last, a very violent case of diphtheria, made worse by a relapse, from overheating and then running out in the cold air, in a child five years old, which had been convalescent under the action of Lachesis, was finally cured by Kali bichr.

The symptoms indicating it were found under the provings of Dr. Marenzeller, and rendered by Dr. Arneth, symptom 130, "Violent stitches in the left ear, extending into the roof of the mouth, into the corresponding side of the head, and into the same side of the neck, which was painful to the touch, and the glands swollen."

This symptom prevailed, *and had appeared last*; the swelling on the neck was larger than a goose-egg; it finally suppurated and discharged under the influence of Kali bichr., while all diphtheritic symptoms gradually improved, and the child fully recovered without any further medication.

In Ozaena, we find Kali bichr. at times the curative remedy.

In Dr. Arneth's essay, we find the following symptoms:

Symptom 261, nose full of thick mucus.

Symptom 262, profuse discharge of thick, clear mucus; if that ceases, he has pain going from the occiput to the forehead.

Symptom 263, considerable discharge of mucus without having coryza.

Symptom 278, *discharge from the nose of hard plugs, called by the workmen clinkers, elastic, like India-rubber.*

Symptom 282, the pain in the nose at the junction of the cartilage.

Symptom 277, discharge from the nose of hard, greenish-colored masses, sometimes of a disagreeable smell.

All of these symptoms are often present in ozaena; and symptom 262 is very important, as the cessation of the discharge, especially when it is sudden, often causes violent headache, which has often been relieved at once by one dose of Kali bichr. 200, and the habitual discharge restored.

A case of chronic ozaena was much improved, where the following symptom indicated Kali bichr.; this symptom promptly disappeared, and the chronic disease was also much lessened, vide Drysdale's essay, symptom 8. "Violent shooting pains from the root of the nose along the left⁴ orbital arch to the external angle of the eye exactly, with dimness of sight, like a scale before the eye: *beginning in the morning, it increases till noon, and gives way towards the evening.*"⁵

In the so-called dyspepsia, we find Kali bichr. often to be the proper medicine.

The indications for its application in this form of disease, we find in symptom 479.

After a meal, which had been enjoyed, a sensation as if digestion was impeded, and the food rested on the stomach like a heavy weight.

Kali bichr. will relieve this symptom often.

Nux vom. has something very similar; but the difference between the two remedies is, that the heavy weight and pressure on the stomach is felt under Kali bichr. at once after a meal, while under Nux vom., sometimes one to three hours elapse before it is felt.

I was first induced to give Kali bichr. for the bad effects of over-indulgence in beer and other malt liquors, as well for the acute results as also for the chronic ailments of the habitual beer-drinkers, by the following symptoms, vide Dr. Arneth's essay, symptom 447:

In the morning nausea and sensation of heaviness in the head and eyes.

Symptom 450, Nausea when walking about.

489, Nausea and *vomiting of mucus*.

480. Occasional attacks of indigestion; loss of appetite, the food presses like a heavy weight; bad humor; suffering much from flatulency; in the morning he feels confused, has nausea, and sometimes vomits a clear fluid.

A very frequent complaint of those who indulge habitually and freely in malt liquors, is a great weight in the pit of the stomach; flatulency, loss of appetite; and when they eat, the food oppresses them at once; nausea; confused feeling, especially in the morning, *and vomiting of mucus*.

When these symptoms presented themselves, Kali bichr. 200 has always cured promptly.

Other results of the over-indulgence in malt liquors, especially ale, are diseases of the liver; they also often find their remedy in Kali bichr.

In many cases where the round ulcer of the stomach could readily be diagnosticated, Kali bichr. was an important remedy, provided its symptoms otherwise corresponded with those of the patient.

Kali bichr. is applicable in secondary syphilis, vide Dr. Arneth's essay, symptom 395.

Long-continued erythematous blush of the fauces and soft palate, varying in hue from a dark to a bright red, occasionally of a copper color.

Symptom 409. On the right side of the root of the uvula, an excavated sore, half the size of a split pea, with a reddish areola, and containing a yellow tenacious matter; fauces and palate presenting an erythematous blush.

Symptom 408. Uvula and tonsils become red, swollen, and painful, and finally ulcerate; this caused a surgeon to believe it to be syphilitic.

Guided by these symptoms, I have administered Kali bichr. in the not unfrequent syphilitic ulceration of the throat, and also for that less frequent, but very dangerous ulcer which appears on the root of the uvula, and which sometimes destroys the uvula in less than three days, finally extending to the soft palate, where the destruction is rapid.

It has also cured syphilitic ulcers of the tongue; the indication for its use has been taken from Dr. Arneth's essay, symptom 335, painful ulcer on the tongue, which lasted for weeks.

Clinical observations have shown that the stringy, tough condition of the mucus is not confined to the secretions and discharges from the respiratory organs; but by analogy it has been administered in and permanently cured fluor albus when the discharge was stringy and tough.

Kali bichr. is also beneficial in some forms of dysentery, vide Dr. Arneth's essay, symptom 574.

Dysenteric attacks, with pains about the navel and bloody evacuations.

Symptoms 575. Shortly after dinner, sudden nausea, sensation of pressure in the region of the stomach; pricking, pinching pain about the liver; urging to vomit; rumbling in the lower abdomen; discharge of very offensive flatulency; violent pinching in the whole abdomen, cutting as if the abdomen was lacerated with knives in all directions; after a discharge of faeces of the usual consistency, seven to eight dysenteric discharges of brown, frothy water, with violent, painful pressing, urging and tenesmus in the anus; nausea; desire to vomit, and pain in the abdomen.

Symptom 576. For many years, towards the beginning of summer, was subject to an attack of dysentery, lasting three weeks.

Symptom 577. Frequent bloody alvine evacuations with gnawing pain in the navel region, followed by unsuccessful urgings; tongue smooth, red, becomes cracked.

Symptom 578. Urging to stool; collection of water in the mouth and nausea; burning pain in the anus and erections continuing over half an hour.

Symptom 579. Pressing in the anus, and tenesmus in the sphincter ani.

Clinical experiences have verified these symptoms; some permanent cures have been made in cases of dysentery returning periodically every year in the early part of the summer, which attacks not only yielded at once to Kali bichr., but did not return the following years.

The red, smooth, and cracked tongue in dysentery is characteristic of Kali bichr.

The ulcers for -which Kali bichr. is most curative, are large, with a dark centre and overhanging edges.

There is no well proved remedy so inaccessible to the English reading homoeopathician as Kali bichr., and it is very desirable to have a new edition of this valuable medicine, containing all the known symptoms, and the clinical observations already published; the number of which would be infinitely larger had we all the symptoms well arranged and in the reach of the practitioner.

The very elaborate work published by Dr. Arneth is by no means complete, and its use is rather difficult, the symptoms not being printed separately, but in current text, and only beginning a new line at every five or ten symptoms.

The many inaccuracies in the quotations of the authorities and the abbreviation frequently misprinted, make it often next to impossible to find the original symptom without much loss of time ; nor are his translations from the English into the German language correct: at times the sense of the symptom is entirely changed, as, for instance, in the case of the workman, James Slater, he translates from the British Journal, vol. iii., page cxci, symptoms 90, "Tongue smooth, red, and cracked, with dysentery" thus, "Zunge weich" (soft) (should be glatt.)

The anomaly of a soft, red, cracked tongue is so great that the attentive reader will at once compare the original proving and find the error.

In the English language we have two records of Kali bichr.; the first is the Essay by Dr. Drysdale, in the Hahnemannian Materia Medica, vol. i.; and the second in Dr. Hempel's Symptomen Codex, (Jahr's Manual,) vol. i.

Dr. Drysdale, who incorporated in his work the former publication on Kali bichr., in vol. iii. of the British Journal, says, in note 1, page 4,

" In selecting the groups of symptoms which compose the following schema, I have subjected the narratives of the experimenters to what may appear somewhat rigid criticism; and in the fear of incorporating any useless or doubtful symptoms, may have left out many that really belong to the drug, and which may turn out to be valuable.

But I hold that it is better to reject many real symptoms than admit one false one, as one false symptom tends to vitiate the whole, by destroying our confidence in the rest.

In most cases, I have not admitted any marked phenomena on the evidence of one experimenter, but only adopted such symptoms as agree in several.

"I have also omitted the greater part of the experiments of some persons, in consequence of insufficient information as to the constitution or habits of the prover, or from direct evidence of their doubtful character.

Thus, the most formidable group of symptoms, including total blindness for a short time, is given by one experimenter; but as we have no information as to his constitution, and are told he had a headache before beginning to take the medicine, we cannot adopt his results till they are confirmed, as, for all I know, he may be subject to sick-headaches preceded by loss of sight, as in this case.

The proving of Dr. Wachtel I have also taken the liberty to omit entirely.

This gentleman took one dose of the twelfth dilution only; sixteen days thereafter, he had a tickling cough and spat up during the day, on the whole, about half a pound of bright-red blood; next day, he discovered a small fissure in the posterior wall of the pharynx, from which the blood had exuded.

"Further evidence is certainly required to establish any connection between these phenomena and the dose of Kali bichr.

I have also omitted some of the symptoms of the excellent and indefatigable Professor Zlatarovich; as, on, comparing them (especially those connected with haemorrhoids, the flickering before the eye, and the hemicrania) with his own symptoms, while under the influence of other and very dissimilar medicines, they were very much the same.

It is certainly very much to be desired that each experimenter should hand in at the same time with his narrative, a critical analysis of it, pointing out or expunging those symptoms which, from knowledge of himself, he considers may be doubtful.

Till that is done, we cannot attain to accuracy; for it is impossible for anyone afterwards, at a distance of time and space, to subject the narrative to a sifting cross-examination, such as might be practicable on the spot; all that can be done, is to omit in each what is not confirmed by the narrative of some other experimenter."

The somewhat rigid criticism, as Dr. Drysdale calls it, or, as it really appears, this arbitrary manner in which he has sifted the rich material before him, does by no means excuse the great injury and injustice done to the public in general, the suffering patient, and the enquiring physician in particular, and also to the self-sacrificing investigator and prover.

Dr. Drysdale holds that it is better to reject many real symptoms than admit one false one.

This assertion is erroneous from beginning to end.

Is it not generally admitted to be better that nine guilty criminals should escape before risking the condemnation of one innocent person?

We have no right to reject one solitary symptom without most excellent reasons; and that good reason can only exist when no cure has followed the administration of the remedy corresponding to the symptom or group of symptoms, not only once, but repeatedly, then may we reject that symptom or group of symptoms, and express a distrust as to the reliability of the "experimenter" - Fickel.

By omitting one or more symptoms, we risk more than by admitting them; and we may positively prevent a cure.

As, for instance, the symptom quoted above: "Violent stitches in the left ear, extending into the roof of the mouth, into the corresponding side of the head and the same side of the neck, which was painful to the touch and the glands swollen," enabled me (being so fortunate as to find it in Dr. Arneth's essay) to cure a desperate case of diphtheria.

The reliability of this symptom, observed by one prover only, (Dr. Marenzeller) and *arbitrarily* set aside by Dr. Drysdale, was again proved in another case.

In March last, I visited a young lady, thirteen years of age; she complained of a very sore throat, pain much increased by swallowing; the throat full of tough mucus, which she could neither swallow nor hawk up; she could not put her tongue out without much increasing the pains; had pain in the left side of the head; shooting pain in the left ear; the left side of the neck very painful to the touch and much swollen.

The tonsils, especially the left one, much swollen and inflamed.

One dose of Kali bichr. 200 (Lehrmann) cured her entirely in thirty-six hours.

Since then she has enjoyed better health than ever before, so she and her parents stated to-day, (July 4th.)

She has taken no medicine since; needing none.

Dr. Wachtel's proving has been omitted, because Dr. Drysdale deems it highly improbable that one dose of the twelfth potency would cause any, and certainly not such, symptoms as Dr. Wachtel reports sixteen days thereafter.

The symptoms reported by Dr. Wachtel are nevertheless correct, and I have confirmation, at least, of those observed by him on the 25th and 28th of June.

The latter being of much importance, has induced me to give Kali bichr. often, and with good results, when a discharge of acrid fluid took place through the posterior nares.

Professor Zlatarovich has also had the misfortune to have some of his symptoms rejected, because other remedies produced on him, while proving them, similar symptoms.

Had they been the same symptoms, there might be an excuse for omitting them; but they being similar, the omission is an arbitrary proceeding.

Our space is too limited at present to say more on this subject, but we shall do so before long.

To give the reader an idea of the *recklessness* with which this valuable drug (Kali bichr.) has been treated, and of the mischief thus produced, I will add here the ear-symptoms on record, and what Drs. Drysdale and Hempel have given under that organ.

Dr. Arneth gives, under "Ear," page 448, the following symptoms, to which I have added the last four symptoms, and the number under which they can be found in connection with other organs, and overlooked by him:

Light drawing behind the right ear.

Light superficial pain in the right side of the face, especially in the cheek-bone and towards the ear.

The same pain slightly in the left side of the face.

Slight drawing pain, now here and there, on the neck, beginning on the lower jaw and the os hyoides, later on the os ethmoidalis, extending behind the ear; of short duration,

5. Passing painful stitch in the right ear.

From time to time pressing headache, with stitches in the left ear and in the left parotid gland. Single, quick passing but violent stitch in the left ear.

Stitches in the ear.

Violent stitches in the left ear, extending into the velum, into the same side of the head and neck, which was painful to the touch, and on which the glands were swollen.

10. He awoke by itching of the lobe of the right ear.

The right ear seemed closed; slight burning of the exterior ear.

Tearing in the exterior ear.

The external meatus, especially on the left side, is slightly sensitive, and feels closed.

Dryness and burning in the right nostril, and from there a tensive drawing pain extends to the right meatus.

15. Slow, seemingly drawing stitch through the external meatus of the right ear.

At the entrance of the external meatus of the left ear, appears a swelling of a slightly inflammatory character; it was more irritating than painful, and disappeared again in four days. While walking twice, a dull pain through the external meatus, extending into the internal right ear.

Slight stitches in the internal right ear.

Humming in the ear.

20. Slight headache, which develops itself generally in the forehead, and which is accompanied sometimes with humming and pain in the ear.

Flapping and singing in the ears.

Headache, accompanied by slight pressing pains in the eyes and violent tearing in both ears. 50.

Stitches, which extend to the ear from the right side of the head. 39.

Dull, drawing, tearing toothache on the left side, with very painful stitches in the upper and lower jaw, extending into the left ear, into the temple and neck. 310.

25. Pressing, stinging pain in the throat when swallowing and talking, extending into the ear. 398.

Here are *twenty-five* ear-symptoms.

Dr. Drysdale gives us two, viz.: -

Singing in the ear, which continued for three days incessantly.

A swelling of slightly inflammatory character in the external meatus of the left ear, which disappeared in four days without much pain.

Dr. Hempel gives two (other) symptoms : -

Awakened by itching of the lobe of the right ear.

Flapping and singing in the ear.

Further comments on the merits of the English rendition of this valuable drug are not necessary."

¹ These symptoms are a retranslation from the German, by Dr. Arneth.

² Similar to Lachesis, both have also " headache when waking."

³ In whooping-cough, when the mucus is abundant, threatening suffocation, white and stringy, *Coccus cacti* is indicated.

⁴ Left must be a clinical observation of Dr. D., and is confirmed by the above case.

⁵ In this case I had my attention called to *Kali bichr.* first by the periodicity of the daily recurring paroxysms of pain always increasing from morning till 12 M. All the other symptoms also corresponding with *Kali bichr.* The patient, a lady of 46 years of age, received one dose of *Kali bichr.* 200, and was soon relieved of the paroxysms; the discharge from the nose was also much diminished.

(Adolph Lippe, M. D., *Kali bichromaticum*, *The Hahnemannian Monthly* vol. 1 (1865-1866), p. .21-34)

1865 - The Materia Medica

“The especial branches of the *Materia Medica* are pharmacognosis, the knowledge of the natural history and physical property of drugs; pharmacology, the knowledge of the collection, preparation and preservation of medicines; pharmacodynamics, the knowledge of examining the virtues and effects of medicines; to which we particularly add, pathognomony, the science and art of discerning the characteristics of groups of symptoms.

We will not, at present, treat at length of the history of *Materia Medica*, from Hippocrates and Dioscorides down to the present day; we can learn but little by looking back at the continuous changes, giving evidence that uncertainty prevailed, that darkness was followed by darkness; we shall leave the perusal of these former changeable and irrelevant attempts at a *Materia Medica* to those who find it amusing to dwell on the dark pages of antiquity.

The Homoeopathic Materia Medica contains within itself its primary facts of fundamental principles, its laws of development and practical application, in a word, the reason of its own existence.

Hahnemann found while translating Cullen's *Materia Medica*, then one of the standard works, that *China officinalis*, Peruvian bark, was claimed to be a specific for intermittent fever. Hahnemann, who had always been a clear and reflecting observer of facts, knew that Peruvian bark did cure some cases of intermittent fever but not others; he also knew that it caused the patient who was subjected to repeated doses of this medicine only to suffer other pangs, which he had not before the treatment, without curing the original disease; he had noticed the symptoms of cases in which Peruvian bark had cured intermittent fever. He then first reflected on the mode which would bring light into this darkness of uncertainties, and resolved to solve the plain question, "What determines a *Cinchona* fever?" He then himself took a few drops of the pure alcoholic tincture of Peruvian bark while in a perfect state of health, and behold, he experienced symptoms very similar to those he had had years ago, when suffering from intermittent fever, commonly called ague. These symptoms he noted down, and on comparing them with such cases as he had cured before by *Cinchona*, he discovered a great similarity. The *Cinchona* proving was the first Hahnemann made on himself, and the results of this proving led him to draw deductions which he would never have arrived at without this experiment. He did not experience, nor did *Cinchona* cause intermittent fever, but it caused symptoms only resembling this form of disease, and from this observation he drew the only possible and correct conclusion, that, if medicines when taken in a state of health, were able to create symptoms similar to a form of disease which they were also known to cure at times, these symptoms so produced on the well, and the results of a voluntary proving, would in future indicate the condition under which this medicine might be administered for the cure of the disease presenting the same symptoms, with a certainty never known before.

Here Hahnemann obtained the knowledge of the dynamic actions of the various medicines, by which he was enabled to establish the only law of cure, and this accumulated knowledge enabled him to give to the world a reliable and truthful *Materia Medica*. This knowledge was obtained by collecting the symptoms which had occurred from involuntary provings, poisonings, and by voluntary provings; at first, proving the crude drugs in comparatively small doses on the healthy, and by further collecting the symptoms cured, so verifying the first provings; he further collected the new symptoms which appeared, and which were not present before administering a medicine, as also the symptoms which disappeared simultaneously under the curative action of medicine and not known to have been produced by it while proving it on the healthy; of this latter class, but few were incorporated in the *Materia Medica*, and only after repeated experiments had verified their reliability. During the progressive provings, it was discovered that some substances, as *Carbo vegetabilis*, *Natrum muriaticum*, *Lycopodium* and *Silicea* developed but few, if any, symptoms when proved in the crude state. It was known of *Carbo vegetabilis*, that this substance, when administered for its known chemical power in destroying putrid odors, as, for instance, when applied to old putrid ulcers or putrid breath, the relief in both cases was instantaneous, and also when taken internally in larger quantities, it at once corrected the putrid smell of the dysenteric evacuations; the effect being only a chemical one, the putrid-smelling ulcers resumed the bad odor as soon as the application ceased; the putrid-smelling breath returned, when the mouth was no longer cleansed by the charcoal powder, the dysenteric evacuations were only momentarily deprived of the offensive smell; it was, therefore, no cure. Charcoal in this form, could only act chemically, and when taken internally, in the shape of crude powder, in large quantities, it can, and does not produce any alteration in the sensations; it has no curative or medicinal effect and produces no symptoms. But if Charcoal is triturated with a non-medicinal substance, as sugar of milk, and carried to the third or a higher potency, that potency will cause a change in the sensations, and the

symptoms obtained by proving these potencies now guide us in the administration of this valuable remedy. The provings of Charcoal in a potency were followed by provings of other medicines in potencies, and the symptoms so obtained were also incorporated into the *Materia Medica* by Hahnemann. More cures were made, more certainty was obtained of the correctness of all the provings, and all these observations were collected, and Hahnemann eventually gave us six volumes of his *Materia Medica Pura* and five volumes of his *Chronic Diseases*. Subsequent provings by the followers of Hahnemann were published and verified in separate smaller works and in the medical journals of the day; they were collected and published by Jahr and by Noack and Trinks; later they were given in translation to the English reading Homoeopathician in *Jahr's Manual or Symptomen Codex*, by Dr. Hempel, which might be a very valuable work, were it not that this translation is entirely unreliable, full of inaccuracies, omissions and mistranslations. Later, we had our *Materia Medica* augmented by a volume of *American Provings*, by Dr. C. Hering, and this work is preeminent on account of its thoroughness; it is the most elaborate work of its kind, and it is only much to be regretted that it has not yet been translated into the English language, the only remedy Aloes is now given to us in the REVIEW. During the past few months, we have received new provings by Dr. Hale. He publishes in one volume forty-four remedies. This work also while enlarging our knowledge of *Materia Medica*, is an indispensable work to the practitioner; it still retains the originalities of the Eclectic School who have introduced most of the new remedies into the practice of medicine.

The first impression of the uninitiated, who first takes in hand our voluminous works on *Materia Medica*, is to perceive no difference between the recorded provings of the many medicines. He thinks on glancing over the pages of the *Materia Medica*, that every medicine has caused some giddiness, some headache, some fever, some cough; all and every one of them. He remains unavoidably puzzled on the subject, until he begins to compare the records more closely and accurately, he then sees clearly the differences that exist between the various medicines and the manner in which they are similar and differ. He will first try to ascertain what kind of pain a remedy generally produces, and on what part of the body, on what organ or part of an organ it is most apt to act. He will find under what conditions the changed sensations in the organism are produced, and these conditions he will subdivide first as to the time, at what time of the day, month, or year, periodically and so forth; under what change of position at rest or in motion, by what kind of food or drink, and by what mental emotions the condition is either aggravated or ameliorated, and lastly in what connection the various changes appear, and their accompanying symptoms. In this manner the progressive student will obtain the characteristic symptoms of each medicine; he will find by so studying each medicine, that various medicines have in some respects great similarities, but that in other respects they differ, in various ways, much from each other; he then makes comparisons as to similarities and differences, and he so finds out their relationship. By comparisons alone, can we obtain a proper and lasting knowledge of each single medicine. We compare first single symptoms with similar symptoms of other medicines, and so we proceed, until later we compare medicines belonging to the same natural class or family or groups of medicines which by their similarity of action form a relationship with other similar classes or groups of medicines.

When I say that I will give you the characteristic symptoms of each medicine, the first question arises; what is characteristic? Characteristics consist in such symptoms, altered sensations and effects of medicines on the human organism, by which we discern our medicine from all other medicines, and while this may be ascertained by comparisons made between the various medicines, the proof of the correctness of this discernment is obtained by the experiment; that is to say, that when, in the most varied diseases, the presence of one or more of this or these characteristic symptoms lead to the choice of a remedy, a cure follows; and that in similar diseases without the presence of this or these characteristic symptoms no cure follows the

application of the same remedy. For the sake of facilitating the finding and remembering the characteristic symptoms, we divide them systematically in four different kinds, each of which kind may, in a given case, characterize the medicine.

We have at first, the kind of pain or altered sensation, as, for instance, the soreness or sensation as from a bruise, under Arnica, which has few other kinds of altered sensations, or the burning-stinging pain under Apis. Many medicines have burning pain, as Arsenic, Carbo veg., Phos., and many others have stinging, pricking pains, but few have burning-stinging so characteristic as Apis, and there is only Bell, and Ignatia which have in that respect a similarity to Apis. The sensation as if the parts were made of wood, under Nitrum.

We have secondly, the locality, as under Lachesis the left ovary, and under Apis the right; under Clematis erecta, the right testicle, and under Rhododendron the left testicle; we have the sides of the body, and find collectively, the left side more affected by the electro-negative remedies, while the electro-positive medicines, affect the right side more; again, have we the direction in which the pains and altered sensations attack the organism; we know, for instance, that when the rheumatic pains first attack the feet and extend upwards it is characteristic of Ledum, but that if similar pains begin on the upper part of the body and extend downwards, then it is characteristic of Rhododendron. In angina, we know that if the left side of the throat is first attacked, and the inflammation or ulceration extends to the right side, it is characteristic of Lachesis, but if the affection begins on the right side and later extends to the left side, then it is characteristic of Lycopodium.

Thirdly, we have the conditions, and they form by far the most important characteristic symptoms. The time of the day when the diseased condition is aggravated or ameliorated comes first to be considered. Some medicines are known to possess this condition in an eminent degree; as for instance, Nux vom. and Sulphuric acid in the morning, Natrum mur. at ten, a. m., Argent, at noon, Lycopod. at four, p. m., Puls, at sunset, Phos. before midnight, Ars. after midnight, Kali carb. at three, a. m., etc. The position of the body, rest or motion, standing or sitting, or rising from a seat, are very important conditions. We find an aggravation from rest, under Rhus, and aggravation by motion under Bryonia, although these two medicines are very similar in other respects. Standing aggravates under Sulphur, sitting aggravates under Lycopodium and ameliorates under Colchicum, while rising from a seat is aggravated under Rhus and Lycopodium, but the condition is ameliorated *after* rising from a seat and when beginning to move, by the same two medicines. Aggravation after sleep is under Lachesis and Lachesis will never be indicated if the reverse is present; amelioration after sleep is under Phos. Under the conditions also belong the effects of the various articles of food and drink. The aggravations from coffee, tobacco and spirituous drinks we find under Nux vom. Bad effects, especially headache, from small quantities of wine, are under Zinc, the bad effects from continuous over-indulgence in beer, are under Kali bichrom., the aggravations from lemonade under Selenium, of the ill effects caused upon a diseased condition by oysters, under Lycopodium, of bad results from pastry and pork under Pulsatilla. The amelioration from eating fruit we find under Lachesis, or from drinking tea under Ferrum.

Fourthly and lastly, we have the concomitant symptoms which although yet few, form strong characteristic indications. For instance, toothache with a swollen face, we find under Chamomilla and Mercurius, and while the swollen face under Chamomilla is red and hot, that under Mercurius is hard and pale. Toothache with paleness of the face we find under Pulsatilla. Fever with thirstlessness under Pulsatilla and Sabadilla, or with much unquenchable thirst, under Natrum mur.

The knowledge of the characteristic symptoms of medicines is indispensable if we wish to be successful in the practice of Homoeopathy, because it is one of our fundamental practical rules, that the characteristic symptoms of the only truly curative remedy must correspond with

the characteristic symptoms of the patient. This, as one of the most important rules of our school, enters also largely into the study of the *Materia Medica*, and for this reason we must deprecate the arrangement of medicines according to groups of pathological conditions sought after and supposed to exist in groups of symptoms recorded in the provings. Before we seek the characteristic symptoms of the remedy, we must possess the characteristic symptoms of the patient, or what is falsely termed the disease. The truly characteristic symptoms of the patient exist exclusively outside of the pathological groups of symptoms of the discerned disease; nay more, they are symptoms which never necessarily belong to the disease or any form of it, but which appear absolutely accidental. The symptoms present and necessarily constituting and belonging to the disease, we may term essential symptoms; characteristic, we term those symptoms which are found on the diseased individual besides the essential symptoms, either on account of his constitution or from other accidental and unaccountable causes. If it is so, and if the experiment has established this rule to be correct, we would gain nothing by classifying the provings of our medicines in such a manner as to press them into pathological livery. If then the extraordinary and apparently accidental, often seemingly trifling symptoms of the patient, guide us in the selection of the sole truly curative remedy and constitute the characteristic symptoms, no preconceived notion based on the pathological classification of remedies can be of the least assistance to us in our efforts to cure, and all such garbling attempts must be rejected.

The thorough knowledge of the *Materia Medica*, so essentially necessary for success in practice and in curing the sick, can only be obtained by diligent study, but we may in a great degree facilitate this study by proving medicines ourselves. During a proving, we are compelled first to observe our own sensations and our alterations of them and to arrange them according to some system, thereby cultivating our faculties of observation and of systematizing these observations. Each symptom which we record as having occurred as the effect of a new medicine, will necessarily call back to our memory a similar or opposite symptom known to us as belonging to some previously proved medicine. By making these comparisons, our memory receives the new symptoms of the new medicine as having a relationship with other medicines. By provings, we learn how necessary it is to observe what are generally termed trifles, for even by these apparently small differences do we know one medicine from another or discern one symptom of one medicine from a similar symptom of another medicine, and these accurate observations of what were formerly considered and termed insignificant and unimportant symptoms, constitute the great difference between a skillful, and therefore a successful physician, and a routine practitioner.

As illustrating this proposition we will take a patient who complains of diarrhoea. The Allopathist is satisfied that the disease is diarrhoea, that it should be checked, and at his first prescription he orders his usual panacea, Opium, in some form or other. We seek to know more than the meagre knowledge that the patient has a diarrhoea, we examine him as Hahnemann has taught us and as it behooves every true Homoeopathician; we elicit at our first question, as to when his diarrhoea began, that he was first attacked in the morning, or had for some days always been worse in the morning. We know one condition, that of time, and know that Bryonia, Sulphur, Podophyllum and Thuja, besides other medicines, pre-eminently produce and cure morning diarrhoea. We know that Bryonia has morning diarrhoea which takes place as soon as the person has risen from the bed and begins to move about; we know that the Podophyllum evacuations are generally green, that the diarrhoea characteristic of Sulphur drives the patient out of bed; the call is imperative; and let me here remark, that we owe this knowledge verified by many cures to one single symptom of one prover: this symptom is on record in Hahnemann's *Chronic Diseases*, and we find it observed by Frederick Hahnemann, the son, under No. 868, where it reads, "the stool is discharged suddenly and almost involuntarily, he cannot rise from his bed sufficiently fast." So much for one single, well-observed

and recorded symptom. The Thuja morning diarrhoea comes on after breakfast, and this symptom, although it is not often met with, we owe to Dr. Wolf who gives it in his high potency proving, of Thuja under No. 483; thus, "Diarrhoea every day after breakfast;" this observation has also been verified by experience. We now continue the examination of the patient, and he tells us that he had to rise quickly and then had a painless, watery, yellow diarrhoea, which continued during the forenoon and was better in the afternoon. We need not choose long, but administer at once one dose of Sulphur, for not only the time and condition are characteristics of the remedy, but also the quality of the discharges, and if we continue our examination of the patient, we will undoubtedly obtain further symptoms all indicating Sulphur.

It is not only advisable, but absolutely necessary, that the provings of medicines should be made by ourselves on ourselves. The observations on others, although indispensable to a perfect knowledge of the effects of medicines which we seek to obtain, may leave us continually in the fear of not exactly expressing in a proper manner what has been felt; we must therefore continually remain in doubt, or at least partly so, as to whether the proving is a deception or not. This obstacle to a knowledge of the truth, which cannot be entirely obviated when in search after the morbid symptoms excited on another person by the action of the remedy, does not exist when the trial is made on our own person. The individual who undergoes the experiment knows precisely what he feels, and every fresh attempt that he makes is an additional motive for him to extend his researches still further by directing them towards other remedies. It renders him more expert in pursuing further trials, while at the same time his zeal is redoubled, because he thereby acquires a true knowledge of the resources of the art which can be considered ably increased.

The proving of medicines, first on yourselves then on others, will further give you such an insight into the *Materia Medica* as you could not obtain in any other manner. With every new step you take, you will learn to appreciate and admire the great works of the masters who have presented you with complete, well-arranged provings, and by following their example you will become masters yourselves, not only in the art of proving, but in obtaining a mastery over the master-provings, which you desire, to become enabled to apply for practical purposes."

(Adolph Lippe, M.D., Philadelphia, Pa., *The Materia Medica*, *The American Homoeopathic Review* vol. 5 (1865), p. 433-443. Extract from Dr. Lippe's Introductory lecture on the *Materia Medica*, delivered before the Homoeopathic Medical College of Pennsylvania, Oct. 11th, 1864.)

1866 - Clinical Observations

"Mrs. P. thirty-six years of age in robust health, took cold and from it a catarrh - took herself Aconite, Nux v., Merc. v., and had snuffed up some medicated snuff; the nose remaining stuffed up, had inhaled through the nose hot steam, but grew worse; I saw her on the fifth day after she had been taken sick, and found the following symptoms:

Severe pains in forehead and over the nose with much pressing down, the nose is entirely stuffed up, so that she cannot breathe through the nose; great desire to blow the nose, and while there is much mucous rale above, the nose cannot be blown; the nose is very dry, especially at night; loss of smell and taste; pulse 120, full and hard, from five P. M. all the symptoms become worse; she cannot lie down because she has a sensation of suffocation as soon as she is in a recumbent position; unsuccessful desire to sneeze from a titillation in the upper nares; if she falls into a dose while sitting up at night, she awakes with a sensation of suffocation.

Kali bichr. and Lachesis had been administered without producing any good result. Sticta pulmona. 30, six pellets were now dissolved in half a tumbler full of water, and she took every two hours one teaspoonful during the ninth day of her suffering. After the fifth dose she felt decidedly worse, especially the severe pain over the eyes and in the root of the nose, with violent pressing down as if the frontal sinuses were pressed down; twelve hours later she felt better, the discharge from the nose was very light, she began to breathe and smell first from the left, later from the right nostril; sleep returned, and in two days she was quite well.

Among the few symptoms in the provings of Sticta by Dr. Hale, we find "fullness at the root of the nose," "dull heavy pressure in the forehead and root of the nose." The great dryness of the nose especially at night is a clinical observation.

(2.) During this winter a number of children, at the ages of one to four years were attacked with the following symptoms. They awaken after midnight with a loud barking cough and hoarseness, the attack of coughing continues for an hour or longer, during and at the end of the paroxysm, sneezing. The nose runs water, there are at times two or three attacks between one A. M. and seven A. M. During the day the children are well and cough but little and light. The attack (sometimes there was but one attack at five A. M.) or attacks, recur always at the same hour.

One dose of Rumex 30, has controlled every case, the decided improvement generally only appearing at the second morning after its administration, but then it was permanent.

(3.) Mr. A. fifty years of age, on the tenth day of cerebral typhus and doing well, was suddenly attacked at eleven P. M. with a violent pain extending from his left kidney to the bladder, continual unsuccessful desire to urinate, great nausea and much excited; the attack had lasted almost two hours increasing in violence periodically when I saw him, hot applications to the painful side did not relieve him.

I gave him four pellets of Nux. vom. 50 m. (Fincke) on his tongue, the pain ceased immediately and he laid quiet, fell asleep and received no more medicine till the attack returned again in forty-eight hours, when the same dose gave relief in about ten minutes; thirty-six hours later he was again attacked in the forenoon after a difficult discharge from his bowels, no more nausea, no desire to pass urine, the pain is deeper. seated and continuous. Lycopodium 10 m., 6 pellets dissolved in a spoonful of water, was administered, the relief was very gradual, the pain ceased in one hour, but never returned again; the patient fully recovered without any further medication.

These facts show that the highest potencies will act in the most acute cases, but that no permanent cure can be expected if the best indicated remedy causes an immediate cessation of the symptoms of a grave disease.

(4.) A child, one and one-half years old, awakens at 11 A. M. with a violent cough and continuous vomiting of mucus, the forehead and face are covered with cold perspiration, the face looks and feels like white marble, hands and feet cold; great prostration.

One dose of Veratrum album 34 m. (Fincke) relieved the cough very soon; the child fell asleep half an hour after the medicine was administered and slept six hours, awoke well. Later it was found that the child had eaten the day previous a large quantity of ice-cream.

(5.) Mrs. S., a nurse aged sixty-five years, was attacked in January, about midnight, with violent colic and diarrhoea; stools watery, black, offensive; she took camphor and laudanum. I saw her at nine A. M., the countenance showed great suffering, she had frequently vomited in the last hour, stools every ten to fifteen minutes, she described the pains as intolerable, as if

the navel were drawn with a string to the spinal column, and as if it were pulled tighter every moment.

One dose of Plumbum 200 (Lehrmann), cured this case, so that she could attend to her accustomed duties on the following day. 373

(6.) Mrs. P. aged fifty-six years. Has been an invalid for over twenty years. She now complains, as most serious and most tormenting to her, of a violent pain in the os coccygis; this pain prevents her sitting up, she must lie on her sides; very great tenderness to the touch; she becomes exceedingly nervous and restless as soon as the pain increases, especially at night, and then it prevents sleep. Every afternoon her cheeks become red and hot and continue so till after midnight. When she stands erect, even for a very short time, pain in the uterus, a bearing down and from it, an aggravation of the pains and soreness in the os coccygis. Symptom 125 (vide Hahnemannian Monthly, Vol. I., No. 4,) induced me to give *Cistus canadensis*, all other remedies having failed to produce the desired effect. One dose of the 30th was administered in the evening and was followed by an improvement. The symptoms returned now every other day. *Cistus can.* 200 was given a week later. This caused at first an increase of the congestion to the head, caused an almost sleepless night from restlessness and great nervous irritability, it was followed by a long-continued improvement which had not ceased in thirty days. 373-374

(7.) A gentleman, forty years of age, had slightly injured his left hand by a contusion which left no mark, the lymphatic vessels had swollen up in a large string reaching the axillary gland which was swollen, the swelling had a dark red color and was very painful, especially to contact; he could neither sit still nor lie down; wearing the arm in a sling and walking about gave some relief.

One dose of *Bufo* 200 (Lehrmann) cured him in forty-eight hours, when no trace of redness or swelling remained.

This case occurred two years ago and I have prescribed the *Bufo* for similar symptoms with the same result. The indications for the applications are from Hencke's valuable provings, where it produced like symptoms.

(8.) On the 22d of April, I was summoned to see a boy seven years of age, who had scarlet fever some weeks ago, and now for ten days had been very ill. He had been treated Allopathically till then. I found him lying over his mother's shoulder, who had to carry him constantly. Had been carried in that manner some eight days. Dyspnoea was very great, the pulsations of the heart violent, but the sound muffled, face swollen, especially over the root of the nose and between the eyes, feet swollen, urinary secretions almost entirely suppressed. He would sometimes doze for a few minutes during the morning hours. No thirst. Constipation; pulse over 200 beats in a minute.

He received that day and the following day, *Apis* 200 (Lehrmann) dissolved in water, every four hours one spoonful.

On the 24th he was slightly better, pulse less frequent, he had more thirst, dyspnoea less, some discharge of cloudy urine - no medicine.

He became much worse at 4 P. M., the dyspnoea much worse than before, no secretion of urine, this aggravation subsided at 7 M.

The following morning (the 25th) he was again better and received no medicine till 4 P. M. of that day, when the aggravation of the symptoms again became very alarming.

He now received *Lycopodium* 10^m dissolved in water, every four hours one spoonful; continued this medicine for 48 hours, when a decided improvement had taken place. He was able to lie in bed for the first time in two weeks, he passed more urine, the bowels were moved quite often, six to eight times a day, discharges thin, brown, offensive. The first day he could lie in

bed till about 3 P. M., the next day longer; and in four days did not wish to be carried any more. The swelling of the feet and the dyspnoea gradually decreased, his appetite returned, all the functions normal, without any further medicine.

On the 5th of May my assistance was again requested; he was suffering from violent headache, stupor, pulse full and hard, skin hot, face red, received one dose of Belladonna 2^m, (Jenichen.)

The next morning (May 6th) I discovered an eruption which proved to be varioloid, and on the evening of that day I gave him one dose of Thuja ²⁰⁰. The pustules filled rapidly and began to dry up on the 10th; his urine became very copious and black.

He now received Colchicum ²⁰⁰, dissolved in water, every four hours a tablespoon full for 24 hours; the urine diminished in quantity, became lighter and; was normal in five days. The patient recovered full health, and when seen at the end of August, had never complained of anything since."

(Adolph Lippe, M.D., Clinical Observations, The Hahnemannian Monthly vol. 1 (1865-1866), p. 371-375)

1871 - Formica

"The following fragmentary provings of Formica rufa (Jenichen's 200th potency), and of Formica sericea (Gray), in various potencies, were made in 1857 by Miss B., and in 1864 by the class of the Homoeopathic Medical College of Pennsylvania. The potencies were prepared before the class, and it was left optional with each prover what potency he might choose to take. Provings of various potencies will much facilitate to settle many yet open questions in our school. If the proving of the 200th potency, as reported under 13, proves to be reliable, i. e., if the clinical experiments show the correctness of, and confirm, the proving, it will be another additional evidence of the long action of a highly potentized medicine on the healthy, and correspondingly long on the sick, and of the effect of the single dose. To the student of Materia Medica, it will be very interesting to compare the effects of the different doses, and the confirmation of symptoms observed by different provers. To the class of students who made the provings under the conviction that the very first step in the study of Materia Medica was to make provings on themselves, which also aided them in the acquirement of "observation," which is so necessary to the physician in the examination of the sick, and convinced that we must first learn to observe ourselves, especially when a deranged state of health appears (as in a proving), before we can well observe similar conditions on others - to that class I take this opportunity to express my thanks. The delay of publishing these provings is fully explained in the *Hahnemannian Monthly*, Vol. VI., p. 276, and exonerates me from a charge of neglect to fulfil my promise to the class, that their provings should be published at once. The delay was caused by circumstances over which I had no control.

Proving 1. - C. W. B. took one drop Formica 30, Oct. 19th, 1864.

10 p. m. - Wakefulness all night, with very little sleep.

Oct. 20. - In the morning, dizziness after dressing, when writing.

Remarkable and unexpected activity of the mind during the day, with absence of the usual dulness and sleepiness.

Oct. 21. - Slept well during the night.

Oct. 22. - Sleeplessness last night.

Diarrhoea early in the morning, as soon as awake; compelled to go to stool at once, with rumbling in the bowels; the stool is soft and painless; another stool immediately after breakfast, with urging.

The alternation of wakefulness and sleep has continued at night with great regularity.

From 26th to November 2d there have been regular alternations of sleepless nights and profound sleep.

One night getting to sleep with great difficulty, and waking often during the night; the next night the sleep would be quiet and profound.

Sudden and unexpected return of sense of mortification and grief, with vivid recollection of circumstances long since passed, which had caused great mortification and pain, and which had rendered several years of his life unhappy; this was caused by the transactions of a near relative.

This grief continues and manifests itself whenever he is not wholly occupied.

Dec. 2. - Easily depressed. Things do not look as cheerful as on yesterday and before. Little things cause lowness of spirits, yet soon return to cheerfulness.

Dec. 3. - Decidedly irritable and low-spirited without any cause.

Soft pappy stool in the morning, with some inclination to sit at stool.

Dec. 7 - The same kind of stool every morning till this date, when it was natural. The passage was accompanied by a feeling as though the mucous membrane was thickened and stiff.

Proving 2. - A. H. O. took one drop Formica 30 on November 2, 1864.

November 4th about 5 p. m., tearing, drawing, grumbling pain in the two incisor teeth, superior maxillary bone on right side. This pain was accompanied with much soreness. Teeth felt elongated.

Occurrence of this pain at regular periods of the day for about five days, when it gradually disappeared.

Proving 3. - J. P. H. took one drop 3d dilution of Formica on the night of October 19, 1864.

Oct. 20, 11 A. M. - Stool, constipated; passed but two small balls after much straining.

Appearance when looking at objects as if seen through a mist.

Oct. 21 - In the afternoon intolerable itching about the anus, relieved by scratching.

On Oct. 22, at 6 a. m. - On waking felt much pain in transverse and descending colon from incarcerated flatulence. Was obliged to rise; stool papaceous, followed by constriction of the anus.

Continued pain in the descending colon.

Another stool at 9 a. m., with violent tenesmus, and constriction of the anus after the stool.

At noon, slight pain in right side of pharynx in empty deglutition.

9 p. m. - Twitching in triceps muscle of left arm. Lower lip dry and cracked.

11 p. m. - Burning pain in left carpal bones.

Oct. 23., 8 p. m. - Sharp intermitting pain in fourth toe of left foot. Soon after, a burning pain just behind the ball of the first toe of the same foot. Soon after, slight pain in the lower part of the tibia of the left leg.

Oct. 24. - Soreness at corners of the mouth.

Proving 4. - W. H. H. N. took one drop 6th at 10 o'clock Oct. 27.

Oct. 28, 12 M. - Sensation of stinging in palate, worse from eating, smoking, or contact. This stinging continued for two days, and then extended to the tip of the tongue.

9 p. m. - Shooting pain in carpal bones, while writing, extending down third and fourth fingers.

10 p. m. - Surging in upper part of the brain, momentary, and followed by slight dimness of vision. Itching in anus, relieved by scratching.

11 ½ to 12 p. m. - Shooting pain in region of left scapula. Stinging and burning in left great toe. Shooting pain in left eyeball. Continued chilly sensations during the night.

Oct. 29th. - Continued creeping down the back.

12 M. - Difficult deglutition. Sensation of contraction in oesophagus. Food passes with difficulty and caused pain. This sensation continued for about 12 hours.

8 p. m. - Pain in lower part of left breast, followed in two minutes by the same sensation in right breast, accompanied by continued chilliness down the back, and extending down the inferior extremities.

10 p. m. - Pain in epigastric region, extending from left to right, then shifting to top of head, and followed by creeping down the back. Tearing pain in occiput. Tearing and drawing in left arm and leg from above downwards. Shooting pain in left ear.

Oct. 30. - In the morning slight diarrhoea, two passages, small and without pain.

Proving 5. - Took one dose 30th, in the morning of Nov. 19th, 1864.

An intolerable itching in the conjunctiva in the morning, which burns when rubbed.

Itching of the scalp, arms, abdomen, and the whole trunk and head. (This symptom was well marked.)

Sudden pain in the left lung, followed by a sensation as if I were falling.

Heaviness of the head, and a sensation as if the brain were too large and heavy.

Very red cheeks, in the evening, which burn so much as to feel uncomfortable.

Hand and face very hot. The palms of the hands burn.

Headache, dull, in the right frontal region.

Pulse 92. Irregular. Some fever.

Nov. 20. - At night vivid lewd dreams, erections of penis, and seminal emissions.

Nov. 21. - Same symptoms.

Nov. 22. - Do.

Proving 6. - C. W. B. took one drop 30th at 10 p. m., Nov. 17th, 1864.

Nov. 18, 8 a. m. - Loose stool.

Feeling of fulness in eyes and ears, with fine stinging in ears.

During the day remarkably happy and able to study. Everything seemed easy to be accomplished.

More than usual agility.

Nov. 19. - Same happy state of mind and body, but easily depressed, and by slight causes this happy state was changed for a short time to despondency. Sudden but momentary spells of unhappiness; everything looks dark (mentally).

Sleeplessness the first 24 hours, with sleeping and waking alternately afterwards.

Double the quantity of urine even at night. Increased for two or three days.

Great agility of mind and body.

Proving 7. - Took one dose 200 (Jenichen) on Nov. 30th, at 11 p. m.

Dec. 1. - All day very happy and inclined to be jolly.

Soft pappy discharge from the bowels in the morning.

Inclined to be giddy while eating.

Inclination to pain about one (1) inch above the left eye, alternating with pain in the left parotid region, accompanied with pain in the whole left temporal region, when touching it with the hand.

11 p. m. - Pain in the left supraorbital region, when going to bed, with giddiness.

Dec. 2., 4 a. m. - Giddy on attempting to rise. Rumbling in the bowels, with a nervous feeling as from strong coffee. Compelled to get up.

A loose diarrhoeic stool followed, which left a desire for another stool, with an uncomfortable feeling in the anus, as if the passage were not all through and more must pass.

Painful desire in the anus and rectum for stool, which, however, will not pass.

Dysenteric feeling.

Dull uncomfortable pain in the forehead, with heat and fullness and pulsations.

Proving 8. - W. W. took one powder, 200 (Jenichen) Nov. 30th, 1864, at 7 ½ p. m.

10 p. m. - Uneasy pain in the region of the heart, lasting half an hour or more.

Very wakeful after going to bed.

Dec. 1. - Evacuation of bowels with difficulty, ending with thin faeces, painless. Great sleepiness in the evening, while reading removed.

Dec. 2. - Spasmodic twitching of upper lid of right eye, lasting an hour. Sensation of pain in the forepart of urethra. Lewd dreams at night. Slight pain in left ear. Biting pain in left forearm, lasting a short time.

Proving 9. - C. G. took 200 at 5 p. m.

On 2d, 3d and 4th days pressure in the rectum, sensation of constriction in the anus.

From 2d to 6th days two stools every day (one stool is the rule).

Pressure in the rectum, worse in the evening and in bed.

Dreams the first three nights not unpleasant.

Oct. 24th. - Evening at 10, took 2 drops 30th.

In 15 minutes slight pressure over left eye for a few minutes. - 10.50, stitches in left lumbar region, lasting only a few seconds.

Oct. 25th, 11.50 a. m. - Tearing pain in middle finger of left hand. 12 o'clock M., frontal headache, dull, lasting all afternoon till 10 p. m.

Oct. 26th. - Headache at 12 M. as bad as yesterday, some pain and still lasting; 4 ½, pain in right side of chest, could not breathe for a moment. Stitching pain. Headache daily from 12 M. till 10 p. m., worse when stooping.

Pain over both eyes. Every day from 12, aching. Earlier every day, the same also in the morning.

Proving 10. - Nov. 30, 1864. Z. E. E. took one dose 30th in the evening.

Dec. 1. - Diarrhoea, with some tenesmus. Pain in lower umbilical and upper hypogastric regions before moving the bowels; relieved after stool.

Dec. 4. - Great sexual excitability. After 12 o'clock an intolerable drawing headache in left side; relieved after supper. Deep-seated itching in left ear, at times amounting almost to pain.

Dec. 5. - Same symptoms as on 4th, with bruised sensation of the lower limbs. Pain through the pelvis, as if from one acetabulum to the other.

Remark. - Before taking the medicine was troubled with constipation, with sensation of constriction of sphincter ani; relieved of these symptoms entirely, afterwards the diarrhoea set in.

Proving 11. - Took one dose ^[200th] in the evening of Nov. 30, 1864.

Dec. 2. - Menses appeared, rather scanty and pale, with bearing-down pain in the back.

Dec. 3. - Same as on 2d. Discharge darker.

Dec. 4. - The menses continue, with a crampy pain through the hip-joint and pelvis.

Dec. 5. - The discharge becomes scanty and pale again. The pain in the back is diminishing.

Dec. 6. - The symptoms are still continuing to disappear.

Dec. 7. - All the symptoms have ceased.

Remarks. - She has been very costive all her life. On the 5th instant her bowels began to move regularly; have been getting a little worse since, but not so bad as before. Her menses appear eight days too soon. She has always been regular before.

Proving 12. - W. L. G. took Formica 30th, one dose, after breakfast. At noon on the first day sensation like a bubble bursting in the forehead, running around the left side of the head.

General exaltation; wants to run, but soon becomes tired, in the evening especially. Unable to study long at night. Lewd dreams often during the night, with erections.

2d day. - General lightness; the same dreams during the night.

3d day. - Headache after dinner on the left side, same as first day. Sleeping easily in the evening. Same lewd dreams and erections during the night.

4th day. - Urine like saffron; bright yellow; no sediment Passes urine often. Lewd dreams at night.

5th and 6th days. - Frequent urination; urine darker. Hot, red swelling of prepuce. Secretion under the prepuce much increased, continuing for one week. Merc. corr. stopped all the symptoms.

Proving 13. - Miss B., aged 35 years, a very sensitive person, took on the 28th of February, 1857, two pellets of the 200th potency (Jenichen). Slept well.

March 1st, 11 a. m. - Pain in the forehead, with nausea. In the afternoon long, deep stitches in the *left* ear, lasting two hours; the same stitches in the left upper arm. Restless night; sleep much disturbed.

March 2. - In the afternoon great sleepiness for half an hour; very little sleep during the night, with much nausea.

March 3. - Sleepiness in the afternoon, then stitches in the ankle of the left foot. Slept well during the night.

March 4. - Dull pain in the forehead during the afternoon, and stitches in the left ear and left upper arm, as on the 1st of March. In the evening, at 8 o'clock, attacks of faintness, lasting some minutes. Everything is black before the eyes; is compelled to sit down. Restless sleep at night.

March 5. - In the morning nausea, and vomiting of yellowish, bitter mucus. Restless night.

March 6. - In the morning dull headache in the forehead. In the afternoon violent itching on the inside of the left arm and hand, followed by a rash, appearing in streaks on the left arm and hand, as from the seams of a glove.

March 7. - In the morning nausea, followed by stitches in the left ear, lasting all day.

March 8. - Sleepy in the afternoon. Dull headache in the evening.

March 9. - At 10 a. m. nausea and vomiting, as on the 5th inst. In the night a hysterical attack of laughing, followed by shedding of tears; later great stiffness of the articulations of the jaws, cannot open her mouth. Restless night.

March 10. - Very weak in the morning. In the afternoon stitches in the left ear.

March 11. - Sleepy in the afternoon, and pain in the left side of the chest, continuing one and a quarter hours; better when walking; worse when sitting, and taking a deep breath, which causes stitches and the sensation of an adhesion.

March 12. - Stitches in the left ear and left upper arm.

March 13. - Sleepy in the afternoon.

March 14. - When waking in the morning headache, with vomiting (as above), and stitches in the left side of the chest.

March 15. - At 9 p. m. vomiting of green, bitter mucus, and headache.

March 16. - Wakens feeling very weak.

March 18. - Slight stitches in the left ear.

Till the 24th of March cessation of all symptoms; on that day slight stitches in the left ear, followed by a small abscess in the external portion of the meatus auditorius, and later, for some days after the abscess had discharged some pus, much itching in the left ear.

Mind and Disposition. - Sudden and unexpected return of sense of mortification and grief, with vivid recollections of circumstances long since passed, which had caused great mortification and shame, and which had rendered several years of his life unhappy (this was caused by the transactions of a near relative), Oct. 26 to Nov. 2. - C. W. B.

The grief continues and manifests itself whenever he is not wholly occupied, Oct. 26th to Nov. 2d. - C. W. B.

Remarkable and unexpected activity of the mind during the day, with absence of usual dullness and sleepiness, 3d day. - C. W. B.

During the day remarkably happy and able to study; everything seems easy to be accomplished; more than usual agility, Nov. 8th. - C. W. B.

Same happy state of mind and body, but easily depressed, and by slight causes this happy state has changed for a short time to despondency; sudden but momentary spells of unhappiness. Everything looks dull (mentally), Nov. 19th. - C. W. B.

Great agility of mind and body, Nov. 19th. - C. W. B.

Easily depressed; things do not look as cheerful as they did yesterday and the days before; little things cause lowness of spirits, yet cheerfulness soon returns, Dec. 2d. - C. W. B.

Decidedly low-spirited and irritable without any cause, Dec. 3d. - C. W. B.

Great exaltation, wants to run, but soon becomes tired in running, especially 1st day. - W. L. G.

Unable to study long at night, 1st day. - W. L. G.

General lightness of spirits, 2d day. - W. L. G.

All day very happy and inclined to be jolly, 2d day. - S.

Spasmodic and convulsive laughing, ending with shedding of tears and lockjaw, 10th day. - Miss B.

Head. - Inclined to be giddy while eating, 2d day. - S.

Dizziness after dressing in the morning, when writing, 2d day. - C. W. B.

Pain in left supra-orbital region, when going to bed, with giddiness, 11 p. m., 2d day. - S.

Giddy on attempting to rise, 4 a. m., 3d day. - S.

Black before the eyes, must sit down for a few minutes, 5th day. - Miss B.

Headache, like pressing out in the forehead. - A.

Headache, 9 a. m. - A.

Frontal headache, dull, lasting all afternoon till 10 P. m., 3d day. - C. G.

Headache at 12 m. as bad as yesterday; same pain and still lasting, 4th day. - C. G.

Headache daily from 12 m. till 10 p. m., worse when stooping, 4th day. - C. G.

Headache, after dinner, on the left side, 3d day. - W. L. G.

Intolerable drawing headache in the left side, lasting two days, relieved after supper, 12 M., 4th day. - Z. B. E.

Dull headache in the right frontal region, 1st day. - P.

Headache in the forehead, with nausea, 11 A. St., 2d day. - Miss B.

Awakens with headache in the forehead, 5th day. - Miss B.

Dull headache, evening, 9th day. - Miss B.

Headache, with vomiting; stitches in the left side of the chest, when awaking in the morning, 15th day. - Miss B.

Sensation as of a bubble bursting in the forehead, running around the left side of the head, 12 m., 1st day. - W. L. G.

Singing in upper part of the brain, momentary, followed by a slight dimness of vision, 2d day, 10 p. m. - W. H. H. N.

Pain in epigastric region, extending from left to right, then shifting to the top of the head, with creeps down the back, 3d day, 10 p. m. - W. H. H. N.

Tearing pain in occiput, 3d day, 10 p. m. - W. H. H. N.

Heaviness of the head, and sensation as if the brain was too heavy and large, 1st day. P.

Inclination to pain about one inch above the left eye, alternating with pain in the left parotid region, accompanied with pain in the whole left temporal region; worse when touching the spot with the hand, 2d day. - S.

Pain in left supra-orbital region, when going to bed, with giddiness, 11 p. m., 2d day. - S.

Dull, uncomfortable pain in forehead, with heat, fulness and pulsations, 3d day. - S.

Dull pain in forehead in the morning, 7th day. - Miss B.

Slight pressure over the left eye, lasting for a few moments, in 15 minutes, 1st day. - C. G.

Pain over both eyes, aching, every day, in the morning, earlier every day, 4th day. - C. G.

Itching of scalp and head (well marked), 12th day. - P.

Eyes. - Appearance when looking at objects as if seen through a mist, 2d day, 11 a. m. - L P. H.

Black before the eyes, must sit down for a few minutes, 5th day. - Miss B.

Singing in upper part of the brain, momentary, followed by a slight dimness of vision, 2d day, 10 p. m. - W. H. H. N.

Feeling of fulness in the eyes and ears, with fine stinging in the ears, 2d day. - C. W. B.

Spasmodic twitching of the upper eyelid of the left eye, lasting an hour, 2d day. - W. W.

Shooting pain in the left eyeball, 2d day, 11 ½ to 12 p. m. - W. H. H. N.

Intolerable itching in the conjunctiva, which burn when rubbed in the morning, 1st day. - P.

Ears. - Feeling of fulness in the eyes and ears, with fine stinging pain in the ears, 2d day. - C. W. B.

Slight pain in the left ear, 3d day. - W. W.

Shooting pain in the left ear, 3d day, 10 p. m. W. H. H. N.

Stitches deep into the left ear and upper arm, 2d day, 2 p. m. - Miss B.

Awakens with stitches in the left ear, 5th day. - Miss B.

Nausea in the morning, followed by stitches in the left ear, continuing all day, 8th day. - Miss B.

Stitches in the ear in the evening, 11th day. - Miss B.

Stitches in the left ear and upper arm, 13th day. - Miss B.

Deep-seated itching in the left ear, amounting at times almost to pain, lasting two days, 4th day. - Z. R. E.

After 6 days small ulcers under the left meatus auditorius which soon heal; great tickling in the ears remains for weeks. - Miss B.

Face. - Inclination to pain about one inch above the left eye, alternating with pain in the left parotid region, accompanied with pain in the whole left temporal region, worse when touching it with the hand, 2d day. - S.

Hand and face very hot, 1st day. - P.

Mouth and Throat. - Tearing, drawing, grumbling pain in the two incisor teeth, superior maxillary bone, right side; this pain was accompanied with much soreness, 2d day, 5 p. m. - A. H. C.

Occurrence of this and the following pain at regular periods of the day for about 5 days, when it gradually disappeared. - A. H. C.

Teeth felt elongated, 2d day, 5 p. m. - A. H. C.

Lower lip dry and cracked, 4th day. - J. P. H.

Soreness at the corners of the mouth, 6th day. - J. P. H.

Sensation of stinging in the palate, worse from eating, smoking, or contact; stinging continued for 2 days and then extended to the tip of the tongue, 2d day, 12 M. - W. H. H. N.

Slight pain in the right side of the pharynx during empty deglutition, 4th day, 12 M. - J. P. H.

Difficult deglutition, sense of contraction in the oesophagus; food passes with difficulty and causes pain; sensation continued about 12 hours, 3d day, 12 m. - W. H. H. N.

Stomach and Abdomen. - Nausea and vomiting in the morning, 6th day. - Miss B.

Nausea in the morning, followed by stitches in the left ear, continuing all day, 8th day. - Miss B.

Nausea and vomiting, 10 a. m., 10th day. - Miss B.

When awakening in the morning, vomiting, with headache, 15th day. - Miss B.

Vomiting of bile and mucus, with headache, and stitches in the ear, 9 p. m., 16th day. - Miss B.

Much pain in transverse and descending colon, from incarcerated flatulence; was obliged to rise in the morning on wakening, 6 a. m., 4th day. - J. P. K.

Continued pain in descending colon, 4th day. - J. P. H.

Rumbling in the bowels, with a nervous feeling, as from strong coffee, 3d day. - S.

Diarrhoea early in the morning, as soon as awake, with rumbling in the bowels, 3d day. - C. W. B.

Pain in epigastric region, extending from left to right, then shifting to the top of the head, and followed by creeps down the back, 3d day, 10 p. m. - W. H. H. N.

Itching of the abdomen and trunk (well marked), 1st day. - P.

Stool and Anus. - Increased constipation for two or three days, 2d day. - C. W. B.

Constipated stool, passed but two small balls after much straining, 2d day, 11 a. m. - J. P. H.

Evacuation of bowels with difficulty, ending with thin faeces, painless, 2d day. - W. W.

Loose stool, Nov. 18th, 8 a. m. - C. W. B.

Soft, pappy stool in the morning, with inclination to sit at stool, Dec. 3d. - C. W. B.

Same kind of stool every morning to this date, when it was natural. The passage was accompanied by a feeling as though the mucous membrane was thickened and stiff, Dec. 3d to 7th. - C. W. B.

Diarrhoeic stool early in the morning, as soon as awake; compelled to go to stool at once, with rumbling in the bowels, 3d day. - C. W. B.

Stool soft and painless; another stool immediately after breakfast, with urging, 3d day. - C. W. B.

Much pain in transverse and descending colon from incarcerated flatulence; was obliged to rise; stool papulent in the morning on awakening, 6 a. m., 4th day. - J. P. H.

Stool papulent, followed by constriction of the anus, 4th day. - J. P. H.

Another stool with violent tenesmus, 9 a. m., 4th day. - J. P. H.

Soft, pappy discharge from the bowels in the morning, 2d day. - S.

Dysenteric feeling, 3d day. - S.

Compelled to get up for stool, 3d day. - S.

A loose diarrhoeic stool, which left a desire for another stool, with an uncomfortable feeling in the anus, as if the passage were not all through, and more must pass, 3d day. - S.

Slight diarrhoea; two small passages, painless, in the morning, 4th day. - W. H. H. N.

Two stools every day for four days (one is the rule). - C. G.

Bowels more regular (always has been costive), 4th day. - K.

Diarrhoea, with some tenesmus; pain in lower umbilical and upper hypogastric regions, before moving the bowels; relieved after stool, 2d day. - Z. R. E.

Sensation of constriction in the anus, 3 days. - C. G.

Constriction of anus after stool, 9 a. m., 4th day. - J. P. H.

Painful desire in the rectum and anus for stool, which however, did not pass, 3d day. - S.

Pressure in the rectum, worse in the evening and in bed, 3 days. - C. G.

Itching of the anus (well marked), 1st day. - P.

Itching of the anus, relieved by scratching, 2d day, 10 p. m. - W. H. H. N.

Intolerable itching about the anus, relieved by scratching, 3d day, afternoon. - J. P. H.

Urinary Organs. - Double the quantity of urine at night, Nov. 19th. - C. W. B.

Urine like saffron, bright yellow, passes often; no sediment, 4th day. - W. L. G.

Frequent urinations, urine darker, 5th and 6th days. - W. L. G.

Sexual Organs. - *Male.* - Hot, red swelling of the prepuce; secretion under the prepuce much increased, lasting for one week, 6th and 6th days. - W. L. G.

Great sexual excitability, 4th day. - Z. B. E.

Lewd dreams at night, with erections, 3 days. - W. L. G.

Vivid lewd dreams at night, erection of penis, and seminal emissions, 2d, 3d, and 4th days. - P.

Sensation of pain in the fore part of the urethra, 3d day. - W. W.

Female. - Menses appeared rather scanty and pale, with bearing down in the back, 3d day. - K.

Same symptoms, discharge darker, 4th day. - K.

The menses continued with crampy pains through the hip-joint and pelvis, 5th day. - K.

This discharge becomes scanty and pale again, the pain in the back diminished, 6th day. - K.

Respiratory Organs. - Pain in the right side of the chest, could not breathe for a moment, stitching pain, 4 ½ p.m., 4th day. - C. G.

Sudden pain in the left lung, followed by a sensation as if falling, 1st day. - P.

Pain in the lower part of the left breast, followed in two minutes by the same sensation in the right breast, accompanied by continued chilliness down the back, and extending down the inferior extremities, 3d day, 8 p. m. - W. H. H. N.

Pain in the left side of the chest continuing 1 ¼ hour; better when walking, worse when sitting and when drawing a long breath, with stitches or sensation of adhesion, 10 p. m., 11th day. - Miss B.

Stitches in the left side of the chest on waking in the morning, 16th day. - Miss B.

Uneasy pain in the region of the heart, lasting half an hour, 10 p. m., 1st day. - W. W.

Back. - Shooting pain in the region of the left scapula, 2d day, 11 ½ to 12 p. m. - W. H. H. N.

Itching of the abdomen and trunk (well marked), 1st day. - P.

Extremities. - **Upper.** - Twitching in the triceps muscle, left arm, 9 p. m., 4th day. - J. P. H.

Stitches deep into the left ear and upper arm, 2 p. m., 2d day. - Miss B.

Awakens with stitches in the left ear and upper arm, 5th day. - Miss B.

Stitches in the left ear and upper arm, 13th day. - Miss B.

Biting pain in the left forearm, lasting a short time, 3d day. - W. W.

Tearing and drawing in the left arm and leg from above downwards, 3d day, 10 p. m. - W. H. H. N.

Tearing pain in the middle finger of the left hand, 10.50 a. m., 2d day. - C. G.

Hand and face very hot, palms of the hands burn, 1st day.

Burning pain in the left carpal bones, 11 p. m., 4th day. - J. P. H.

Shooting pains in the carpal bones while writing, extending down the third and fourth fingers, 2d day, 9 p. m. - W. H. H. N.

Violent itching on the inside of the left arm and hand, followed by a red rash, in stripes like the seams of a glove, evening 7th day. - Miss B.

Lower. - Pain through the pelvis, as if from one acetabulum to another, 6th day. - Z. R. E.

Bruised sensation of the lower limbs, 4th day. - Z. B. E.

Tearing and drawing in the left arm and leg from above downwards, 3d day, 10 p. m. - W. H. H. N.

Sharp intermitting pain in the fourth toe of the left foot, 8 p. m., 6th day. - J. P. H.

Soon after a burning pain just behind the ball of the first toe of the same foot, soon after slight pain in the lower part of the tibia of the left leg. - J. P. H.

Stinging and burning in the left great toe, 2d, 11 ½ to 12 p. m. - W. H. H. N.

Stitches in the left ankle, 4th day. - Miss B.

Sleep. - Very wakeful after going to bed, 1st day. - W. W.

Wakefulness all night, with very little sleep, 10 ½ p. m., 1st day. - C. W. B.

Sleepless during the night, 4th day. - C. W. B.

Sleeplessness the first twenty-four hours, with sleeping and waking alternately afterwards, Nov. 19th. - C. W. B.

Alternation of sleep and wakefulness very regular every night, Oct. 26th to Nov. 2d. - C. W. B.

One night getting to sleep with great difficulty and waking often during the night, the next night the sleep is quiet and profound, Oct. 26th to Nov. 2d. - C. W. B.

Great sleepiness in the evening, removed, 2d day. W. W.

Slept well during the night, 3d day. - C. W. B.

Sleeping easily in the evening, 3d day. - W. L. G.

Slept well, 1st day. - Miss B.

Very sleepy for half an hour during the night and little sleep, 3d day. - Miss B.

Same sleepiness, 4th day. - Miss B.

Sleepy in the evening, 5th day - 13th day. - Miss B.

Restless sleep, 3d day - 5th day. - Miss B.

Restless night, 6th day - 10th day. - Miss B.

Fever. - Continued chilly sensations during the night, 2d May, 11 ½ to 12 p. m. - W. H. H. N.

Continued creeps down the back, 3d day. - W. H. H. N.

Pain in epigastric region from left to right, then shifting to the top of the head, followed by creeps down the back, 3d day, 10 p. m. - W. H. H. N.

Pain in the lower part of the left breast, followed in two minutes by the same sensation in the right breast, accompanied by continual chilliness down the back and extending down the inferior extremities, 3d day, 8 p. m. - W. H. H. N.

Some fever, 1st day. - P.

Pulse 92, irregular, 1st day. - P."

(Formica, by Dr. Adolph Lippe, M.D., The North American Journal of Homoeopathy vol. 19 (1871), p. 485-494, 545-553)

1873 - Clinical Reflections

"The motive for relating this case is, to show how one of the followers of Hahnemann understands the application of the law of *Similia*, and its practical uses for the cure of the sick.

A lady, 28 years of age, mother of three children, extremely nervous temperament, was taken sick at the seaside, and after spending six days on her bed with violent headache and fever, no treatment, she came to town for advice.

The prevailing disease at the seaside was a so-called gastric fever, as the learned men discovered, running rapidly into typhus, caused by much stagnant water from unusually heavy rains and utter want of drainage.

Her symptoms first indicated *Bryonia*; two days later, when the tip of the tongue became very red, *Sulphur*.

On the sixth day of the treatment she was so much better that she insisted upon returning to the seaside to re-join her family.

The trip much exhausted her, and she was again powerless to rise; headache grew worse for three days, and her friends becoming alarmed, summoned me to see her.

I found her lying very quiet in bed in a dark room.

The headache had increased ever since she left the house in the city; pulsation in the temples, fullness and heavy aching on the vertex.

She had her hair cut off to within two inches of the scalp, because the heaviness and heat of it had almost distracted her; the least motion makes the pain much worse; she has not slept for three nights; keeps her eyes closed because the light is disagreeable, not painful to the eyes; tongue coated heavily on the back part; moderate thirst, but putrid taste; perspiration alternating with chilliness, which causes her to cover herself up very heavily till again perspiration breaks out; oppressed breathing, caused by a sense of weight in the chest, and occasional light cough; pulse 106 beats a minute, small and empty; hands hot; aversion to food; urinary secretions normal as to quantity, without pain or inconvenience; bowels moved regularly every day or two, and were then in a normal condition

Hahnemannians have claimed, and rightly so, that the characteristic symptoms of the patient must also be characteristic of the remedy when selecting one under the law of the similars.

What then, in this case, were the most characteristic symptoms?

The most *prominent* complaints were the sleeplessness, the headache, the great debility.

The disease began to show itself in severe headache, which had ceased till over-exertion disturbed the healing process, and the very first symptoms of her disorder returned with much greater violence than before.

The sleeplessness was certainly only the result of the abnormal condition of the brain (congestion); it became, therefore, very evident that the brain-symptoms had to be considered characteristic; furthermore, what were the *characteristic brain-symptoms* in this case?

Mere conjecture? would that alone indicate a remedy?

She had her hair cut off to relieve the head from heat and its weight.

Motion increased the pain; she must lay quiet.

Belladonna would suggest itself as *the* remedy, on first sight, but *Belladonna* has the characteristic symptom that the headache is much increased by uncovering the head (by having the hair cut), and is generally relieved by sitting up.

The great characteristic symptom, amelioration of the headache by uncovering it, is to be found under *Glonoine*.

Had I decided upon the choice of remedy by mechanically setting opposite each symptom the corresponding medicines, my choice being governed by the rule of majorities, I would not have chosen *Glonoine*, which did not correspond (as far as we yet are in possession of its provings - almost all with crude or large doses), with the majority of the symptoms.

Glonoine has one very important symptom of the case, viz.: when he rises, his knees break down on account of the severe headache. *)

She could not rise because her headache was so severe that it caused such weakness of her limbs that she could not stand on them.

She began to take *Glonoine* C. m, (tinct.) a few pellets dissolved in half a tumbler-full of water every two hours, a teaspoonful at 2 p. m., and took xii doses of this solution.

The next day I received a report.

‘The head is much better, the breathing normal, no sleep.’

During the day, and in fact ever since, no more medicine was given.

The following day, another report states: ‘Headache has ceased; slept four hours; feels much better; asks for food.’

No more medicine was needed.

The result was certainly all that could be wished for, and as long as we meet with just such results day after day, and year after year, provided we faithfully follow Hahnemann, we do not feel much inclined to listen to the ‘Pretenders’ who claim far superior results by a more *scientific* (?) comprehension of the law of similars.

The journals are loaded with clinical reports in which there is not a single point, no reason given why such tremendous doses were alternated for a form of a disease, and the individual experience and belief of an individual is thrust at us with shameless effrontery, and we are asked to draw the deduction from his relation that *he* has just hit upon a superior treatment for just such a form of disease, and because *he* says so, it must be swallowed by the profession. When will the great majority of the editors of our journals exclude such reports, which, on their face, if not wholly fabrications, are utterly useless?"

*) Hering’s Amerikanische Arzneiprüfungen p. 130. Sympt. 750 and 751.

(Adolph Lippe, M.D., Clinical Reflections, The United States Medical Investigator vol. 10 (1873), p. 607-609)

1873 - Homoeopathy applied

"A lady, 58 years of age, subject to occasional attacks of colic, or, as she termed it, cramps in the stomach, was so afflicted on the 10th of October, 1872.

Each attack differed very much from the previous ones, and at no time did the remedy which before relieved her do so again.

The hereditary predisposition would indicate approaching cancer of the stomach.

At this time she was taken ill about an hour after dinner.

4 p. m. very sick at stomach, burning pain in the region of the stomach, great nervous debility, obliged to undress and lay down; she took *Phosphorus*, but feeling no relief in an hour, the burning pain, nausea, and general distress increasing, she took, at about 7 p. m., a dose of *Arsenic*.

On a former occasion *Phosphor.* had relieved her when there had been present vomiting of much sour mucus, and on another occasion when the burning pain had been accompanied by much thirst and restlessness, with also vomiting of sour substances, *Arsenic* had relieved her promptly.

Now the vomiting had continued, first food, then tasteless water, and when I came to see her about 10 p. m., she still continued to vomit, throwing up with much difficulty.

She had no thirst, but when she had to sit up and strained herself to vomit, she would exclaim that she could not straighten herself without much pain.

She complained, beside the great distress in her stomach, and nausea, of an unusual collection of mucus in her nose, and especially in the posterior nares coming down into the throat and mouth, causing her to make strong efforts to rid herself of this mucus, which effort in turn caused additional pain in the stomach and another spasmodic effort to vomit.

As this accumulation of mucus in the posterior nares was a new symptom of the patient, and as such surely indicative of the curative remedy under the homoeopathic law, it became necessary to select one among the many remedies causing this (as it may be called) accidental symptom.

Accumulation of mucus in the posterior nares is known to have been caused by the following medicines:

Alumina, Anacardium, Antimonium crud., Cepa, Corall-rub., Euphrasia, Kali bichromicum, Mercur., Natrum carb., Rumex, Selen., Spongia, Plumbum, Sulphur, Zinc.

A very cursory look over these remedies would lead any one at all (much, ED.) acquainted with our *Materia Medica* to select *Plumbum met.*

One dose of *Plumbum*^{cm} (Fincke) was administered, and from that moment the vomiting ceased, and the pain gradually vanished.

And this, as many other cases, proves conclusively the correctness of our fundamental principles, and the success of homoeopathy, if properly applied."

(Adolph Lippe, M. D., Philadelphia, Homoeopathy applied, The United States Medical Investor vol. 10 (1873), p. 38-39)

1873 - Letter to the Editor of the US Medical Investigator

"The proposition of a new nomenclature of diseases with a drug-qualifying term like *Belladonna Convulsions*, etc. is an old one, first introduced in clinical instruction by the late Prof. Leboenlius fifty years ago. He, as an allopathist, described *Chamomilla* and *Colchicum* rheumatism. The desire of the many is to make the study of *materia medica* easy, and the many want it set before them all cooked up. But suppose the keynote man and the nomenclature man meet with a case in which neither helps him out, if they have failed to the detriment of the sick - who has lost precious time, and is now full of medicine - then they will, and do say, that homoeopathy did not reach the case. A nomenclature of that kind would do very well, be a great aid in the study of *materia medica*, always provided that from the outset nothing more is claimed for it, provided it is fully understood not to represent exhaustive therapeutics.

We must, after all, go back to first principles, as taught by Hahnemann in his *Organon*. The totality of symptoms constitutes the disease. So it is with puerperal convulsions. A young medical doctor who has purchased a diploma from any of the medical colleges, has such a case of puerperal convulsions, but never read, or, if he did, never comprehended, the *Organon*. Well, says he to himself, Dr. A. says in his Lectures *Belladonna* and *Hyoscyamus* are the two great remedies, he gives them, but has no success; he sends for another fellow, licensed to kill, and B says, 'No sir; my teacher said it is all a mechanical difficulty nothing for a remedy to do - deliver, and put in *Secale cornutum*; the forceps, and all that talk of dynamic diseases is homoeopathy misapplied.' The woman dies, of course, of convulsions, in care of two licensed scoundrels. If I write a paper and point out the *characteristic* symptoms of *Opium*, *Gelseminum*, or *Belladonna*, or *Hyoscyamus*, or *Cuprum*, or *Artemisia*, who cares for the characteristic symptoms, the convulsions may possibly have none of them at all, and may require *Angustura*, or *Stramonium*, or *Aurum*, or something else, and if all these so-called characteristic remedies were given, and produced no salutary effect, those who gave them when they were not indicated will for ever curse the man who gave them such information as they were unable to appreciate or to utilise.

Yours truly,

Ad. Lippe"

(Adolph Lippe, M.D., Letter to the Editor, The United States Medical Investigator vol. 10 (1873), p. 366)

1873 - Notes on the Epizootic

"The late epidemic traversing as it did the whole country, first attacking the horses and later mankind, has, like previous epidemics, added additional proof to the infallibility of the correctness and reliability of the principles of Homoeopathy. In the same degree as these principles were strictly applied for the cure of the sick were the results favorable, and the further the deviation was carried the less success followed the treatment. The disease has been described

in medical journals and newspapers; still a few symptoms of great weight seem to have been overlooked. The horses (and now men) when first attacked suffer most always from frequent micturition, which is often painful, very little either dark or muddy urine has to be passed every quarter of an hour. If these symptoms are overlooked, and the kidneys become gradually more diseased, the fatal dropsical cases after the catarrh has subsided, can easily be accounted for. The epidemic showed itself under different forms and with different symptoms, or course, requiring different remedies in different localities, and so it came that in each locality and for each individual case the truly curative (homoeopathic) remedy had to be found; and again there were remedies which for a time cured a large majority of cases in the same locality, just because the disease epidemically attacked so many all at once, (almost all) horses, and they then generally showed very similar symptoms. In New York, where the epidemic broke out a fortnight before the first case occurred in Philadelphia, most cases required *Bryonia*, and later *Lycopodium*; while in Philadelphia *Nux vom.*, and later *Phosphor.* cured the majority of cases.

The more remote the treatment was from the strictly homoeopathic practice, the more fatal were the results. When the disease first developed itself as an epidemic, the veterinary surgeons of the Sangrado school, resorted to bleeding and hot mashes, but all the horses so treated died, and the followers of Sangrado was requested to quit that sort of practice, and owners of horses looked out for better remedies; aware of the freedom they enjoyed to treat their horses as they pleased, they availed themselves to it. Curious statements are now made, how this freedom of medical opinion and action resulted to the advantage and disadvantage of the sick.

The Sangrado school retires by universal request, and bleeding and hot water having done its deadly work, are abandoned. All the horses are sick, the traffic of the cities as well as the country is almost suspended; there are no horses to pull the street cars, or the dray, or the physician's chaise, even funerals have to be postponed for want of horses; the gentlemen, living in the country and doing business in town, have to foot it to the railroad station for miles, their many horses are all down with the epidemic; and every one so suffering deprivations to which he is not accustomed, seeks a remedy for this faithful, now sick, horse; each according to his own best judgment. We find a Dr. Schenck, of newspaper notoriety, advertising largely his Mandrake Pills, and other nostrums, as specifics for lung diseases; deprived of his splendid teams, he is a consistent man. Pathological anatomy has to his knowledge revealed the fact that the epidemic attacks the bronchia and lungs, and professing himself to be an orthodox doctor of the scientific school, he argues: Mandrake Pills cure as I advertise, all cases of bronchial and lung diseases, and it must be so; first, because I have advertised it for many years; and, second, I do really sent a great quantity of my pills; therefore my first sick black horse, one of a pair, being down, is forced to swallow thirty-five Mandrake Pills; the horse grow worse rapidly, and dies. The mate is taken sick, and the consistent doctor, still believing in the infallibility of his pills, concludes that the remedy was no doubt a specific, but that the dose was not large enough. So the mate has to swallow double the quantity of pills, and dies in half as short a time as the other did. Now his favorite gray is down; the consistent pill doctor has not changed his mind, and the gray horse has to swallow four times as many Mandrake Pills as did black No. 1. He dies in a very short time, and the owner begins to put his fingers up to his nose and *thinks*. The other horses who were less valuable all came down, and - no more pills - carrots and apples instead, and none of them died.

The scientific gentleman, obtaining his therapeutics from a diagnosis based on pathological anatomy, retires to the same regions where already dwelled the disciples of Sangrado, minus three valuable horses, probably not plus the knowledge so dearly bought, which should probably should be the results of his sad contemplations and thoughts that pathological anatomy does never reveal the causes of diseases, much less does a diagnosis based on such irrational

deductions, reveal the true therapeutics or the curative agents to combat a disease, of which diseases, their causes and origin, men shall never know more than the objective and subjective symptoms such disease presents to our observing senses. Sangrado and pills have retired, and we look now for some light among the regular scientific doctors of the physiological school. They were asked, What shall we do for our sick horses? That school scorns the idea of having a noble profession so degraded as to be consulted in that manner. We, they said, are doctors, and treat mankind; the horse and all the rest of creation are below our notice. And so they decline to say what they know not.

There were many men whose horses were sick, and they knew of Hahnemann and his disciples, and of fundamental principles guiding them in the cure of the sick, and to them they went; and the disciples of Hahnemann carefully collected the characteristic symptoms of the disease, and the peculiar symptoms of each individual case; and, having them as a guide for their therapeutics, they looked for the similar remedy in their store-house, the *Materia Medica*. They not only treated their own horses in that manner, but gladly advised all who desired advice, and gave then needful remedies.

As far as my individual experience is concerned, I found that in this locality, for the first catarrhal symptoms, even when strangury appeared, *Nux vom.* was the principal remedy, and one dose of the 100^m potency was all-sufficient; in two or three days the discharge from the nostrils became profuse yellowish-green, much cough set in, and the animals became weak. *Phosphor.* 100^m; a dose generally much relieved especially the cough, and it was generally not necessary to give more than another dose after the lapse of three or four days. In very few cases a third dose became necessary. *Aconite*, *Bryonia* and *Belladonna* were rarely ever needed at the beginning of the disease, and very seldom was it needed to give *Arsenic* for the great debility and putrid diarrhoea at the end of a first neglected case. Dropsy and the other sequences of the disease only appeared after overdosing and gross neglect, *never* after a strict homoeopathic treatment. I prescribed for many very valuable horses, and advised owners of large stocks of horses; these, as well as my own horses, all recovered inside of a fortnight, and in not a single case did the so treated horses suffer from any after diseases; to the contrary they were in better condition than they ever had been before, and even the very severe storms to which they were necessarily exposed in December and the beginning of January did not affect them in the least, while horses differently treated still suffer severely from exposure to storms, and many valuable horses surviving the ordinary dosing are still sick.

When an epidemic breaks out, we know it to differ from all previous epidemics of a similar kind, and remedies which proved themselves almost specifics in a former epidemic are no longer of any service, just because the epidemic has changed its character. The older practitioners will well remember what an important remedy *Ammonium carb.* was in the scarlet fever epidemic of 1840, how later the same disease often yielded to *Capsicum*, and in turn to *Nitric acid* or *Lycopodium*, and in later years to *Arum trif.* or *Apis mel.*, etc. And it therefore behoves us to collect all the characteristic symptoms of a newly appearing epidemic, and find the similar remedy for them. Knowing the characteristic symptoms, we easily find the peculiar symptoms of each individual case, and these peculiar individual symptoms will easily guide us in finding the truly curative remedy in each individual case.

The close examination of the characteristic symptoms of the epizootic is of great service in now treating mankind suffering from a similar disease. Labor always brings its own reward."

(Adolph Lippe, M.D., Notes on the Epizootic, The United States Medical Investigator vol. 10 (1873), p. 169-172)

1874 - Clinical Reflections

I.

"A lady sixty-four years of age, for a long time an invalid, who had been relieved of a chronic diarrhoea by a homoeopathician in Belgium, who gave her highly potentized Sulphur, applied for assistance September 5, 1874. She complained of great debility, caused by excessive and frequent secretions of pale urine, and by profuse leucorrhoea; the discharge came away in a gush, and when she sat for a long time, the clots would fall to the floor. She was scarcely ever able to rise from a seat, on account of very severe pain in the right groin; she was obliged to bend and draw up the right leg with her hands, and after moving it to and fro by the hands, she could rise, when, having walked a few steps, the pain ceased.

One dose of *Lycopodium* 10^m (Fincke) was given on the 5th of September. On the 12th she reported improvement; the discharges were decreasing. September 15th the menstrual flow had for two days reappeared. Five years ago the same had happened; she was then very ill; was treated with "ice" applied continuously for days until the flow ceased. As she was now in other respects better, no new remedy was ordered, and the next day the flow had ceased. I have seen the patient once a week since, and the improvement has continued. Urinary secretions are now normal, there is no fluor albus, and the pain in the groin has disappeared; she can rise from a seat without pain. Nov. 20. Reports herself well.

Comments. - The object in relating this case is to show the success which results from following the plain teachings of Hahnemann. There is nothing in it to elate the compilers of analytical, domestic physicians, or the key-note hunters. The student of materia medica will probably take up "Hahnemann's Chronic diseases" and find symptom 860: "*Drawing in the groins, as if the menstruation would appear, in an aged person*"; and it would be proper to add a note to this symptom, viz. "Nine days after a dose of *Lycopod.* 10^m, which acted curatively, the menstrual discharge appeared, in an aged person (sixty-four years old), and disappeared without further remedy." And it is in this manner, and in this *alone*, that our materia medica is developed! And in this manner alone do we add to the knowledge of drug-action.

The choice of remedies was narrowed down to a very few. "Fluor albus coming away in gushes," has been marked under *Calc. c.*, *Lycopod.*, *Sabina*, and *Silicea*. The very profuse discharge of urine would call principally for *Lycopod.* and *Silicea*, but the aggravation of the pain in the groin "when rising from a seat," is only characteristic of *Lycopod.* The choice of the remedy was a very easy task, the totality of symptoms being under *Lycopod.*, but especially the last-named symptom, which was in no way necessarily connected with either of the profuse debilitating discharges, and, therefore, it was the characteristic symptom of the patient, and had also to be characteristic of the truly homoeopathic and therefore curative remedy. The new, and to the patient quite alarming symptom, the return of the menstrual flow on the ninth day, could only be attributed to the curatively acting remedy, and surely did not call for another; and, had the action of *Lycopodium* been interrupted at that time, the improvement would not only have retrograded, but the case would have been sadly spoiled.

Hahnemann generously laid before the profession fundamental principles based on the laws of Nature, and also practical instructions for their adaptation for the cure of the sick. As homoeopathicians we have accepted them, and the case herein reported was treated in accordance with them. "But," some of the readers say, "the statement is not couched in scientific language." "Hahnemann's teachings were good enough in his days," will be said by the men who clamour for "advance," and long to put Homoeopathy into a scientific livery, according to the progressive fashions in physiological discoveries, and the newest analytical researches in organic chemistry. To these opponents of the plain teachings of Hahnemann, we have a few words to say. Under the newly fashionable term of a more scientific Homoeopathy, we

understand an expression of a desire to modify and change Homoeopathy as taught by the master. In our simplicity we understand, under the term "scientific medicine," the knowledge for healing the sick. And if the teachings of the master, adopted by us, procure this most desirable end, what more do we want? Now, in this reported case, the fault-finders with the teachings of the master will ask, "Why no further ocular examination of the condition of the uterus was made? Why were the profuse discharges not analyzed in a scientific manner?" Why? All this had been repeatedly done before, by quite a number of scientific physicians of the physiological school, both here and abroad; and all the knowledge so obtained had no more assisted the physician in finding a curative remedy for the sick, than was at the command of physicians before or during Hahnemann's days. Will not these men of "progress backwards" define their progression by relating some cures under the light of new physiological discoveries and other revelations outside of Hahnemann's teachings? The profession desires "*illustrations*" results."

II.

On Sept. 10th, 1874 (the weather very hot), an infant male child two months old came under my care. He had been fat and plump, weight when born 13 pounds, and with the exception of a gastric disturbance with some brain symptoms when three weeks old, and for which he had received one dose of *Apis mel.*, he had been well. He has not slept all night, but cried; had a high fever; skin had been hot and was still hot when I saw him at 1 P. M. He had much thirst, especially for water; very frequent extremely excoriating stools the past 36 hours; discharges green, *as if spinach were sprinkled on the diaper*, and if the stools when passed first looked yellow they very soon became green. At intervals he cried, and became quiet again after belching up some wind. The urinary secretions were profuse, appetite wanting; the child was fed on milk and farinaceous food, as the mother, who is otherwise a robust, fully developed woman, has had no milk with this, her sixth child, and never had any with the five former children.

I dissolved six pellets of *Argentum nitricum* C^m (Fincke) in two ounces of water and gave the child three teaspoonfuls of this solution at intervals of two hours. The following night the child slept better, had no fever and no thirst, stools less green, less excoriating, no medicine; the diarrhoea continued for another day, but as the child again took the accustomed food and looked much better, no medicine was ordered. On the fourth day the diarrhoea had ceased and the child remained well.

The characteristic symptoms of the case were the kind of passages "like flakes of spinach," the relief of pain after belching up wind, and the symptoms we added to those observed and related, but evidently belonging to the case; the stools are expelled forcibly and with much flatulency; were they otherwise expelled the appearance on the diapers would have been a different one. These three characteristic symptoms of the case: 1. Evacuation like spinach flakes. 2. Stools passed forcibly with much flatulency. 3. Relief of pain from belching up wind, had also to be characteristic of the remedy it a cure under the homoeopathic treatment was to be accomplished. The evacuations in children looking like flakes of spinach are of frequent occurrence in this locality, and where is the remedy for this peculiar and generally dangerous diarrhoea to be found?

There are a great many remedies that have caused and cured green stools; but these green stools are all of a different kind from the stools here described; and, from the appearance on the diapers, these flakes, spread over a large surface, must have been forcibly expelled by and with flatulency. On first sight *Sulphur* seemed to be similar, but the other usually characteristic symptoms of *Sulphur* were not present, and the green discharges (excoriating) of *Sulphur* are of green mucus. To our knowledge there is but one case reported in which these

discharges looking like flakes of spinach has been cured, and then by means of *Argent. nitr.* This case is to be found in Vol. II of the "Oesterreichische Zeitschrift," p. 26.

The schema to *Argent. nitr.* does not contain this symptom. All the gastric derangements caused by *Argent. nitr.* are generally accompanied and relieved by eructations. And a symptom 413 (Oest. Zeitsch. Vol. II, p. 94) corresponded with the second characteristic condition of the case; therefore the characteristic symptoms of the case being found to be also characteristic to *Argent. nitr.*, and guided by the Law of the Similars in the homoeopathic treatment of the sick, *Argentum nitr.* was administered, and in this, as in many other cases, the improvement after the truly homoeopathic remedy has been given, was very gradual, manifesting itself to the observer at once; but the probably most apparent symptoms did not fully disappear till after the third day, during which interval the dynamic remedy slowly but surely developed its curative powers, just as it will do if taken by a healthy person. (See also case IV.)

Comments. - The symptoms actually belonging to the pathogenesis of *Argentum nitricum*, "*Stools green and like flakes of Spinach*," is not to be found in any of the professedly complete compilations representing our materia medica. The schema of *Argent. nitr.* as published in the second volume of the "Oesterreichische Zeitschrift" omits it, and of course Hempel copied the omission. The first omission is probably owing to the aversion of compilers to admit symptoms not on record among the provings, but a clinical experience; and it is very likely that the *Argentum nitr.* was administered by Hirsch in rather crude doses, both internally and by injection, because he "diagnosticated" ulceration of the bowels; but as his description of the case, and his rendition of the symptoms, as he found them, are very minute, he thereby, probably, accidentally gave us the characteristic symptoms of *Argent. nitr.*

The cure he actually performed by means of *Argent. nitr.* very probably belongs to that class of clinical results which really should be termed "accidental"; and had he been satisfied to report merely the supposed nosological condition cured by that remedy; had he not given such a minute description of a generally fatal case of diarrhoea, dependent, as he thought, on "dentition," we would never have known this very characteristic symptom of *Argent. nitr.*, and it will lead the true "healer" to accept and utilize it, provided other symptoms also show *Argent. nitr.* to be homoeopathic to the case; and among such additional characteristic symptoms, we venture to suggest, stands foremost the relief of gastric symptoms, or from pains in the abdomen (cessation of crying) after an eructation.

III.

A boy three years old came under my care on the 20th of September, 1874; had always been under my care when sick. He had enjoyed good health all summer while out of town; on his return, was taken sick with diarrhoea, gradually growing worse. He had ten to fifteen evacuations in twenty-four hours; stools clay-colored, thin, with lumps in it, much straining; the last four evacuations contained streaks of blood; appetite much impaired; no thirst, no fever; there was nothing characteristic in the symptoms to indicate a remedy. On further examination the tongue showed insular large patches. These insular patches on the tongue have been observed under *Ginseng*, *Mancinella*, *Kali bichr.*, *Natr. mur.*, and *Taraxacum*. When five months old this boy had suffered from great constipation, stools too large in size, and it was very painful to expel the large shaped faeces. He had shown then the same insular large patches on the tongue, and was then relieved of the constipation and these patches by *Kali bichr.* The characteristic symptoms of the patient were again these same insular patches, and they again did indicate the same remedy.

The boy received six pellets of *Kali bichr.* C^m (Fincke) on his tongue at 4 P. M. Had a restless night, frequent evacuations, streaked with blood, till morning, when he passed no

more blood. I saw him 11 A. M. on the 21st September; he looked brighter, was more playful, had taken more food; tongue looked better; no medicine. Saw him on the 22d September *well*.

In looking over the pathogenesis of *Kali bichr.*, as published in the Symptom-Code," and the Vienna Provings, no mention of that tongue with insular patches will be found. When a symptom appears after administering a carefully chosen remedy for the cure of the sick, formerly not known to belong to the remedy, and which also *disappears* as the sick improves under the dynamic action of the remedy, or, if a symptom not known to belong to the otherwise well indicated remedy, also disappears under its action, the probabilities are very strong that this new symptom, caused and removed by the dynamic curative action of the remedy truly and fairly belongs to it, and should be added to the pathogenesis of the remedy to test its correctness; and if the only reliable test, the clinical experiment, has confirmed such a symptom, it may be so marked and be incorporated into our materia medica. And in reporting cases of cures accurately and truthfully, confirming doubtful or solitary symptoms, or showing the confirmation of new symptoms only obtained through clinical observations, we convey new and valuable knowledge, and help to add new reliable data to our own materia medica. These insular large patches on the tongue, especially when accompanied by constipation, had frequently disappeared with the constipation under the action of *Kali bichr.*, and the observation induced us to add this symptom to the pathogenesis of *Kali bichr.*, which further experience has proved to be reliable.

IV.

A child aged two years, of feeble constitution, had been sick all summer with boils on his head and an occasional diarrhoea, and had been treated by ostensible homoeopathy with alternate tinctures. I was requested by the family physician, who had been absent during this treatment, to see it on the 1st of September, 1874. The greatest complaint of the child was a very sore mouth, ulcers on the tongue; it was not able to take food; *Nitr. acid*, 50^m (Fincke) was dissolved in water and given to her for twenty-four hours, once in two hours one teaspoonful. The mouth became better and the child again began to take food; but on the 8th of September I was requested to see her again as she was worse. Mouth differently sore, the ulcers had disappeared, but the mouth was full of aphthae, especially the tongue; she had lost flesh; diarrhoea had also set in, with fever at night and much crying which ceased as soon as she had belched up some wind. The stools looked as if spinach had been dashed over the diapers. Six pellets of *Argentum nitr.* C^m (Fincke) were dissolved in half a tumblerful of water and was administered a teaspoonful every two hours for twenty-four hours. I saw the child again on the 10th of September. The stools were less frequent and had lost the former appearance; they were more consistent and yellow. The tongue had begun to clear off from the tip. She took some nourishment and looked better. No medicine. Saw her again on the 13th of September and found the improvement continuing. The attending physician told me on the 20th of September that she was quite well and had needed no other medicine."

(Adolph Lippe, M.D., Clinical reflections, The New England Medical Gazette vol. 9 (1874), p. 555-561)

1875 - Clinical Reflections

I

"In No. 12, Vol. IX, of this journal we published some clinical reflections, endeavoring to illustrate what to us appears the proper, nay, only manner of applying the elementary and fundamental principles of our school clinically, and also the only manner of developing and augmenting our knowledge of drug action.

We asked this: "Will not these men of *progress backwards* define their progression by relating some cures under the light of new physiological discoveries and other revelations outside of Hahnemann's teachings? The profession desires 'illustrations,' 'results.' "

We did not ask in vain. There came to us the *United States Medical Investigator*, of Jan. 15, with a paper by our learned friend, Prof. S. Lilienthal, on "The Homoeopathicity of Remedies Illustrated by Their Physiological Action"; and this paper was continued Feb. 1 with a slight change of front, viz. "Physiological Action of Homoeopathically Selected Remedies illustrated." It might be considered hypercriticism were we to enlarge upon this "change of front," but we guess our learned friend found the position he first assumed not tenable.

Now, in seeking to illustrate his position, he is good enough to take up our *Argentum nitricum* cases, which were especially published to call the attention of the profession to the fact that *Argent. nitr.* was *the* remedy when there were present, in cases of cholera infantum or commonly called "summer complaint" of children, stools green and like flakes of spinach, expelled forcibly, together *with* relief of pains after an eructation. The professor asks, "Is it wrong, when we study the case from another aspect, and consider the decomposing of the food as the cause of the green stools with flatulency upward and downward? We know that in the irritative diarrhoea of dentition, and especially during hot weather, the whole nutritive apparatus, including the ganglionic nerve centres, become affected, sanguinification must become impaired, and imperfect blood deranges the action of the brain and spinal cord; hence the convulsions as well as the stupor." It is surely right and proper for every "healer" to study every case from any aspect he thinks proper and conducive to "success"; still, we look upon this disorder from an entirely different aspect, considering it only as a form of disease; indeed, we know it to be an acknowledged fact that during hot weather, and during dentition, children in their second summer are subject to two distinct forms of diseases resembling one another very much; the one form (hydrocephaloid) originating in congestions, inflammations, and ending in effusions of the brain, the other originating in disturbances of the nutritive apparatus (irritative diarrhoea). In both cases we find vomiting and diarrhoea; but what deductions can we draw from all such speculations? Do they bring us any nearer the finding of the curative therapeutical agent? And if we follow the indicated logic of our learned friend, *Argent. nitr.* cured because it checked the decomposing of the food, and that being accomplished, the stools were no longer green: that is of course plausible, but leads to no true knowledge therapeutically; and why? Because the very greenness of the stools by itself, while it may be a green evidence of the decomposing of the food, does not always - nay, but seldom - indicate *Argentum nitr.* Green stools indicate in turn *Arsen.*, *Bellad.*, *Chamomilla*, *Cupr. ac.*, *Dulc.*, *Ipec.*, *Merc.*, *Paullina*, *Pulsat.*, *Podoph.*, *Sepia*, *Sulph.*, *Verat.* each, etc. etc.

And each one of these medicines has its own characteristic symptoms: these *we* seek to find; these are not speculative chimeras; these characteristic symptoms are fixed facts, and the knowledge of them leads us to "success." And we can reduce the great characteristics to a very few words. These are to be found under

Argentum nitr., green stools like flakes of spinach.

Arsenic, stools green, watery, very offensive.

Belladonna, stools green, with hot head and cold feet, and profuse micturition.

Chamomilla, stools green, mucous, mixed with the faeces (the child wants to be carried).

Cuprum acet, stools green, with very painful vomiting.

Dulcamara, stools green, with mucus from catching cold during hot weather.

Ipecacuanha, stools green, like grass.

Mercurius, dark green stools (with tenesmus).

Paullina., stools green, without odor.

Pulsatilla, stools green (containing bile) at night.

Podophyllum, stools green, worse in the morning.

Sepia, stools green, smelling putrid or sour.

Sulphur, stools green, mucous (excoriating), worse in the morning.

Veratr., stools green, watery (flocculent).

Now, having shown that green stools by themselves do not indicate any remedy especially, or anything else in general, we repeat our former questions, and should really like to know how any of the boasted physiological discoveries or other revelations outside of Hahnemann's teachings can aid us in our therapeutics. And in order not to be misunderstood, we will again state that we by no means deprecate the new discoveries in *all* collateral branches of the medical science; that we have them *subservient* to the elementary and fundamental principles belonging to our school; that we have been and are very diligently seeking for "characteristics" both of the sick and the remedies, and impliedly acknowledge the necessity of knowing, for instance, the characteristic symptoms of a certain form of disease, that we may the more certainly appreciate the characteristic symptoms of the sick, which of course are just such individual symptoms as do not necessarily belong to the form of disease from which he suffers, and on that very account belong to him individually, and therefore are characteristic in that especial case.

But our learned friend desires to let us know that such a practice is not Homoeopathy at all, superfluous labor, unscientific (?). He proposes to illustrate that physiological conditions and diseases are cured by Homoeopathy because of the physiological action of the remedies only; that because the physiological conditions of the sick and the physiological action of the remedies were known to the healer, he cured under the law of the similars. This brings us back exactly to the *ante-homoeopathic* times ; it brings us back to two false and erroneous propositions, - first, that we are really in the possession of the physiological knowledge determining the changes that have taken place in the various organs and tissues during an attack of sickness; and second, that we do know what physiological changes take place in the organs and tissues of the provers of drugs. And the learned professor asks the followers of Hahnemann to put on *that livery*, a falsehood before and a falsehood behind, stitched up for the parade-ground, especially the "lecture room." And we will just now show the learned professor where he plausibly imposes on the school to which he professes to belong, and where he begins his "departure." Prof. Lilienthal, impressed with the necessity of showing off by quoting eminent men like Headland, Kramer, Mossa, Bayes, Grauvogl, never, never Hahnemann, and writing the physiological livery up, - showing, in fact, what everybody knows, that if a remedy is truly homoeopathic to a case, the physiological disturbances cease, - says, among other things, - and with this we cannot find fault, but are determined to show that truth and error can be printed on the same page of a journal, - he says, in No. 7, Vol. X, of the *Hahnemannian Monthly* (February, 1875), page 302, "Three distinct factors are necessary to produce a cure." One and three are all right; but he interlards them, *characteristically*, with a grave error, and says, second, "The exploration of the effects of the medicine, *i. e.* "to find out the action of a certain remedy on certain tissues." Does the learned Professor of Clinical Medicine really ignore Hahnemann, his teachings, his Organon, and the twenty paragraphs, from 120 to 145, treating on the "Proving of Drugs"? Does he really invite us to a concert of organ-grinders, while he and his friends *burn* the Organon and all of our Materia Medica containing the conditions, as there are, the times of the day, the ameliorating or aggravating influences on the various symptoms, or the concomitants? My learned friend surely knows that such a Materia Medica as he offers us, containing *only* the action of remedies on certain tissues, would not be worth "*a continental*" to us. Or does the learned professor say, Modern Science teaches the various physiological changes in the various organs and tissues during disease; modern Materia Medica teaches the action of remedies on certain tissues, and the Law of the Similars is "the law"?

That is not Homoeopathy. Selah!"

II

"On the 28th of March, 1875, we were summoned to see a young gentleman, twenty-three years old, some sixteen miles from town. He had contracted a severe cold while exposed to a deep snow in the northern part of the State, during the previous week; had come home feeling badly, and then took some *Nux vom.* On the 27th (the previous Saturday), at 7 a. m., he had a chill, and severe stitches in the right lower side of his chest. He took (home prescriptions) *Aconite*, later *Bryonia*, and the fever and headache increasing in the evening, *Belladonna*; became rapidly worse.

When I arrived at 2 p. m. I found him sitting up in bed; respiration irregular, short, superficial and painful; could only utter a word at a time; respiration 35 per minute; pulse small, hard, 135 in a minute. Upon carefully examining his chest, the lungs were found to be inflamed with the exception of a very small portion in the left upper part of the lungs; the pain he only called intense soreness, with occasional violent darts in different parts of the lungs. He had sat up in the same position all night; could not even have a pillow put against his back, which he says suffocated him. The diagnosis of the disease was very easy, - an acute case of double pneumonia. The diagnosis of the remedy was not quite such an easy task. The tongue was becoming dry, thirst moderate, desired orangeade, not water. There was no particular remedy indicated, and the question of a student of medicine but recently asked came back to my memory. The question was, a professor of clinical medicine told us, If the pulse rises to 150 per minute on the second day of pneumonia the case is fatal, - give it up: is that so? And my response was, Certainly not; although undoubtedly such cases are very grave. Finding myself not in the possession of any *characteristic* symptoms of the patient to guide me in the diagnosis of the remedy, the most natural thing was to obtain more, - *all* the totality of the symptoms. The question was then asked as to the urinary secretions, and the chamber was produced. Ever since he complained of the inflammatory chest symptoms on Saturday, 7 a. m., the urine was very dark and had become more "frothy," - looked like *yeast*. This symptom does not necessarily belong to the disease, as we shall show by another case of pneumonia, presently. It belonged characteristically to the patient, and as uncertain as the diagnosis of the remedy seemed to be before this additional symptom came to light, now we had not the slightest doubt as to the remedy. The patient received one single dose of *Lycopodium*, fifty-thousandth potency (Fincke).

March 29, twenty-four hours later, he was again visited. He was in a recumbent position, had much less pain, pulse 96 per minute; had a restless night, but said, "I feel much better." Urine less frothy, not so dark, and a slight cloud in it; profuse perspiration during the night; no cough. No medicine.

March 30, visited him again. Improvement continued; had slept some, and says, "I feel better." No appetite, less thirst.

March 31, visited him again. Had coughed a good deal during the night, but had less pain in his lungs; urine very turbid and no foam on it; sputa frothy. Gave him one dose of *Phosphor.*, one hundred-thousandth potency (Fincke).

April 1, I found him improving, asking for food, which he relished. The lungs were now quite free from inflammation, and on percussion a dulness was found only on the lower part of the right chest, where the first inflammatory symptoms were observed. The patient gradually recovered, and it was not found necessary to give him any more medicine till the 1st of May, when he complained of perspiring too easily when exercising. He then received one dose of *Sulphur*, 100m, and is now, May 20, as well as ever he was.

What we desire to show by this case is this: 1. That the gravest cases of disease are amenable to homoeopathic treatment. 2. That the highest potencies of strictly homoeopathic remedies

will cure grave cases of disease. 3. That the diagnosis of a disease can have nothing to do with and must not influence the therapeutics to be applied in a given case. 4. That as homoeopaths we must diagnosticate remedies and not diseases. 5. That the physiological livery, under which the materialists of the allopathic school are bound to shape their therapeutics on the bases of the diagnosis of the disease, must, *by us*, be discarded as unbecoming our calling, as useless, as pernicious, as much leading to error now as when it was described by Hahnemann, all the new discoveries in physiology of which we hear such boastful accounts to the contrary notwithstanding.

Now, in this case the only characteristic symptom of the patient not necessarily belonging to the form of the disease with which he was sorely afflicted was the peculiarly frothy urine. This urine has been caused and cured by Lachesis, Lycopodium, Chenopod., Chinin., Senega, Spongia, Berberis, Allium cepa, Croton tigl., Laurocer. The choice of remedies could only be between Lachesis and Lycopodium, both having similar chest symptoms. The disease originated in the right side and from there went to the left side, and this determined the choice for, Lycopodium as Lachesis has just the reverse symptoms, i. e. symptoms extending from the left to the right side. To diagnosticate a remedy because of its characteristic symptom that the disease goes from one side to the other or from below up, or *vice versa*, is Hebrew to the unfortunate blind slave in the glistening physiological livery. How would he have found the curative remedy in this grave case?

On the 29th of March another case of pneumonia came under my care, so different from that above described that it will be quite in order to report it. A woman had been indisposed for days, and at last could not rise. On being called to her I found a corpulent woman forty years old, a stranger in a strange land, although under the kindest of care; she was much depressed, and despairing of her recovery, fearing never again to see her child and relations in Europe. She complained of violent stitches in the left side when breathing or when moving; cannot move the left arm without much pain; tongue heavily coated, yellow; much thirst for water; urine dark and clear. Pulse 120 per minute. Gave, 10 a. m., three doses of *Bryonia*, 20m (Fincke). to be taken every two hours. She broke out into a very profuse perspiration, which was so unpleasant to her that she arose at night in a very cold room and changed her clothes. The great relief she had experienced while perspiring did not last long, and I found her suffering more on the next morning; repeated the *Bryonia* without effect.

On the 31st she was much worse, had coughed a great deal all night, sputa streaked with blood, had perspired all night but the perspiration was cold and clammy; she had passed a great quantity of pale urine, the tongue was still coated but very flabby, showing the indentations of the teeth. Feels very weak. Gave *Mercurius vivus* 50TM (Fincke) a dozen pellets dissolved in half a tumblerful of water, a teaspoonful of this to be taken every two hours. The improvement in her condition was apparent in twenty-four hours, but the medicine was continued for forty-eight hours, when she was much better; perspiration had ceased, the excessive discharge of urine was very much diminished, the tongue less coated and less flabby, the expectoration less, and more solid, no more streaks of blood in the sputa. Pain in the chest had ceased and the appetite returned. She made a rapid recovery.

Here are two cases of pneumonia, - a disease then raging as an epidemic in this city: in one case the inflamed lungs are accompanied by a secretion of scanty and frothy dark urine, in the other case by a profuse secretion of a pale urine. Now we ask the advocates of the physiological livery, Should we leave these symptoms unnoticed because they really do not belong to the disease proper, and shall we ignore Hahnemann's teachings that " the *totality* of the symptoms constitutes the disease " ?

It will be asked, Why did you give the single dose in the first case, and then in the second case repeat the medicine so often? The reason why we did so, and why the result was all we could

expect, is this: In the first case the patient was all-confiding in the treatment; was very sure he would be cured, because he had always, as far as he could remember, had just such strict homoeopathic treatment from his old medical friend now prescribing for him; his mind was calm, undisturbed; he was kindly, nay, affectionately cared for under the parental roof; had no cares; all was bright around him. There was no reason why the truly homoeopathically selected remedy should not develop its curative powers when administered in a single dose.

In the second case, the mind of the sick woman was not calm; she did not expect to recover; she had before her vision her death in a strange land far away from all her kindred. Of medicine she knew nothing; had really no opinion, and only patiently but not confidingly submitted to the treatment of the family physician. This disturbed state of her mind would surely interfere with the action of a single dose of a remedy, therefore the repetition. She was not as ill as the first patient, but mentally in a less impressible condition.

And now we owe an apology to some of our professing colleagues and professional brethren, who so charitably characterize our humble efforts to testify in behalf of Homoeopathy, as taught, promulgated, and practised by Hahnemann. And this apology is due to Dr. P. Touset, and the *British Journal of Homoeopathy* endorsing him and without comment publishing from Touset's lectures in their last number (April, 1875), as a leading article, such sentences as will be found on page 200: -

"But what the partisans of these eccentric dilutions call clinical experience is limited to shame-faced affirmations void of proof, or else to the publication of cases without diagnosis, without sufficient details by which they might be controlled, and for the most part so ridiculous that the Homoeopathic Society of Paris did not permit them to be published."

That is "liberal," to be sure; still, if the Homoeopathic Society of Paris declines to publish cases like the above, it will not do to stigmatize the writer who reports his cases to his brethren a shame-faced wretch, or unable to diagnosticate a case, while surely Dr. Touset's brain is much muddled about diagnosis. He deprecates the treatment based on a name of a disease, but demands that it must be based on the diagnosis of the disease. If Dr. Touset and the learned editors of the *British Journal* have no time or taste or capacity to read and comprehend Hahnemann's Organon, pray let them read a very short paper by Hahnemann, "The Genius of the Homeopathic Healing Art," preface to the second volume of Hahnemann's "Materia Medica Pura," second edition: "Allopathy diagnosticates diseases, Homoeopathy diagnosticates remedies."

Another apology is due the *British Journal* itself, *vide* April No. 1875, page 344. The learned editor must have been sorely tried! He actually, for once, has taken notice of our humble efforts to communicate to our brethren "our experience." It must be our fault, to be sure, that our British friends have utterly misunderstood us. They say, "The patient *happened* to recover." That is charitable! The cures made by Homoeopathy are all accidental recoveries and the failures of eclectics are all "Divine ordinations." Let it stand so; and while these happy accidents occur whenever we allow ourselves to be guided by the infallible principles so plainly repealed to us through Hahnemann, and, while we have never seen permanent good results - cures - from eclectic treatment, we shall hold fast to principles, and expect no "charity" except on the cover of the *Journal*. "In omnibus charitas "; and in charity I say, Behold, they know not what they are writing about."

III

"The object in publishing a case of sprained ankle cured by *Prunus spinosa* is to illustrate our individual conceptions of homoeopathic therapeutics, guided by the principles governing that school of medicine.

A young lady (sixteen years old) had jumped out of a carriage, the horse, driven by a lady friend, running off. The ankle was examined by an experienced allopathic surgeon, who found no dislocation or fracture. The left foot having swollen a great deal, by his advice arnica tincture was dropped very sparingly into a quantity of water, and bandages dipped into this solution were applied. The young lady came home on the third day after the accident, and her left ankle and foot swelled very much more after she had been compelled to walk from the railroad cars to her carriage. I applied a packing of hot-water cloths, bandaging the ankle and foot for forty-eight hours, and gave her *one* dose of *Bryonia* 10m. The swelling and pains were thereby much lessened, but she was not able to stand upon the left foot, and other new symptoms developed themselves. The breathing became rapid; great oppression of the chest, with constantly recurring desire to take a long breath; she felt as if the air she inhaled did not reach the pit of her stomach, and till she could force the air so far down she had to yawn and try to take a deep inspiration.

The first impression in such a case would naturally enough be to find a remedy for the chest symptoms, remove them first, and later attend to the ankle; or to find a remedy for each of these ailments, and give the two corresponding remedies in *alternation*. If ever a case presented itself in which *alternation seemed* excusable, here was the case; but Homoeopathy does not admit of such irrational practice, and we were therefore compelled to find the remedy if it was to be found. Who seeks will find! We found under *Prunus spinosa* **all** the symptoms, and even under the very first proving of it published in the Archiv of the Homoeopathic Healing Art, Vol. XIV, part 3, - a proving by Dr. Wilhelm Wahle. Symptoms 146. Heaviness, and oppressed in the chest. S. 148. Anxious, short breathing. S. 149. *Sensation of heaviness and anxiety in the lower parts of the chest compels him to breathe frequently and deep.* S. 155. The breath appears to be checked in the pit of the stomach. S. 225. On the external side of the left foot joint sensation as if sprained. S. 226. Sensation as if sprained in the left foot joint.

Here were found all the symptoms of the case, and on the eighth day after the injury had happened she received one dose of *Prunus spinosa* 200, at 11 A. M. The following night she could sleep but very little; the difficulty of breathing increased, and compelled her *to sit up all night*. And here again arose a great question. Was her disease worse, or was this great aggravation attributable to the seemingly small and very insignificant dose of the remedy? Her left ankle was also more painful and much more swollen after this sleepless night. This often-recurring difficulty - to know whether the disease is worse, and the administration of another remedy advisable, or whether the medicine caused this increase of suffering, - is only a real difficulty if we are uncertain about the undoubted correctness of our prescription. As in this case only the previously existing symptoms had become worse, and as these symptoms unmistakably indicated *Prunus spinosa*, and as we were sure of having made a very careful selection of the remedy, there was nothing else to do but to wait. The next night was much better: she had slept in her bed. The respiratory difficulties gradually subsided, and later the foot and ankle improved slowly. She received no more medicine, and is well; walked out a fortnight after she took a single dose of *Prunus spinosa* 200.

What deductions can the homoeopathician draw from this case? That the principles on which our school of medicine rests are "infallible"; that the application of the principles taught by our school of medicine, and to be found in Hahnemann's writings, is an infallible guide in our therapeutics and always leads us to a cure; that the provings of *Prunus spinosa* by Dr. Wahle are reliable. As a precedent, the case proves nothing; and if any one rashly should expect to cure all cases of sprained ankles (left foot) with *Prunus spinosa*, either in a potency or a tincture, he would be sadly disappointed. This same combination of symptoms will rarely occur again, and a wide field lays open here to be worked out by our scientific friends. Let them stride out, clad in the physiological livery, and let us know what internal injury said patient

received while leaping from a carriage and first finding her ankle sprained and then attacked with what *science* might call a concussive asthma.

Will not one of our learned friends grant us the desired, so-often-asked-for explanation of a *better* way to find, by the scientific way opened to us by the physiological discoveries of the day, the curative remedy in just such a case? All the communications by a multiplicity of *attempted* "illustrations" are "hearsay" testimony, that we reject. What we want to know is the reasoning process, the argument, of the learned professors exhibiting the physiological livery. Can the learned representative of this new departure tell us, for instance, what was the internal injury which this young lady exhibiting such strange symptoms received? and if he does know that, how does he find the curative remedy in a better way than was ours? Again, if the physiological road to cures is a better one, more scientific, *followed by better results*, than the strictly homoeopathic treatment, would it not be kind, benevolent, and highly meritorious to let the healers (doctors) know it, that suffering humanity might be benefited by such knowledge?

Till then, till Homoeopathy has been "superseded" by something better, it would be wisdom to try to apply it as Hahnemann taught it, as his followers developed it, and as it has proved itself to be by far the most successful mode of cure if perfectly understood and faithfully practised. If the principles are true, they must be infallible, and be applicable in *all* cases of disease: if they fail, and something else is better, then Homoeopathy is a failure. And while we, in our ignorance, and with a sincere desire to learn "a better way" if there is one, take the freedom to ask the sage Professor of Therapeutics at the New York Homoeopathic Medical College, and at the same time editor of the *Quarterly*, another question, "What physiological changes, what form of sick physiology indicate 'bleeding'?" The learned professor will find Hahnemann's remarks on blood-letting in the 5th edition of his *Organon*, in a foot-note to the 12th page of his Introduction. Have the discoveries of the physiological authorities revealed some new (to Hahnemann and his followers), unknown facts, warranting, nay, demanding 'bleeding'? And is Hahnemann wrong when he says in his preface to his *Organon* (March 25, 1833), in a foot-note, "*Homoeopathy sheds not a drop of blood*"? or would he now modify his views, had he the light which was given to Prof. Lilienthal when he said in 1875, in public, "*I did bleed him until he breathed easier . . . it was the thing for the case.*" Again, when so much is said about the great modern discoveries in medical science, and the necessity of accepting these new discoveries, and applying them in our therapeutics, will not one of the friends of these departures do the profession at large the favor to remember that *we*, as homoeopaths, individualize, and do despise to deal in *generalities*? Will they condescend to individualize and *illustrate* their proposition - give testimony thereof, by their own knowledge? Till such testimony shows a "better way," let us hold on to Homoeopathy."

(Adolph Lippe, M.D., Clinical Reflections, The New England Medical Gazette vol. 10 (1875), p. 212-216, 244-249, 457-460)

1875 - Palliatives

"Dr. Wm. H. Holcombe, Professor of Clinical Medicine in the Pulte Medical College, President of the American Institute of Homoeopathy, and author of numerous works, has delivered and published an Introductory Lecture on "*The Philosophy of Cure.*"

In said lecture he says a good many clever things and some things that are not at all clever, nay, that are very erroneous and utterly at variance with the teachings of the school founded and promulgated by Hahnemann. It is our object to deal in this paper with only one of these great "errors."

Prof. H. says, "*It sometimes is a mercy and a duty to relieve pain by 'anodynes,' when it is excessive and uncontrollable.*"

Hahnemann devoted *nine* paragraphs of his *Organon* to the "palliative" treatment of diseases. He shows that the palliative treatment is just the opposite to Homoeopathy; he quotes allopathic authorities condemning it as injurious, and expresses his astonishment that medical men who see the evil effects of this palliative treatment have not thought long ago to do just the opposite of what in their hands proved to be so injurious to the sick. And what Hahnemann in paragraphs 56-65 so earnestly rejects is now again recommended to the students in a profess- edly Homoeopathic College as a practice of mercy, and even represented as "*a duty.*"

Does the professor find "authority" for this, his earnest advice, either in Hahnemann's writings or in Swedenborg's works, which he seems anxious to palm off on us as fundamental works on homoeopathic medicine? Nothing of the kind! It is a gratuitous attempt to falsify our school, an attempt to shield "lazy doctors." Under no possible condition are we justified in administering anodynes; under no possible condition can they do anything else but great harm. Let us take up the most hopeless case of sickness, a case incurable by its nature: the patient suffers severe, very severe pains; there is no longer any hope of effecting a cure. It is precisely here that it would be a mercy to save him from the greater suffering which necessarily follows the administration of anodynes; it is then, as ever, our duty to hold fast to "our principles." The administration of an anodyne for excessive pain is followed by an apparent cessation of it, to return more severe, as soon as the effect of the dose administered is exhausted. We repeat, and the pains repeat; but that is not all, - the poison does its work besides: the digestive functions are disturbed, and, worse than all, the intellect, the consciousness, the only spiritual part of the sick individual, - let us call it "mind," - becomes seriously impaired. Is that mercy? Are we in duty bound to destroy a person's "mind"? The true "healer," who not only makes professions of faith, but who has really comprehended and accepted the teachings of Hahnemann, *never stands in need of an anodyne.* In the course of time every physician will find himself in attendance on an *incurable* case; he will find himself so situated that it becomes his imperative duty to wait on the incurably sick to the end. Here it is that the great value of Hahnemann's teachings is fully appreciated, and that a strict adherence to our fundamental principle will be followed by most satisfactory results. The "healer" knows by past experience that the most similar remedy is also the greatest palliative. Under ordinary circumstances that similar remedy would have "cured the sick," but if such changes of tissues have taken place that a cure is no longer possible, the palliation may last for days, the same symptoms do not return again, the progressive or destructive process manifests itself now in a different manner, and a new selection of the similar remedy must be made - diligently to be sure; relief will follow again, and the sufferings of the sadly afflicted, incurable patient are in this manner wonderfully lessened, lessened to the last moment of the earth life. To be sure, this is a very *laborious* practice, requiring more frequent changes in the prescriptions as the vitality of the sick decreases, and each prescription becomes more difficult. But what of that? What are we here for? Why, we are here that we may heal the sick, that is *our duty*, and if we cannot heal them (make them well), to relieve their suffering; and we must spare no pains to learn to accomplish it, and earn the only reward which awaits the true healer, - the thanks of the cured, the blessings of those to whom we administer true relief.

Whosoever calls himself a homoeopathician, and administers anodynes, does so in violation of his professions, and who teaches this pernicious practice does so in violation of the principles of the Homoeopathic School of Medicine."

(Adolph Lippe, M.D., Palliatives, The New England Medical Gazette vol. 10 (1875), p. 359-361)

1877 - How to study Materia Medica

"The study of materia medica is one of the prerogatives of the Homoeopathic school of medicine. The failure of the predominant school of medicine to give the healer a reliable and useful materia medica, induced the founder of our school to search for means by which we might obtain a reliable knowledge of the sick-making properties of drugs to be used for sickness, removing purposes under the only reliable law of cure, the law of the similars. When Hahnemann translated Cullen's *Materia Medica*, and found that Cullen ascribed the curative powers of *Cinchona officinalis* (the great febrifuge of that day, as *Chininum sulph.* is the same in our days) to its both very bitter and aromatic properties, the light began to shine upon his great intellectual powers, and perceiving the absurdity (to this day persisted in) of claiming a drug to be a specific for a form of disease (ever verging), because it had occasionally (accidentally) relieved those suffering from it, he undertook at once to find in what manner *Cinchona officinalis* affected the human organism, by taking it himself. Stahl and others had called the attention of the physicians to the fact that the effects of drugs on the human organism could only be ascertained by provings on the healthy. It was left to Hahnemann to make the first great stride forward and carry out these, by others proposed and by him found indispensably necessary provings of drugs, it was left to him to give the world the beginning of a reliable pure materia medica. How to prove drugs was taught by him in his *Organon of the Healing Art*, paragraphs 120-145. Since Hahnemann's days, the materia medica has been greatly augmented, and whenever his admonitions "how to prove drugs" were followed, the additions proved very valuable; whenever other modes of proving drugs than those described, by Hahnemann were adopted, the results were unsatisfactory and unreliable. Several abortive efforts to smuggle counterfeit reports of provings into our materia medica were always immediately detected and repelled. As we are now in the possession of a large and reliable materia medica, the question arises "How to study it?" There have been many modes proposed: We find men reading our provings for various and differing purposes. There are those who merely seek to find out what organs and tissues are affected (Dr. Sharp), others seek to find in our materia medica forms of diseases, or an expression of the modern sick physiology (Dr. R. Hughes), again others go still further, and from the giddy height of modern scientific hypothesis, they desire to draw deductions, showing how even the blood is changed by this or the other drug, impliedly proclaiming that modern progressive science and modern pathology now elevated to a positive science, teaches us how diseases change the blood, or how the changed blood causes disease; there were others again who attempted to obtain a knowledge of our materia medica by committing or trying to commit to memory the whole of it, from *Aconite* to *Zingiber*, by reading it, forgetting that if even such a feat could be accomplished it would benefit one just as much for therapeutical purposes as the memorizing of a lesson of a language would teach the memorizer that language. To learn what organs, and in what (by symptoms) discernible manner they are affected, is only one part of the knowledge appertaining to our materia medica, but does by no means give us the full knowledge we need for therapeutical purposes; and the advocates of this new hobby (organopathy) impliedly contend that *all* the physician has to find out of the sick and his manifold ailments is to ascertain what organ, or organs or tissues are affected in a certain manner, (a hypothesis); and furthermore impliedly it is claimed that the provings of drugs have shown or should show plainly (by hypothesis) what organs or tissues they affect, and in what manner they are affected. Those who interpret our materia medica into a pathological revelation (a hypothesis) will necessarily desire to put on it and on our school the modern physiological livery, and for that end they have made an abortive attempt to pervert our materia medica into pharmacodynamics, a science based on erroneous hypothesis; but the real truth of the matter, and by these men fully admitted, is this, it is too painstaking a work to study materia medica and apply it under the rules laid down by Hahnemann; a shorter and easier way must be found; a labor-saving machine is proposed to be patented by the various inventors of new departures. All this new-fangled talk of these

inventors of a patented labour-saving machine amounts just to nothing at all; it is all adverse to the teachings of our school; the materia medica must be studied, and we shall now suggest the easiest mode to obtain the desired and needful knowledge. We start with this proposition: "Most knowledge of natural sciences is obtained by comparisons." Materia medica has by Hahnemann's efforts been destined to be elevated to an exact natural science. We know the human bones by comparing one with the other; we obtain the knowledge of antediluvian animals by comparing the bones of these otherwise to us unknown creation with the bones of other creatures living and past, and know then where to place them in natural history; we learn to classify them, are able to form a correct idea of their figures when living, and what place they occupied in the progressive development of creation and creatures. Without any further arguments we must come to the point. It is not possible to study all remedies at the same time; knowing one remedy well will enable one to study another remedy with more ease, and when a dozen remedies have been well studied, each following remedy will admit of easier study by comparing it with those dozen remedies already familiarly known. The point then is this: How to study the first remedy, and for our illustration we shall take up the first on the list, "Aconite", and we take it up because it is a less known, less understood remedy than any we know of.

A study of Aconite napellus

Each remedy has characteristic symptoms belonging to that remedy and to no others; it has also symptoms similar to other remedies, which by comparison will develop more characteristic symptoms, at the same time showing where the similar symptoms will call, under certain conditions, for another remedy.

How were these characteristic symptoms belonging to each remedy found?

First, the provings developed them, secondly, the symptoms were so found to be characteristic by clinical experiments, and we find the great observer Hahnemann points out to us in his materia medica and in his preface to Aconite these very characteristic symptoms.

Hahnemann says in that preface, "*It is essential to consider the mental symptoms, to see to it that they especially are very similar if Aconite is chosen as a Homoeopathic remedy.*"

And above he had said "*Aconite is especially indicated when, besides thirst and an accelerated pulse, there is present an anxious impatience, a not-to-be-constoled anxiety, and an agonizing tossing about.*"

The most characteristic symptoms we are here told on being introduced into the study of materia medica are *especially the mental symptoms*; when then, it is well known that Aconite is indicated in, and has often almost miraculously cured cases of pleurisy, measles, scarlatina, and croup, we are here, on the threshold of our studies, reminded that the names of these diseases are not a valid or reliable indication for Aconite; that this drug will only cure the many inflammatory fevers when these mental symptoms are present, and the observing and thinking student will, from the very outset discard all silly propositions to put on the physiologico-pathological spectacles for his reading of the materia medica; the student will forever quit to listen to the teachings of such perverters of Hahnemann's teachings who discard these characteristic mental symptoms, because they cannot account for their presence in one case and their absence in another case of apparently the same disease, or in what they see through their material spectacles, pathological conditions.

It is precisely this, (these, to the materialist, unaccountable mental symptoms) difference of symptoms which are induced in each individual case by the very individuality of the sick and for that reason are considered *characteristic* symptoms, which to the true healer are the true therapeutical guides, and characterize the difference between the true and the pretending Homoeopath.

We then have here four symptoms by Hahnemann designated as characteristic.

1. Thirst and an accelerated pulse.

2. Anxious impatience.
3. Inconsolable anxiety.
4. Agonizing tossing about.

How then, ask we ourselves as students, do these symptoms compare with similar symptoms of other remedies?

We find the first, *thirst and accelerated pulse*, under many other remedies, and even there we discern differences, the thirst of Bryonia for instance, is only requiring to drink at long intervals, while that of Aconite in conformity with its nervous excitement requires frequent drink; again under Bryonia a very large quantity is drank - but not often - while Aconite requires frequent, but not large quantities of drink.

May we not as students at once enlarge our knowledge by finding just the opposite conditions predominant under other remedies, as "accelerated pulse (fever) without thirst," or even with "aversion to drink," this we find especially under Belladonna, Helleborus, Hyoscyamus, Stramonium, Nux vomica and Veratrum, and going still a little further in our comparisons we find under Hyoscyamus much thirst with aversion to drink.

Second, *anxious impatience* is similar to Chamomilla and China. (Graphites).

They also correspond with Arsenicum to, third, inconsolable anxiety.

The opposite conditions, utter listlessness, half or total unconsciousness, we find under Belladonna, Opium, Phosphoric acid and Pulsatilla.

We have here the first great difference between Aconite and Belladonna, both great remedies in febrile affections, both utterly different in their mental symptoms and thereby not likely to be wrongly administered one instead of the other.

They are still further discernible, that while Aconite has, fourth, *agonizing tossing about*, we find that Belladonna has much more inclination to stupor, a quiet almost unconscious condition, to the more violent symptoms of Belladonna, its rage, biting, scratching, is not similar to Aconite.

How any physician professing to be a Homoeopathist can ever administer Aconite and Belladonna in alternation, when the first mental symptoms of both these drugs are so dissimilar, so characteristic, is to us utterly incomprehensible.

This agonizing tossing about is a kind of restlessness which differ from all other kinds of restlessness.

Apis mellifica has a similar tossing about, especially during the development of cutaneous eruptions, with suppression of the urinary secretions, but has not the agonizing anxiety; it has much more unconsciousness and a subdued moaning, a kind of whining mood, a more patient complaining.

Arsenicum has a restlessness quite different also, it is a restless desire to change the locality, room, bed, or even the chair he is sitting on, desiring to walk, but weakness compels the choice of another position.

Rhus toxicodendron has another restlessness, he cannot long remain in the same position and the thereby increasing pain is for a time relieved by a change of position.

Hahnemann gives us in the preface to Aconite another very important mental symptom. Hahnemann says, "Aconite causes all the diseased conditions which appear similarly in persons who have had a fright, combined with vexation, and it is also the most certain cure for these conditions; and farther on Hahnemann says, "Aconite is therefore indispensable during menstruation, when a woman suffers then from fright or vexation, without this great calming remedy, such mental affections are very apt to cause an entire suppression of menstruation.

The possibility of mental affections (which cannot be tangibly demonstrated) causing such a suppression, cannot be denied - much less explained - we only know two facts, (1), that under the effect of fright or vexation, menstruation can be suppressed, and (2), that a timely dose of Aconite will cure the sufferer and prevent the suppression, and will even cure it speedily by restoring the discharge if it is already suppressed.

Pretending Homoeopaths who cannot elevate themselves above the prevailing and so pernicious materialism of the common school of medicine, not only ignore Hahnemann's teachings but with malice aforethought (and we shall show more of it), persistently pervert his teachings, and make a caricature out of our materia medica.

Vide Manual of Pharmacodynamics, Prof. Hughes, M. D., Vol. I, page 44, *Aconitum napellus* "In suppression of the menses *from a chill*, and in the circulatory disturbances (B. T. C.) which often attends commencement of menstrual life!"

Other remedies have similar symptoms; Ignatia will relieve the effects of fright with anger, anguish and grief.

Gelsemium effects from fright with grief.

Opium, sudden effects from sudden fright.

Long suppressed menstruation from fright with fear we find under Lycopodium.

When we know these few symptoms we find ourselves well prepared to further study the pathogenesis of Aconite, always remembering from first to last that the presence of these first four mentioned mental symptoms is positively necessary if we expect any good and curative results from the administration of Aconite.

It is here in place to call the attention of the student of our materia medica to the fact, that those by Hahnemann pointed out characteristic symptoms have been entirely set aside and have been omitted by such men as Dr. Richard Hughes, a man who wanted to pervert Homoeopathy into a sort of Eclecticism when he published his so-called Manual of Pharmacodynamics; and as Dr. Hughes arrogates to himself the title of a Homoeopathist, it is well for the student of Homoeopathy to know that this work is a perfect "caricature."

When Dr. Hughes omitted Hahnemann's so very characteristic mental symptoms, he did so with malice aforethought, his intention was to bring our school, by and through a perverted materia medica, down to the level of the common understanding of the materialists in the profession.

How is it possible for a professing Homeopath to print such material absurdities as we find on every page, vide page 44. "In apoplexy and in puerperal convulsions where there is much arterial excitement, Aconite will do everything for which the lancet used to be thought indispensable."

According to Prof. Richard Hughes the mental symptoms are of no account, but the arterial excitement and the thought of an indispensable lancet, are the characteristic indications for Aconite.

Such blabbing may reach the Eclectic ear, but it is surely not sweet music in the ears of the Homoeopathician, it is a horrid discord.

Again on page 41 the student will find Dr. Hughes says, "The sphere of Aconite is quite unrivalled as an "Antiphlogistic."

He then attempts to define the sphere of its action.

He says Aconite has no influence upon the blood itself.

Aconite will do little for a fever which is symptomatic of an acute local inflammation.

But really Dr. Hughes never showed his malice aforethought with such unblushing audacity than he does on page 42 when he quotes Hahnemann as saying, "Aconite cures quickly pure

inflammatory fever, and in four hours after the administration of the Aconite in the morbid states in question, all danger of life is past."

Why does Dr. Hughes so intentionally leave out of this very preface of Aconite (from which he quotes) the every characteristic symptoms of the morbid states in question, (mental to be sure, and therefore to him incomprehensible, and therefore again by him deemed useless), which Hahnemann pointed out as indispensably necessary to be present when any good effects of Aconite as a remedy for pure inflammatory fevers can be expected?"

If the characteristic symptoms (mental) are not present no inflammatory fever will yield to Aconite, and all of Dr. Hughes quotations of Hahnemann are "insincere" allusions to our master.

We will, for the present drop, this unpleasant subject and return to the mental symptoms of Aconite.

It has with many other drugs "Delirium", the characteristic of the Aconite delirium is its ecstasy, and we find it less often indicated; these are for delirium, Belladonna, Hyoscyamus, Opium, Stramonium, or Veratrum, and each of these remedies have their own characteristics. Aconite has forebodings of death with fixing the day, which belongs to it alone and is often indicated during pregnancy or at the beginning of parturition, when such fears are manifesting themselves.

The fitful moods of Aconite, changing from mirthfulness to weeping, resembles Ignatia, but all other conditions differ from that drug.

We shall now proceed to see how the different organs are affected by Aconite.

Under this head we find first (sensorium), vertigo, with blackness before the eyes, bleeding of the nose and aggravated on rising.

Other remedies have vertigo.

The Belladonna vertigo has flickering before the eyes, with nausea and is aggravated on stooping.

Nux vomica has vertigo with vanishing of sight, humming in the ears, with unconsciousness and fainting, or as if everything was turning round in a circle, (the bed on which he lies), when walking or stooping, aggravated after meals.

Phosphorus has vertigo with a sensation as if a veil were obstructing the sight, with loss of ability to think, as if he should fall and did not know where he is, aggravated at noon.

Theridion has vertigo on closing the eyes.

Thuja has vertigo on opening the eyes.

We find under Aconite congestion to the head, with fullness and pulsation in it, with heat and redness of the face or with burning in the head, pale face and perspiration or burning in the head as if the brain was moved by boiling water - all of these symptoms accompanied by great anxiety and restlessness.

Similar congestions are found under Belladonna but instead of the Aconite characteristic restlessness and anxiety, we find again the characteristic Belladonna stupor and besides an aggravation on stooping or laying down.

Under Glonoine we find a similar congestion, relieved when laying down and much aggravated when sitting up.

Under Pulsatilla we find also congestion to the head, but accompanied by its characteristic symptoms of yellowish complexion, chilliness and aggravation in a warm room.

Under the eyes, we find Aconite to have both aversion to, and desire for light, the latter condition is only so far to be found under Ammonium muriaticum, Belladonna, and Stramonium.

We find inflammation of the eye with heat burning and dryness under Aconite, while Euphrasia has with the inflammation, always also a profuse secretion of hot, burning water, and Pulsatilla, a profuse muco-purulent discharge from the eyes.

Aconite has red, hard, swollen edges of the eye-lids similar to those of Thuja and Pulsatilla, but both the latter have not the same dryness of the eyelids, we find under Aconite.

Under the ears, we find Aconite to have great sensitiveness of hearing, intolerance to noise, and we find very similar symptoms under Cannabis indica. which has not the intolerance to noise, but rather the annoyance of hearing very distant sounds very clearly, voices far away sound as if spoken in the nearest proximity.

There are under Aconite tearing, especially in the left ear, very similar to Pulsatilla but very different in their respective mental symptoms.

Under Aconite we find dryness of the mouth and tongue which is under many remedies, we here remember Nux moschata which has dryness of the mouth and tongue so that the tongue cleaves to the roof of the mouth, without thirst, or Arsenicum, with great blackness of the tongue, which is also under Lachesis, Secale cornutum, and Nux vomica.

In the throat we find under Aconite, angina with redness of the parts, tearing or stinging in the fauces with almost entire inability to swallow, hoarseness and high fever.

Apis has very similar symptoms with burning and stinging, also hoarseness, but no thirst, and utter inability to swallow.

The next similar remedy is Belladonna, while these objective symptoms are very similar, the mental condition of the sick will lead us to choose accurately and properly.

Aconite has tingling in the oesophagus, the only remedies which have a similar symptom are Ignatia and Petroleum.

The taste under Aconite is bitter, except the water.

We find bitter taste under Bryonia, Mercurius, Chamomilla, Pulsatilla, Veratrum, etc., and we find the bitter taste of water also under Mercurius vivus, Bromine, Lycopodium, Natrum muriaticum, Nitricum acidum, and Silicea, all of these mentioned remedies have also general bitter taste.

Bitter taste after drinking, we find especially under Pulsatilla, China, and Arsenicum, in that respect utterly opposite to Aconite.

Pulsatilla has more thirstlessness, thirst only very exceptionably and then similar to Bryonia.

On the thirst under Aconite we have already made our remarks above.

Vomiting is found under Aconite, with profuse perspiration and increased micturition also with heat and thirst, there is vomiting of bloody mucus, or of what has been drank, followed by thirst.

Vomiting with profuse perspiration we find also under Belladonna, Sulphur, and Zincum, with cold perspiration under Veratrum and Camphor; vomiting with increased micturition is peculiar to Aconite, and would show plainly that Aconite cannot likely become a curative remedy in Asiatic cholera, as of one the very characteristic symptoms is a decided and complete suppression of the urinary secretions.

Vomiting of what has been drank we also find under Ipecacuanha, Arsenicum Eupatorium perfoliatum, Hyoscyamus, and Phosphor symptoms, great thirst for cold water, which is vomited up as soon as it becomes warm in the stomach; the Ipecacuanha and Arsenicum vomiting takes place immediately after drinking, here we remember the vomiting of milk (in infants) under Aethusa cynapium.

The vomiting of bloody mucus during fever is peculiar to Aconite.

Under abdomen we find inflammation of the peritoneum, bowels, liver, and of the hernial stricture, (with vomiting of bile).

In puerperal peritonitis it is indicated and will bring quick relief if the characteristic restlessness, sleepless and thirst are also present; where these symptoms are not present, when drowsiness and dull headache prevails Belladonna will be the remedy, when the tenderness to the touch is great, when the disposition to sadness, melancholy, and no thirst present Pulsatilla is indicated, but when with the intense soreness great and profuse warm perspiration which gives no relief sets in, then *Tillia europaea* will be the remedy.

Under the urinary organs we find enuresis, with thirst (and diarrhoea) this is peculiar to Aconite, enuresis with pain in the abdomen we find under Aconite and *Veratrum*.

Veratrum has enuresis with headache, and *Gelsemium* has enuresis at the close of a violent headache, relieving it.

The catamenia under Aconite are too profuse and too protracted, or suppression of the menstruation from fright or vexation; if they have been long suppressed from fright we remember *Lyc*.

If fright causes a premature appearance of the menses or even a discharge during pregnancy, showing an approaching miscarriage *Gelsemium*, is indicated for this contrary Aconite condition. When the after-pains are too severe and protracted, Aconite is the remedy, provided the characteristic mental symptoms are also present.

Inflammation of the larynx and bronchia when dry cold air or suppressed perspiration have caused the disease, also when the same causes bring on an attack of croup or pleurisy, will speedily yield to Aconite provided the first mentioned characteristic restlessness, fever with thirst, and an agonizing tossing about are also present.

The Aconite cough is short and dry from titillation in the larynx, dry with quick breathing, or with expectoration of bloody mucus, or the cough causes stitches in the chest and back.

The cough of Aconite is most similar to that of *Phosphor*, dry short cough, but the Aconite cough is aggravated from drinking, the *Phosphor* cough from reading, talking or motion; the Aconite cough is worse after midnight; the *Phosphor* cough is worse before midnight and better after 1 A. M.

The croupy cough of Aconite is not like that of *Spongia*, resembling the crowing of a chicken (wheezing loud), it is a short dry cough with very rapid breathing.

When the stitches in the chest during an attack of pleurisy are aggravated by breathing and coughing, and accompanied by the characteristic restlessness the Aconite will give speedy relief; if the stitches are aggravated by every, even the slightest motion, and relief comes from laying quiet on the most painful side, thus *Bryonia* will be the remedy, while *Phosphor* has similar stitches, but they are worse when sitting and are relieved by motion.

The palpitation of the heart under Aconite is always accompanied by great anguish and restlessness, preventing sleep, but when in such prolonged cases there is also present tingling in the fingers or attacks of fainting, we have a full picture of the Aconite heart symptoms.

Palpitation of the heart belongs to many remedies but the above symptoms are quite peculiar to Aconite.

Lachesis has a characteristic symptom, the aggravation after sleep, and a pain as if a band was constricting the heart, while *Cactus grandiflorus* has the sensation as if an iron hand were constricting the heart.

The heart's action is increased under Aconite but much decreased, weak, under Digitalis, Tabacum, Asparagus, etc.

In the back we find under Aconite, tingling (in the spine), which is similar to Nux vomica. Aconite has a sensation in the small of the back as if bruised, which is similar to Arnica, Hepar, Rhus toxicodendron, and Ruta.

In the upper extremities we find under Aconite, tingling in the fingers even when writing, which sensation is very strong under Secale cornutum. Aconite has also icy coldness of the hands which is also very strongly marked under Veratrum, Digitalis, China, Belladonna, and Lachesis.

In the lower extremities we find under Aconite, a bruised sensation of the hip-joint which is also under Arnica, Ruta, and Sulphur.

Under sleep, Aconite has very strong sleeplessness with restlessness and constant tossing about, the eyes are closed.

The Belladonna sleeplessness is characterized by open eyes, and the constant tossing about is not present.

Arsenicum has a similar restlessness, but the tossing about is not so marked as is the desire to change the bed, the position in general, now sitting up on a chair, then walking about or lying, now here, and soon again somewhere else.

The fever of Aconite is very characteristic.

We find sensation of coldness in the blood-vessels - Arsenicum has a sensation of burning in the blood-vessels.

Aconite has chilliness from being uncovered or from being touched.

Camphor and Secale cornutum have coldness with an aversion to being covered.

Aconite has chilliness with thirst.

Arsenicum and Pulsatilla have chilliness with thirstlessness.

Under Aconite the shuddering runs up from the feet to the chest, or else chill with internal heat, anxiety and red cheeks.

Under Aconite we find heat, dry and burning, generally extending from the head and face with much thirst for cold drink and with agonizing tossing about.

Heat with perspiration we find under Stramonium, Capsicum, Helleborus, Rhus toxicodendron etc.

Listlessness during the heat we find under Nux moschata, Carbo vegetabilis, China, Pulsatilla, etc.

Heat with a difference and aversion to talk we find under Belladonna, Muriaticum acidum, Phosphoricum acidum, Opium and Lycopodium.

The fever is often followed by long lasting perspiration over the whole body, frequently smelling sour.

Sour smelling perspiration we also find under Nitricum acidum, Sulphur, Silicea, Lycopodium, Sepia, Veratrum.

Under Belladonna, the mental symptoms are quite the reverse of those we find under Aconite. Under Apis the pain is characteristically burning and stinging, under Rhus toxicodendron. the restlessness is again a different one which we have pointed out above.

Under Aconite we find eruptions like milaria purpurea, rubeolae, morbilli, and the rash of children, but we must forever be guided by the mental symptoms, they must be similar if we

expect good results from the administration of Aconite.

The general sensations caused by Aconite are, fainting, especially when rising, with paleness of the cheeks, which were red when lying.

Veratrum has redness of the cheeks when rising, while they were pale when lying.

Under Aconite we find painful sensitiveness of the body to contact, (he does not wish to be touched); similar symptoms are found under Helleborus, Bryonia, Nux moschata, Chamomilla, Colchicum, Hepar, Sepia, Staphisagria, Spigelia and Sulphur.

Under Aconite is great and sudden sinking of strength, similar to Carbo vegetabilis which is often called for when this symptom occurs after a protracted disorder, while under Aconite, Ipecacuanha and Veratrum, this sudden great weakness often ushers in the disease.

Arsenicum has a similar great weakness both at the beginning and during the progress of an illness.

Aconite has congestions to different parts of the body similar to Belladonna, China, Ferrum Glonoine, Pulsatilla, and Sulphur.

The Aconite congestions are mostly to the head, chest and heart.

Aconite will be indicated in apoplexia sanguinea, when the characteristic mental symptoms are present in this disease; it is similar to Belladonna, Glonoine, Lachesis, Lycopodium, and Opium, each of these remedies so differing in their mental symptoms from Aconite, that the choice is not difficult.

Belladonna, when the characteristic drowsiness with open eyes and a congested face are present.

Glonoine is most similar to Belladonna, and principally indicated if the attack has been caused by exposure to the sun or has been preceded by a profuse discharge of albuminous urine.

Lachesis will often be the proper remedy if quiet sleep has preceded the attack.

Lycopodium will be the proper remedy if the sick lay perfectly unconscious with involuntary discharge of urine, eyes wide open and immoveable, the lower jaw hanging down.

Opium has the same unconsciousness with closed eyes and loud stertorous breathing and snoring.

Aconite has cured catalepsy when there were present: rigor of the body, loud lamentations and grinding of the teeth; in similar affections are also indicated, Chamomilla, Ipecacuanha, Platina, Stramonium, Belladonna, Cicuta, Hyoscyamus, Veratrum, etc.

Aconite has paralysis of the left side, similar to Anacardium, Lachesis, Lycopodium, Nitricum acidum and Sulphur, while the same affection on the right side will often indicate Belladonna, Calcium carbonicum, Causticum, Natrium carbonicum, Phosphor, and Silicea.

Aconite has tingling, especially in the oesophagus, cheeks, back and in the fingers, similar to Secale cornutum (in the fingers), Ignatia and Petroleum in the oesophagus; Arnica and Nux vomica on the cheeks ; Causticum, Natrum carbonicum, and Secale, on the back.

Aconite has stinging pains in the internal organs, especially similar are Bryonia, Phosphor, and Spigelia.

Aconite has also burning pains in internal organs, especially similar to Belladonna, Bryonia, Cantharides, Mercurius, Phosphor, and Sulphur.

Aconite has inflammations, especially of the serous membranes and there are similar symptoms under Apis, Cantharides, Mercurius and Phosphor.

Aconite has tearing in external parts and has therefore been found curative in acute rheumatism when there were pains (tearing) in the joints day and night, worse from the least motion, (similar to Bryonia), with swelling, and exceedingly sensitive to the touch, (similar to Colchicum and Ranunculus bulbosus).

Aconite pains are generally accompanied by thirst and redness of the face, the opposite to Pulsatilla, which has paleness of the face and thirstlessness.

Aconite has sleeplessness especially after midnight, with constant tossing about, and the eyes wide open.

Insomnolency is under many remedies but each remedy has its own characteristics. Belladonna has sleeplessness with great sleepiness.

Bryonia has sleeplessness with great heat and restlessness especially before midnight; Calcarea has sleeplessness on account of a great flow of thoughts, the same subject comes up till the time.

Chamomilla has sleeplessness with conscious slumbering and attacks of great anxiety; Coffea has sleeplessness from over excitability of body and mind, perfectly wide awake, sensation of dry heat, especially indicated in laying-in cases where this condition predominates; Mercurius vivus has sleeplessness at night, with great sleepiness during the day, or sleepless because the pains are aggravated as soon as he goes to sleep; Arsenicum has sleeplessness with great restlessness and inability to remain in any position, tossing about especially after midnight. Nuxvomica has sleeplessness especially after early sleep, awakens at 3 A. M., and cannot again go to sleep till daybreak, and then falls into a restless, unrefreshing slumber; Opium has sleeplessness very similar to that of Belladonna feels very sleepy but does not fall asleep, or when falling asleep it is a dull stupor.

Phosphor, has sleeplessness with great restlessness, which returns after awaking from a short sleep.

Pulsatilla has sleeplessness from ideas crowding themselves upon him all the time, and feels very sleepy on the following day; Sepia has sleeplessness if not retiring very early, similar to Pulsatilla, but feels well the following day, not sleepy or sleeplessness every other night;

Silicea has sleeplessness with constant deliriousness instead, crowding of fantastic ideas and congestions; Sulphur has sleeplessness with restlessness, cannot go to sleep, is inclined to perspire, he remains as much awake as during the day, or with congestions to the head.

Under the fever of Aconite we find: Pulse full and frequent and hard, similar to Belladonna, and Bryonia; sometimes intermitting, similar to Natrium muriaticum; when slow, almost imperceptible (thread like); Carbo vegetabilis and Arsenicum have a rapid and almost imperceptible pulse.

Aconite has sensation of coldness in the blood vessels, while Arsenic has burning in them.

Aconite has chilliness from being uncovered similar to Agaricus. Ammonium muriaticum, Arnica, Chamomilla, Clematis, Hepar sulphuris, or Nux moschata, Nux vomica, Pulsatilla, Scilla, Silicea, Thuja, etc.

Aconite has also chilliness from being touched, similar to China, Lycopodium, Nux vomica, Spigelia, etc.

Aconite chilliness is accompanied by thirst.

Aconite has chill, with internal heat, anxiety and red cheeks.

The red cheeks during the chill are also under Arnica, Chamomilla, Bryonia, China, Ferrum, Nux vomica, Rhus toxicodendron, Stramonium, Sulphur, etc.

Aconite has a very characteristic symptom, heat with agonized tossing about.

Aconite has, dry, burning heat, generally extending from the head and face, with much thirst for cold drink, and drinks but little at a time.

The chilliness of Aconite extends from the feet upward to the chest, the dry burning heat extends from the face and head downward, is inclined to uncover during the heat; this inclination to uncover is also found under Apis, China, Ferrum, Muriaticum acidum, Nitricum acidum Opium, Pulsatilla, Secale cornutum, Staphysagria, Camphor, etc.

An aversion to be uncovered is strongly found under Magnesium carbonicum, Nux vomica, Sambucus, Scilla.

Aconite has chilliness with heat at the same time, which is also found under Arsenicum, Calcium carbonicum, Coffea, Ignatia, Nitricum acidum, Nux vomica, Pulsatilla, Plumbum, Rhus toxicodendron, Thuja, Veratrum album, etc.

Aconite has perspiration over the whole body, especially on the covered parts, smelling sour. Perspiration, especially of the covered parts is strongly under Belladonna; or the uncovered parts is strongly under Thuja.

Aconite has perspiration on the upper lip which is also under Coffea, Kalium carbonicum, Nux vomica, and very strongly under Rheum.

Aconite has red, hot, swollen and shining skin, with violent pain; the only other discoloration of the skin is the yellow face.

Aconite has its own *characteristic conditions*, they go through the provings of the remedy and have been fully established by the clinical experiment, they belong solely to Aconite.

While at rest, he is better; but during the night, in bed the pain is insupportable.

Bad effects from dry cold air, suppressed perspiration, from fright, with fear and anger.

Aggravation in the evening (chest symptoms) when lying on the (left) side; when rising, in the warm room.

Remission during the day and before midnight.

Amelioration in the open air (nervous symptoms); when sitting still (rheumatism); when lying on the unpainful side, being uncovered, on closing the eyes, from moistening and wetting the diseased part, this symptom is also characteristic of Fluoricum acidum, while an aggravation from washing the diseased part, especially ulcerated parts, is characteristic of (*distinguishing* it from Fluoricum acidum, - Silicea).

Every student of the materia medica can easily prepare for himself such a picture of a remedy like this, with some comparisons, and these here given might have been much enlarged upon had we intended to give just an outline of such a study, such as everyone can easily make himself by the aid of a materia medica and a repertory. The only safe guide will be to use the original provings, such for instance as Hahnemann has given us, or such perfect provings as have later been published by Dr. C. Hering, always avoiding to use books which on the very face of them are untrustworthy, and lead the student astray; as a repertory for this purpose we possess none more useful and totally reliable than Boenninghausen's Pocket Book. The most profitable mode of acquiring a reliable knowledge of the materia medica is to first master the old remedies, and now having for instance, mastered Aconite proceed to work out a similar remedy which must assist comparisons, say Sulphur which might profitably be followed by Calcarea then Belladonna, then Chamomilla, then Pulsatilla, then Sepia, then Bryonia, then Rhus toxicodendron, then Arsenicum, then Apis, then Nux vomica, then Zincum, and so on, and in the selection of these similar remedies the student will be much assisted by the appendix to Boenninghausen's Pocket Book, in which he gives a very laboriously composed statement of the concordance of the remedies. After a knowledge of the pure Homoeopathic materia medica has been acquired, comes the next question, how to apply it practically for the use of the sick; and as we went for our first instruction to our master's great work, so we again return to him, to his master-work the Organon of the Healing Art, and there find full advice how to apply the law of cure, and how to use our knowledge of the materia medica. And in our day, many efforts have been made to introduce various departures, to set aside Hahnemann's teachings and introduce labor saving methods in the so-called practice of Homoeopathy, it will now be in place to call the attention of the student of Homoeopathy to some of the modern attempts to supersede Hahnemann's teachings; and how can we now, or at any later period expect to obtain the same results in practice, which the master and his earlier and later pupils

obtained with him, if we do not follow his advice implicitly ?

And that we may illustrate modern attempts to caricature our healing art we will return to Aconite and the dose question of this remedy. Hahnemann tells us in his preface to Aconite that in certain forms of diseases, (provided the characteristic Aconite symptoms are present) the healing powers of it are like a miracle, if, the patient is kept somewhat cool, if it is administered singly and alone, avoiding the use of all other medicinal substances even the use of vegetable acids, if it is administered in a thousandth part of a drop of decillionth potency, for one dose, very seldom will it be necessary to administer a second dose after the lapse of thirty-six or forty-eight hours. There are many willing witnesses to testify that this advice of Hahnemann's has invariably been followed by the most miraculous results.

We now quote from the Manual of Pharmacodynamics by Dr. R. Hughes, page 47.

"And now as to the dose. I cannot deny that Hahnemann's immediate successors seem to have found success from the plan recommended (more or less theoretically) by him, of administering in fever a single dose of a high dilution of Aconite (18th to 30th), and allowing it to act. But it is no less certain that the Homoeopathic practice of the present day in all countries is to give frequently repeated doses of a low dilution until the fever departs in perspiration. I have myself never adopted any other practice than this, so that I have no other to recommend to you. The dilution I use is the 1st, 3rd, and 6th of the decimal scale. The first in high fever, in acute rheumatism, and rheumatic or other inflammations, in cholera, croup, laryngismus stridulus, cardiac spasms or angina, and tetanus. The third in less violent febrile conditions, in whooping-cough, and asthma and when the symptoms requiring the drug occur in young children. The 6th in the febrile chill, in subacute circulatory disturbance connected with menstruation, in chronic heart disease, and generally where the medicine has to be taken continuously for some time."

As we promised to state our ideas " How to study materia medica " it becomes also our very unpleasant task to show the Homeopathic student what erroneous, perverse teachings he must avoid.

We shall now make our " Comments " on Dr. Hughes' teachings.

Dr. H. does not deny that Hahnemann's successors seem to have found success from the plan recommended (more or less theoretically) by him, of administering in fever a single dose of a high dilution of Aconite (18th to 30th), and allowing it to act.

We take exception to the whole sentence from the beginning to the end.

Dr. H. does not deny that H.'s successors seemed to have found success from Hahnemann's plan, nay they really and truly did (not seem to) find success.

Hahnemann's plan was more or less theoretical!

Here we find one of these bold and malicious accusations, which have no foundation in fact. Before Hahnemann wrote the lines by us quoted above in his materia medica, he no doubt had hundreds of times subdued Aconite symptoms with a few pellets of the 30th dilution, else this cautious observer would not given publicity to it.

What he stated was the result of a practical experiment, not of a more or less theoretical speculation.

Hahnemann nowhere made "fever" an indication for Aconite, in his very preface he deprecates just such lax practice; he gives us the characteristic symptoms of Aconite, and when they are present, he tells us that a single dose of Aconite will best remove them when given singly and in the 30th potency.

Again, we flatly contradict Dr. Hughes when he erroneously (but perverting the truth intentionally), states that now at the present day the Homoeopaths in all countries give frequently repeated doses of a low dilution until the fever departs in perspiration.

There are hundreds of Homoeopaths who never so violated and never will violate Hahnemann's teachings.

The first error smuggled into Dr. Hughes' teachings is that of Aconite as the specific for fever; as if Aconite could cure any febrile condition when the characteristic symptoms of Aconite are not present.

But when Dr. Hughes states that he himself has never adopted any other practice than the frequent repeated doses of a low dilution until the fever departs in perspiration, his testimony, as versus the plan recommended by Hahnemann becomes absurd in fact it is no evidence whatever.

Dr. Hughes acknowledges that he has a priori rejected Hahnemann's teachings, and why? he says they are more or less theoretical, well, if he had tried Hahnemann's advice as others did, he would have found it "good advice."

But he takes it upon himself to reject it, we suppose under the plea of "Freedom of medical opinion and action" which know of no law.

The pretending Homoeopaths who favor all sorts of "departures" were compelled to resort to frequently repeated doses of low dilutions of Aconite to produce a perspiration which they believed would "break the fever," because they neglected to take the pains to make a proper examination of the patient, neglected to find whether the sick really had besides fever, also the characteristic Aconite symptoms as Hahnemann gave them to us, but which Dr. Hughes has not condescended to repeat, in his perversion of our materia medica now by him very properly called Pharmacodynamics, a work full of more or less theory, but bereft of the old landmarks, the observations of the master, rudely stripped of his characteristic symptoms.

The fact of the case is this, that notwithstanding Dr. Hughes' bold assertions, there are now a goodly number of healers who have read and taken in the Organon, have given up the 30th potency of Aconite, and who have progressively administered much smaller doses than the master recommended; these men of progress forward have found that a single dose of the highest known potency of Aconite will act more prompt and longer than did the 30th; that in the chronic diseases in which Aconite is so much oftener indicated than in acute disorders, the action of such a single dose of Aconite lasts many weeks.

Dr. Hughes is at liberty to deny this without proof; a proof can only be given by showing a failure after a careful experiment has been made; while he treats Hahnemann in this style others cannot claim better usage by his hands.

It is Dr. Hughes' style, as he has confessed in this very sentence above quoted.

Now I do most politely say to the student of Homoeopathy - Hahnemann and Dr. Hughes cannot both be right, they teach such entirely opposite experiences on many points, but here especially about Aconite, that if Hahnemann, the father of Homoeopathy can be relied on, then the man who teaches the opposite can surely not claim the confidence which has been placed in the teachings of the master, and which has always been retained by those who followed him and avoided false teachers, or any teaching not in harmony with the teachings of the master. Therefore follow the master!"

(Dr. Adolph Lippe, Philadelphia, The United States Medical Investigator ser. 3, vol. 6 (1877), p. 272-273, 331-339, 526-533)

1878 - Clinical Reflections

"The clinical experiment is our ultimate test. If we violate any (even the least well-known) rules which should always guide us in our therapeutics, we have no right to expect that favourable success which is promised us if we strictly apply these rules; and if this is true, then it is also obvious that want of success generally depends upon a violation of these rules, and not, as is generally claimed, in the unreliability of them. We propose to relate here a case in which some of the strict rules for the proper application of our Law of cure were inadvertently violated, and how the discovery of the mistake led to stricter application of them, with the usual good results which must necessarily follow the strictest homoeopathic practice. We shall first give a plain relation of the case, and follow it with our comments.

Mrs. B., aet. 45, had for many years suffered from a very delicate and irritable stomach, from cancrus sore mouth (cured by *Phytolacca*), all in consequence of what is mis-termed scientific treatment; she also had suffered from hay-fever, regularly returning every year on the 16th of September. Mrs. B. returned from Europe, after an absence of several years, on the 26th July last; the voyage had been a very unpleasant one; she had been very sea-sick all the time. From the time she left Liverpool till she was visited by me, on the 27th July, she had taken literally no nourishment; broken ice was the only thing that had passed her lips. I found her sitting up, occasionally straining to vomit, very weak, pulse 100 per minute; she complained of a violent pain in the occiput, with great heat, which she had tried to relieve by applications of broken ice; urinary secretions suppressed; mouth dry and hot; she had not slept for a fortnight, and could not lie down on account of a great nervousness, as she expressed it, which compelled her to change her position and her chair so very often; she wandered about all night from chair to chair; taste very disagreeable; perfect loathing of food, and for a few days had a watery, very offensive, and black-looking diarrhoea.

The choice of the remedy was easy enough; I gave her one dose of *Arsenicum album* 50m (Fincke) on her tongue. (July 27th, 10 a.m.) July 28th, had slept in her bed from 10 p.m. till 1 a.m., then became nervous and restless, but says that she feels better. No medicine. July 29th. Has been in bed all night, slept, and no return of the diarrhoea; urinary secretions re-established; the hot water applications to her head have very much relieved the pain; has taken some milk-toast, and relished it; pulse below 90; is cheerful and hopeful. July 31st. Had a still better night, is better in every respect, but complains of severe pains in a bunion on the left foot; it is much inflamed and stings (1). I have her now one dose of *Nitr-ac. C m* (Fincke). August 1st. The bunion is less painful, otherwise there is not much change perceptible. August 2nd. Bunion still improving, and on August 3rd no more pain or inflammation in it. But on the evening of August 3rd, I was again summoned to see her; found her (7 p.m.) quite ill; the diarrhoea and vomiting had returned with great violence; pulse over 110; the same headache as on the 27th has also returned, also the great restlessness (2). Gave her one dose of *Arsenicum alb. C m* (Fincke) dry on her tongue. Found her better next day, and the improvement continued; on the 6th of August (3) her bunion began to pain her again as on July 31st. *Gave no medicine* (4). The improvement continued satisfactorily; when the 16th of September came, she had that night, about 1 a.m., some oppression of breathing, which reminded her of the terrible asthmatic attacks she had years ago; she had to sit up for half-an-hour. *No medicine*. She fully recovered, and travelled for some weeks; had no hay-fever; really has had nothing to complain of since; enjoys better health than she had for years.

Comments on (1). When the bunion appeared, no medicine should have been given, *because* all the other symptoms for which Arsenic was clearly indicated improved under its salutary action, clearly showing that the effects of the dose administered was not yet exhausted, and *because* this new symptom appearing on a less vital part of the body; also showing a moving downward of the disease did not indicate a progress, but a descending diminution of the disorder. Here were two important rules violated. The remedy must be allowed to exhaust its

effects before another dose of the same remedy, or a new remedy, shall be administered. If the appearance of the painful bunion had demonstrated a progress of the disorder, a new remedy indicated by this last appearing symptom would have been in order; and, above all, do we know that if a less vital organ becomes affected, and if the symptoms move from the centres to the extremities, or from above downwards, such symptoms do not indicate a progress of the disorder, and therefore no new remedy should be given, and especially not if the general or previous more serious condition of the patient improves.

Comments on (2). Nitric acid had removed the symptoms for which it was given, viz., stinging pain in a bunion in left foot, but as soon as this symptom had disappeared the first symptoms for which Arsenic had been beneficially administered returned with great severity; this fact was a convincing evidence that the bunion should have been left alone, and that the improvement of the first symptoms would have most likely continued if there had been no interference. As a rule, the last appearing symptoms are of most importance, and must guide us in the selection of the next remedy, but it is obvious that we must first determine whether such a new symptom, or symptoms, require a new remedy. Our knowledge of Pathology comes here to the rescue, as well as other well-known rules. If, for instance, in a case of encephalitis, a profuse secretion of pale urine appears, we know well that we have a dangerous symptom added to the other symptoms, and that it must guide us in the selection of a new remedy, and must be promptly attended to; if the same increased discharge of pale urine appear in a case of rheumatic fever, we would look for a diminution of all the former symptoms without giving a new remedy. If the symptoms of a patient begin on the extremities, and if they improve, but symptoms appear in internal organs, then it becomes necessary to be guided by them in the prompt change of the remedy; if the reverse occurs, no new remedy should be administered. If the symptoms descend, we may safely wait and give no medicine, but if they ascend, every progress upwards shows us that we have not yet conquered the disorder, and reminds us of the necessity of re-examining the sick, and chose the more similar remedy. In the case related, the symptoms left the internal organs, went to the extremities, and descended; it was therefore wrong to interfere with the beneficial action of the former remedy.

Comments on (3). The previous symptom returned, and the same remedy in a higher potency again controlled them. A higher potency was given, following one of Hahnemann's important injunctions, given in his *Chronic Diseases*, that the potency must be changed if the same remedy has to be repeated in a given case. Now again, after this remedy had acted very beneficially for three days, there returned exactly the same symptoms. There is still another lesson to be learned from this case, and that is, that we should again pay as much, nay more, attention to the critical days than did Hippocrates of Cos. There is open to progressive Homoeopathy a very large field. We must continue to develop the Healing Art, guided by the well-established fundamental principles (the science) and the established rules (the art) left us as a legacy by Samuel Hahnemann. Forms of diseases have had their critical days, and as Hippocrates points it out very clearly, days for medication and days for non-medication; the Materialists of the common School of Medicine could no more see the critical days, and set them aside as useless; they could of course not see them, because they so violently and blindly interfered with the natural course of diseases that these days could no longer be observed. When the sick were treated homoeopathically, and this blind and violent interference gave way to a mild and humane treatment, these old long-forgotten critical days were again observed, and were by the true Healer utilized. And when proving drugs for the purpose of learning their sick-making, and, therefore, curative virtues, we again find this same periodicity of the critical days. A well person exposed to a contagion shows the infection after a certain lapse of time; for three days generally the organism remains undisturbed; then, or later, but invariably on an uneven day, the disease develops itself. A well person taking a single dose of a medicinal substance (and why should he take more if he expects a satisfactory proving) will, with rare exceptions,

depending on the character of a few sudden-acting substances, like Glonoin, Camphora, etc., not feel any disturbances in the organism before the third day, when the effect of this health-disturbing medicinal substance begins, develops progressive symptoms, and shows all its sick-making powers for a certain length of time. In the case here related we find an illustration of these propositions; Arsenicum so clearly indicated in the case caused, after three days, *twice*, the same new symptom not known to belong to Arsenicum. When it appeared the second time it was not interfered with, and disappeared with all the other symptoms belonging to the case. To the thoughtful Healer these observations present a number of questions. Shall we add this new symptom (inflamed and stinging bunion) to the pathogenesis of Arsenicum? Shall we wait in each individual case for the exhaustive action of the single dose? And if a single dose, as it is illustrated in this case, can fully restore health, why should we give repeated doses to the sick till we have ascertained it to be necessary, because the action of the single dose is very soon exhausted? How can we bring the critical days to guide us in our therapeutics?

Comments on (4). The greatest and most important question arising in a given case, is, whether a new remedy should be administered, or the former one repeated, or no medicine should be given, and we should wait. This is surely very often a perplexing question. In the case here stated an error was committed, and we have already dwelt on it; but in a great majority of cases such an error is not so easily remedied. It will very frequently happen that the disturbance created by this erroneously-administered remedy interfering with the action of a health-restoring and truly homoeopathic medicine, will be followed by a new combination of symptoms not having any similarity with the first symptoms observed; and we then generally find a grave case before us. This being so, the importance of the question of medicine or no medicine becomes apparent. When we are not quite certain whether the dose before administered has exhausted its effects, or whether new symptoms presenting themselves, and not known to belong to the medicine then acting, are indicating an improvement or a progress of the disorder, then we should give the benefit to our doubt, and decide on - no medicine. If the new symptoms belong to the remedy administered, then it is evidently acting beneficially, and we decide on - no medicine.

In an epidemic of croup here, many years ago, the children who always gave a hoarse barking cough in the early morning hours, were comparatively well during the day, but were attacked during the following night with malignant membranous croup. When a single dose of Belladonna was administered in the morning, they fully recovered; *but*, at 4 p.m., a violent fever, with headache and drowsiness, would set in. When no medicine was given for these symptoms characteristic of Belladonna, this fever would end by 6 or 7 p.m. in a perspiration, and without any more medicine the child would recover; when medicine was given, and especially when Aconite was administered, which, from the absence of its characteristic restlessness, was unsuitable, then the child became very ill, the membranous croup became fully developed, and presented a very grave case. Such cases were hard to manage. No medicine in this case was the proper decision.

To-day, October 22nd, Mrs. B., above referred to, reported herself unusually well. She has not taken any medicine since the evening of the 3rd of August."

(Adolph Lippe, M.D., Philadelphia, Clinical Reflections, The Organon vol. 1 (1878), No. 1, January, p. 39-44)

1879 - Our *Materia Medica*: How to read it and how to utilize it

"The Homoeopathic *Materia Medica*, first introduced and carefully prepared by the founder of our Healing Art, has been very much enlarged since his day. Hahnemann carried out in full earnest what Staehl and others had foreseen to be the only possible means to ascertain the medicinal virtues, the sick-making, and, under the Law of the Similars, the health-restoring powers of drugs.

Among all the collateral branches of Medical Science, the founder of our School found Pathology and *Materia Medica* equally dependent on various hypotheses, varying as the opinions of leading men changed. Pathology then, as in our day, was and is a mere hypothesis; so was, and is to-day, the ordinary *Materia Medica*, and the world will forever remain a debtor to Hahnemann and his few faithful pupils and friends, who assisted him in making the first provings of drugs. Hahnemann and his disciples made such use of Pathology, as it was then offered them, and we use it, as it is to-day offered us; not - no never - as a basis for our own therapeutics; but, as a valuable assistance in the examination of the sick, in ascertaining the totality of the symptoms, and their relative importance and value. Pathological conditions, no more than sick physiology, can admit of the applicability of the law of cure we seek to apply, simply because different organisms are not as equally affected by noxious, sick-making influences, as they are by medicines when taken in health, when they cause 'similar' ailments. Noxious, sick-making influences, affect but comparatively few persons exposed to them, while medicines, when taken by well persons, affect almost every individual; a natural disease finds its health-restoring remedy in a medicine which has produced on the healthy individual similar symptoms.

It is to be taken for granted that the physician, who turns to our *Materia Medica* to find the similar remedy with which to cure the sick, has first fully and diligently examined the sick, and is fully convinced of the immutability of the law of similars, which he seeks to apply, when he turns to our *Materia Medica* for help.

The true healer knows that he must individualize, that the prevailing practice of the common school of medicine assigns a name to every case of sickness, expressive of the hypothetical, pathological condition, and sick physiology of the sick; this prevailing practice is generalization. The lists of symptoms of the sick, all and every one of them, are in their totality in the hands of the healer, when he looks for the similar remedy into our and his *Materia Medica*; his totality of symptoms are fully arranged, the symptoms characteristically belonging to the sick occupying the first rank; he has read the symptoms of the sick, and now reads the *Materia Medica*.

Every sick individual has symptoms belonging to him, as an individual, and so has every remedy symptoms belonging to it exclusively. The individual judgment of the physician finds a wide scope when he arranges the symptoms of the sick according to their importance and value; he now turns to the *Materia Medica*, and in it he will find the similar remedy for each individual case, provided he reads and applies it rightly. As each case of sickness presents characteristic symptoms, so do we find that every proved drug presents characteristic symptoms. If we read the *Materia Medica* aright, we perceive at once these characteristic symptoms of each remedy, symptoms which are peculiar to it; they may be mental symptoms, or a peculiar kind of pain, or the directions in which these pains appear, or the conditions under which they are aggravated or ameliorated, or peculiar concomitant symptoms, or the periodicity of them, or the time of day at which all or any of them generally appear; and these symptoms all, or many, or some of them, show the reader of the *Materia Medica* in what relation one remedy stands to every other remedy, and in what particular it differs from those having in common with it similar symptoms.

A few illustrations will here serve to elucidate our proposition. We find a case of black vomit with putrid involuntary stools, with much thirst and restlessness, black tongue and great debility; the symptom coverer will at once read in this case, Arsenicum; but the observing physician, also finds that the patient is averse to being covered. If he has read his *Materia Medica* aright, he has found that the arsenic-sick person desires to be covered, and while in this case (taken from clinical experience) all and every symptom observable on the sick is to be found under Arsenic, the very fact that he objects to being covered, excludes Arsenic as the similar curative remedy. No matter how closely the pathological condition resembles the picture to be found under Arsenic and its provings, the gangrene evidently present will not yield to it; the experiment has been made, but the patient very evidently grew much worse; pathological indications, as we find them in so called Pharmacodynamics, were of no use, nor could any of the boasted progressive works on Pathology show why, in this peculiar case, the patient resisted covering. This very fact would teach the healer, who finds a wide scope for his individual judgment, in arranging the symptoms of the sick, as to their importance and value, that in this, as well as in other cases, the individual symptoms of the sick, not necessarily belonging to the form of disease of which he suffers, are by far the most important symptoms. While Arsenic finds an amelioration from heat and therefore seeks it, desires to be warmly covered, Secale Cornutum finds a very decided aggravation from heat, therefore does not seek heat, but desires to be uncovered and seeks a cold room. When the healer now again turns to his *Materia Medica*, he will find that Secale Cornutum covers all and every symptom of the sick; he now finds no longer any scope for his individual judgment, but, in obedience to the Law of Similars, administers Secale Cornutum, and finds (as in this case found), that the truly similar Homoeopathic remedy cured the sick. I have chosen this case to illustrate the fallacy of reading our own *Materia Medica* through pathological spectacles; any attempt to do so will mislead the physician.

Illustrations can be found in almost any case of sickness, - we have, for instance, a case of simple Hives. Everyone who has read Apis has found that it is a great remedy for Hives, not a specific, as we well know that there exist no specific remedies for specific diseases, for the reason that, the simplest forms of disease do not in and on every individual develop exactly the same symptoms; now this case of Hives seeks the heat, because cold is very disagreeable and makes the suffering worse; this very symptom excludes Apis, and leads to its antagonistic similar remedy Arsenicum, which remedy is similar to Apis, causing and curing Hives, has the characteristic symptom that cold aggravates and heat ameliorates. In this case Apis would be given without effect, but Arsenicum promptly cure under the Law of Similars.

One more illustration. A case of Pneumonia presents itself; the characteristic pains and fever are present, the patient is afraid to move because it aggravates the pain; are we now to turn to Pharmacodynamics and learn what medicines cause symptoms similar to those of Pneumonia, and then administer one or more of these medicines guided by our own individual judgment; in other words treat Pneumonia? Certainly not. The symptom coverer finding only the symptoms described will at once administer Bryonia, but the more careful examiner finds that the patient cannot lie on the painful side at all; if he tries it, the pains become much worse; this symptom is not necessarily present in Pneumonia and the physician, exercising his own individual judgment, gives this symptom great prominence and finds that Bryonia pains are ameliorated when lying on the painful side, while motion increases them; this remedy therefore cannot come to be considered Homoeopathic to the case. The Homoeopathician does not treat diseases as such, and in this case will find that Belladonna covers all the symptoms, especially aggravation from motion and when lying on the painful side, and while Belladonna cannot be found mentioned as a remedy for Pneumonia in the modern works on Pharmacodynamics, and while the Pathologist cannot explain why the one patient suffering from Pneumonia can lie best on the painful side, and another patient suffering from precisely the same disease can not

lie on the painful side, we value such scientifically inexplicable symptoms, and administer the similar remedy with great benefit to the sick.

These illustrations might be much more extended, but they show clearly that the successful healer has to acquire a precise knowledge of the *Materia Medica*, if he desires to apply it under the Law of Similars, for the cure of the sick. How that knowledge is to be obtained is the present question. The early advice given, 1837, by Dr. Constantine Hering in his masterly preface to a masterly rendition of Lachesis symptoms, is just as good to-day, as it was then; and we take the liberty to say that no better advice could possibly be given. If modern teachers of *Materia Medica* insist upon it, that provings of drugs must be translated into Pathological conditions, and sick Physiology, setting thereby aside both the characteristic symptoms of the sick, and the characteristic symptoms of the various proved drugs; when they wind up and try to apply the Law of Similars to two hypothetical conditions, they lose sight of the conditional laws governing Homoeopathy.

Dr. Hering's diagnostic study of our *Materia Medica* requires that the student first memorizes a few of the most characteristic symptoms of a dozen remedies. He should carefully go over an abstract of the *Materia Medica*, and should find of say twelve remedies, the prevailing mental symptoms, the prevailing pains, the action on one or more tissues or organs, the conditions under which the ailments are ameliorated or aggravated, and finally the concomitant symptoms; he should now compare one of them with the other eleven, and, finally, after having compared them all, he may become conscious of many strong characteristic differences in the effects of all these drugs. He now proceeds to make more comparisons between them and all their known symptoms. If a few natural remedies have been so compared, the student will find it a much easier task to acquire the knowledge of every next remedy, and when, in years after, he reads a new remedy, he will master it quickly, finding at once its characteristic similarities with other remedies, as well as the characteristic differences. It would be a great advantage to the student of *Materia Medica*, if this excellent paper would be fully laid before them; the proof of its excellence is this, that all healers, who have at all mastered the knowledge of our *Materia Medica*, have conscientiously followed that plan."

(Adolph Lippe, M. D., Philadelphia, Transactions of the Homoeopathic Medical Society of the State of Pennsylvania, Fifteenth Annual Session 1879, p. 47-53)

1880 - Scarletina, treatment of its varieties and symptoms

"Like all other diseases classified under names, and known by that name to the pathologist, the varieties are manifold. The characteristic and predominant symptoms have materially changed during different epidemics at different times and at different places, and the characteristic and predominant symptoms of one epidemic have not even shown themselves in just the same degree and manner in all patients so diseased, in fact, while these characteristic and prominent symptoms were present during the varying epidemics, there were observable on each sick individual prominent and to the individual peculiar symptoms, and these very peculiar symptoms very frequently indicated in this individual case a corresponding and curative remedy. Hahnemann calls our attention to these peculiar symptoms in paragraph 154 of his Organon. The observing healer will be governed in his therapeutics by just such peculiar symptoms only, observable on the sick individual, if they are present. In this paper we have only to deal with such groups of symptoms formerly and in succession observed during various epidemics, frequently or generally yielding to remedies corresponding with such groups of symptoms, or with conditions governing one or more symptoms.

The first epidemic of scarlatina observed was in 1840. The most prominent symptoms producing fatal results were, besides the eruption, a very sore, finally ulcerating, throat. The

inflammation was very intense, and the pain was described as a burning pain, the intense redness and swelling extended over the whole throat, and found its remedy in many cases in Capsicum. Belladonna was rarely indicated, and when given caused no good results. If this inflammation was not speedily cured an ulceration began; the ulcers were generally yellow and soon became putrid. Many cases called for and were cured with Mercurius vivus. Nitric acid very seldom did any good, and only then when the ichorous discharge from the nose with stoppage of the nasal passages appeared, for which condition Lycopodium did at times also good service. Cases which then did not yield to treatment would have probably been cured with Kali bichrom., which was then not proved and not known to us.

Another epidemic was observed in 1859, and in it quite a different group of symptoms appeared. The glandular system was first affected, and the frequently appearing enormous swelling of the parotid gland often ended in the suppuration of it, at the same time the progressive symptoms were a profuse ichorous discharge from the nose and utter impossibility to breathe through it. The swelling and inflammation of the parotid gland, especially when it only affected the right gland, yielded frequently to Ammonium carbonicum, which also corresponded with the later appearing symptoms. When both parotid glands, as well as all the submaxillary glands swelled, Calc. carb. did good service; when suppuration of the parotid gland had set in Silicea was the curative remedy. When in neglected cases the ichorous discharge of the nose prevailed Lycopodium or Nitric acid came into requisition. In this epidemic the great majority of cases were cured by Ammonium carb., not only where I observed the epidemic but also in New York city.

The next great epidemic was observed in 1860, and a very similar one in 1863 in Philadelphia. The two most prominent complications were an intensely sore mouth and throat or diphtheria. The sick complained first of soreness of the mouth, declined to drink on account of the great soreness, very soon the lips became red and swollen, they peeled off, the sick began to pick them, causing them to bleed. This condition yielded readily to very minute and few doses of Arum triphyllum. When diphtheria developed itself the cases assumed a much graver appearance; the sick became very restless, and rolled over the bed in an almost unconscious condition, whining and moaning continually; the urinary secretion was suppressed; they declined all nourishment, even drink; the offensive breath increased as the disease progressed. Apis mel. in repeated doses given in solution then became the truly curative remedy; the first indication of its beneficial action was always an increased secretion of urine and a cessation of the tossing about. When diphtheria, as was not unfrequently the case, was also accompanied by a soreness of the lips, when the sick began to pick their fingers and later the lips, causing them to bleed, then again was Arum trif. the proper remedy. Both Apis and Arum had many of the then prevailing symptoms in common. Both cause and cure almost entire suppression of the urinary secretion, both have the same intense restlessness and aversion to drink or eat on account of the pain caused by it in the mouth, both have soreness of the throat, but Arum will invariably deserve the preference when the lips begin to swell, when the sick begin to pick their fingers and lips, and the increased urinary secretion denotes its curative action also. When diphtheria sets in and the incessant desire to clear the throat, to hawk up accumulating secretions, and when these hawked-up secretions consist of tough, stringy mucus, then Kali bichrom. will do excellent service.

During later years the epidemics of scarlatina in the city have become much less severe, less complicated by diphtheria, and we have here now but rare cases of scarlatina, most of them more resembling the old smooth Sydenham scarlet fever, for which Belladonna does excellent service.

When the eruption is suppressed, or will cease to develop itself, we find Apis, Bryonia, Ailanthus, and Sulphur frequently indicated.

Ailanthus becomes indispensable when the eruption assumes a purple hue, when the extremities especially become cold.

Apis mel. will be most useful when at the same time that the eruption, as it were, stands still, we find an entire suppression of the urinary secretion.

Bryonia will be indicated if the patient has been exposed to cold air, and when the breathing becomes painful the lungs becoming implicated.

Sulphur will bring out the eruption when involuntary diarrhoea and a comatose condition set in at the very beginning of scarlatina.

After-symptoms *never* appear after careful homoeopathic treatment and good nursing, but we are not unfrequently called upon to remedy the evil caused by allopathic or eclectic treatment.

A frequent after-symptom is otalgia. When the right ear is principally affected, and the pain is pulsating or else stinging, Belladonna will often reduce and cure the inflammation. Pulsatilla will affect the left ear more. If a suppurative process sets in Mercurius vivus will be the remedy, especially when the pain is violently darting, comes on in paroxysms, and is worse at night. Has the otalgia not been cured, and suppuration has continued for some time, and otorrhoea has continued, Bovista will be found very beneficial when the discharge is profuse, offensive, and acrid, excoriating the parts with which the discharge comes in contact. In very long-continued cases, especially when new abscesses form from time to time, causing violent paroxysms of pain, German Kino is a very valuable remedy.

Another frequent after-symptom is albuminuria and dropsy. Helleborus is the principal remedy for anasarca; if the genitals principally swell and dropsy sets in, Apis will be the remedy. If we find in the scanty urinary discharges black flakes falling to the bottom of the chamber (decomposed blood) then Lachesis will develop its curative powers.

Many other ever-varying symptoms may arise for which the similar remedy has to be found in our Materia Medica. By necessity we have confined ourselves to state only very prominent symptoms or corresponding remedies; the indications given will be found useful and will be corroborated by such healers as will apply them under a strict adherence to the methods of Hahnemann."

(Dr. Adolph Lippe, Philadelphia, Scarlatina: Treatment of its varieties and symptoms, Transactions of the thirty-third session of the American Institute of Homoeopathy, held in Milwaukee, Wisconsin, June 15, 16, 17, 18, 1880, p. 209-302)

1884 - Cholera infantum

"*Cholera Infantum*, or, as this form of disease is generally termed, 'summer complaint,' comprises all the various diseases of the digestive organs and brain with which children are attacked during the summer, and most frequently during dentition during their second summer. The various forms of diseases of the digestive organs are those attacking the stomach as its principal seat, as catarrh, acidity, inflammation, ulceration, or softening of it, or the intestines alone are the seat of the disease, as an erythematous inflammation, catarrh, excoriations, and ulceration.

The disease often appears in different forms, at different seasons, and in different localities.

The brain is very frequently the seat of the disease from the very inception of it, and the erroneous idea that a later stage of the disease itself develops the various cerebral symptoms is only a proof that the first observations of the state of the patient's disturbed health were made

inaccurately, and that the cerebral symptoms had been entirely overlooked. The most frequent brain disturbance, from the very beginning of the disease, is hydrocephaloid.

If the observing healer has found the cerebral symptoms (dilated pupils, hot head, cold extremities, drowsiness) present in a child during the hot weather and the prevalence of cholera infantum, he may avert all further anxieties (especially if the child also vomits) by administering a single dose of Belladonna.

The knowledge of the seat of the disease, its nature, its name, or a knowledge of the stage in which we find the disease, does not indicate a particular treatment, or indicate the truly curative remedy; but this knowledge is nevertheless necessary, for it facilitates the examination of the sick, and it enables the physician to classify the symptoms obtained, and to consider as most important in each individual case the symptoms indicating the progress of disease in this or the other locality, and the changes or suppression of one or the other functions of organs.

As an illustration of these propositions, let us turn to a child supposed to suffer from epidemic cholera infantum; we are informed that the child has diarrhoea since midnight, but does not give signs of pain; it lies quiet, its eyes are only half closed, the anterior fontanel is elevated, the face is pale, the wrists and feet are cold, and upon further inquiry we learn that the child has not passed any urine since the previous evening; the abdomen is flabby, not hot. It would be useless, in such a case, to select the remedy guided mostly by the nature of the evacuations. Here we are presented with a decided case of hydrocephaloid, a case of great gravity, possibly to end fatally within one, or, at least, a few days; and we further know that should the patient pass urine within a few hours after the administration of the truly homoeopathic remedy (Sulphur in this case), the recovery becomes a certainty, and probably without any further medication. Another child has cholera infantum, and cries most persistently, has done so all night, is cutting teeth, and the distressed mother says this screaming has lasted all night; we have to carry the child all the time to pacify it; it has frequent green discharges from the bowels, preceded by an increase of pain, causing it to draw up its knees to the abdomen; the abdomen is hot, the thirst incessant; we are sure there is nothing the matter with the child's brain, but the seat of the inflammatory disease is in the small intestines. A dose of Chamomilla will soon quiet the child.

In the first case the brain symptoms, with the concomitant suppression of the urinary discharge, stand foremost; in the second case the intestinal symptoms, with the concomitant restlessness and the desire to be carried, stand most prominent.

Knowing that the gravest cases of cholera infantum appear without any previous indisposition, without any precursory diarrhoea, probably with no other warning than a little more sleepiness of the otherwise, to all appearances, well child, and that in just such cases all depends on the proper choice of the first remedy, we must be prepared beforehand to choose right, and administer the remedy according to the Homoeopathic Law of Cure.

It has been proposed to begin the treatment of these grave cases of cholera infantum, having their origin in a disturbed condition of the brain, by administering Aconite and Bryonia in alternation. As this proposition is a violation of all and every fundamental principle of our school, the result will be a failure to cure. First and foremost, the character of the disease, its locality, or its kind, can never serve as a guide to our therapeutic action; much less can the administration of two entirely differently acting drugs, as are Aconite and Bryonia, be followed by salutary results; either one or the other can stand in the proper relation as a therapeutic agent under the Law of the Similar, never both, and why, then, not adhere to the Law, and administer the Simillimum?

The therapeutics include also the dietetics, and in cholera infantum it becomes very important to see to it that the proper nourishment is given to the children. The better the dietetics of a child have been understood, and the more proper the nourishment has been from its birth, the

less liable will it be to be attacked violently by the ordinary diseases of children during the hot weather. There are general dietetic rules for children laid down in the books, and it is all well to know them, but they lead to generalizations; each individual child wants its own individual diet, adapted to its own individual constitutional condition. The administration of crude substances supposed to be wanting in the organism is based on 'materialism;' the substances so wanting, or supposed to be wanting, can at best only be supplied by food containing them in a greater proportion than its ordinary nourishment did. The instinct of children will very frequently indicate the requisite nourishment, which then should never be withheld, if it is even contrary to speculative science. In properly nourished children we will rarely ever find a bad case of cholera infantum, and the more we have studied carefully the proper diet of each individual child under our care, the less will they be liable to diseases of the digestive organs. Many cases of children come under the treatment of the physician which he has never seen before, and the more general experience he has gained about the proper diet of children, the easier will he be able to detect what mistakes have been made in each individual case, and he will at once endeavor to correct the erroneous diet.

The erroneous but generally accepted notion that children should be nursed during the second summer on account of the prevalence of cholera infantum during that season causes more cases and is the frequent cause of the great mortality in that disease. There are nine months of gestation, and exactly nine months of lactation (nursing and feeding by the mother's milk). The appearance of the teeth is the first indication that farinaceous food is wanted, and it must not be withheld, and as different children cut their teeth earlier or later during the first nine months, the farinaceous food should be given as it is needed.

All the dietetics being properly attended to, it remains to find in each individual case the corresponding similar remedy. In grave cases, the choice of a remedy must be made at once, as delay is attended by great danger. It is the aim of these short pages to give characteristic symptoms, and a concise description of frequently occurring combinations of symptoms in this form of disease, with their correspondingly similar remedy.

We shall first give the most frequently indicated remedies, and then those less often called for.

APIS MEL. - The child is inclined to stupor, out of which it starts with a loud, shrill scream. The eyes have a reddish tint. The head is hot. The tongue is dry, but thirst is but seldom present. The skin is dry, the hands at times cold and blue. Suppression of urine. The abdomen is tender to pressure. The diarrhoea is worse in the morning, always mixed with mucus, sometimes very offensive or involuntary, or containing flakes of pus.

BELLADONNA. - The child lies in a stupor; it frequently starts up suddenly in his sleep; when awake it is angry and violent. The head is hot, and is often rolled from side to side. The face is generally purple, red, and hot, or very pale and cold. The tongue is red on the edges, or coated whitish yellow, or has two white strips of coating extending down on both sides of the tongue. Thirst moderate. Pulse very frequent, small, and hard, occasionally full. Hands and feet cold; the hotter the head is, the colder are the feet. The abdomen is hot. The stools are clay color or green, or consist of white or granular yellow slimy mucus, and very frequent.

CHAMOMILLA. - The child is exceedingly peevish; the gums are very hot, the cheeks are red, at times only one cheek; the child wants to be carried all the time; has attacks of colic, draws its knees up, and seems to be relieved for a short time after a passage from the bowels. Vomiting of food and sour mucus. The stools are green, or green mucus at times mixed with white mucus or chopped; the discharges are hot, excoriating the parts, frequent, sometimes smelling like rotten eggs.

CROTON TIGLIUM. - The child has a stool as often as it is fed or nurses. The discharge is sudden, noisy, and violent, consisting generally of yellow water.

IPECACUANHA. - Diarrhoea and vomiting. Vomiting of food and drink as often as one drinks, or vomiting of green mucus. Much nausea, with pale face and oppressed breathing. Stools consist of green mucus, or are bloody or fermented.

NATRUM SULPHURICUM. - Frequent attacks of violent colic, with rumbling in the abdomen, relieved by the violent discharge of yellow water with large quantities of flatus. The stools are more frequent during the morning hours, after the child has been taken up and is moved about, like Bryonia.

PODOPHYLLUM PELT. - Drowsiness or restless sleep, with grinding of the teeth or rolling of the head. Vomiting of frothy mucus, green, or of food. The diarrhoea is worse in the morning, and the discharges are more frequent at night than during the day. Stools green, watery, or mixed with mucus, or like chalk; profuse and painless. During and after stool, prolapsus ani. During dentition also catarrhal cough and catarrh of the chest. Cramps of the feet, calves, and thighs.

SULPHUR. - The disease generally begins after midnight; diarrhoea and vomiting; the discharges from the bowels are generally watery, green, and involuntary; they sometimes smell sour, at other times they are very offensive; vomiting is frequent, often smelling sour (like Calc. c.), with cold perspiration on the face (Veratr., cold perspiration on the forehead). The face is pale, the fontanels open, hands and feet cold the very first morning; the child lies in a stupor with its eyes half open; not much thirst and entire suppression of urine. The child does not scream out violently as under Apis, or roll his head as under Belladonna. In such a case as above described one single dose of Sulphur will suffice to re-establish the urinary secretions and cause the child to sit up again and take food.

ACONITUM NAP. is seldom indicated, and then only at the beginning of the disease, especially when it has been caused by a check of perspiration, mostly during the night, when the weather has changed from extreme heat to cold. The child is excessively agitated and restless, pulse very frequent and hard, abdomen very hot; much thirst; the discharges are watery and contain bloody mucus.

ARSENICUM. - Diarrhoea and vomiting; much thirst for cold water, but everything the child drinks is thrown up at once; hot skin, great restlessness; the child continuously tosses about, changes its position, and cries incessantly. Stools watery and very offensive, or black fluid, or dark, thick green mucus; very great weakness and emaciation.

BENZOIC. ACID. - If, during an attack, the urinary discharges become very scanty, and if the urine has a very pungent, strong smell, and if the urine easily becomes turbid.

BISMUTH. - Diarrhoea and vomiting. The vomiting prevails; all food and drink is thrown up at once; the abdomen is bloated, the face is pale, blue rings under the eyes. (Compare Creosote.)

BRYONIA. - The attacks return as soon as the weather becomes very hot, and are relieved on cool days. (Aconite and Dulcamara have the reverse.) Vomiting of bile, tongue coated yellow, thirst, not frequent, but drinking of large quantities (Aconite has the reverse); abdomen hot, the child does not want to be moved (Aconite has the reverse); every motion causes pain in the abdomen and a discharge from the bowels. Worse in the morning when beginning to be moved.

CALCAREA CARBONICA. - Open fontanels; stools gray-like clay, smelling *sour*; vomiting of food, and especially milk, *sour*; profuse perspiration on the head during sleep; swollen, distended abdomen (Sacchar. off.); urine clear (Benz. ac. has turbid urine), is passed with difficulty, and has a strong pungent, fetid odor.

CARBO VEGET. - Diarrhoea; stools very putrid or bloody; face pale or greenish; the gums recede from the teeth and bleed easily; abdomen distended; emissions of large quantities of flatus; skin cold; tongue and breath cold; voice hoarse or lost.

CHINA. - Painless watery diarrhoea, yellow or blackish or of indigested food; worse after eating (Ferrum has diarrhoea while eating), and worse at night and after eating fruit, with much tendency to perspire.

COLOCYNTHIS. - Diarrhoea with violent colic before, during, or after the stool, compelling the child to bend double, which seems to give relief (the colic of Belladonna is relieved by hard pressure across the abdomen; that of Rhus tox. is relieved by lying on the abdomen).

CREOSOTE. - Diarrhoea with vomiting; the continuous vomiting and straining to vomit predominates; the child resists the tightening of anything around the abdomen, which increases its restlessness and pain; much thirst; gums hot; coldness of the hands and feet. (Compare Bismuth.)

IRIS VERS. - Diarrhoea and vomiting; vomiting of food, bile, or of a very sour fluid; profuse, frequent, watery stools. Tympanitis.

NATRUM MUR. - Watery diarrhoea with colic; incessant thirst with nausea; emaciation beginning at or principally on the neck; abdomen bloated.

NITRIC. ACIDUM. - Diarrhoea, green, mucous or bloody, or putrid; putrid smell from the mouth; copious flow of saliva; ulcers in the mouth and on the tongue.

PAULLINA SORBILIS. - Green profuse stools, inodorous.

PETROLEUM. - Diarrhoea only during the day.

PHOSPHORUS. - Diarrhoea and vomiting; desire for cold water, which is thrown up as soon as it becomes warm in the stomach; diarrhoea is worse in the morning; stools consist of green mucus, brown fluid, white mucus, or containing little grains like tallow.

SILICEA. - Fontanel open; much perspiration on the head; great thirst; emaciation; rolling of the head; suppressed urinary secretions; watery, very offensive stools. (Calc. c. has sour-smelling stools.)

SULPHURIC ACID. - Frequent, large, watery, very offensive evacuations, with aphthae and great irritability.

VERATRUM ALBUM. - Diarrhoea and vomiting; great weakness; vomiting of frothy substance; profuse watery diarrhoea, with flakes; during stool cold perspiration on the forehead; pale face; cold hands; voice weak or hoarse; suppression of urine,

If marasmus follows a protracted case of cholera infantum we have two great principal remedies to stay its progress and cure the patient.

SARSAPARILLA. - Great emaciation; the skin lies in folds; the face is shrivelled; aphthae on the tongue and on the roof of the mouth.

IODINE. - The child has an inordinate appetite, but nevertheless continues to emaciate.

If effusions on the brain have taken place, then we may resort to Digitalis, Helleborus, Hyoscyamus, Opium, Zinc, according to their respective indications.

These general indications will enable the practitioner to find the proper remedy in many cases, especially in cases requiring prompt and unhesitating prescriptions. The variety of cases is so great that it is utterly impossible to give a proper prescription for all and every variety of cases of cholera infantum or any other disease."

(A. Lippe, M. D., Philadelphia, Cholera infantum, The Homoeopathic Physician vol. 4 (1884), p. 172-179)

1884 - Psorinum: Clinical Reflections

"Isopathy is a method of curing diseases, first advanced by Lux, which he based on the principle *aequalia aequalibus curantur*. In accordance with this principle, all contagious diseases carry with them in the shape of their infectious matter their curative remedy. Lux drew his deductions from the well-established fact that vaccination proved to be a preventive against small-pox. The vaccine then in use successfully was taken from cows suffering from a disease peculiar to them, and this animal poison (a cow-nosode), if used for vaccinating mankind, did certainly then diminish the susceptibility to small-pox; or, to express ourselves clearly, fewer were attacked by small-pox after the introduction of vaccination by Jenner. The present mode of vaccination with human scabs or with the artificially produced disease in cows, by a vaccination with human virus, is a "parody on vaccination," and is followed only too often by worse disease" than small-pox. We make these passing remarks only to show the utter fallacy of basing a system of cure on a basis so utterly untenable. A system of cure, furthermore, which only claims to cure infectious diseases can never be regarded as a universal system of cure - such as the Healing Art promulgated by Samuel Hahnemann, and by him called Homoeopathy, which is applicable in all forms of non-surgical diseases. If we take in consideration the variety of causes which produce disease, and how easily they may be cured in said manner (labour-saving method), and how little the art of individualization, the great accomplishment of a true healer, comes into play, which art should be an absolute necessity if a permanent and speedy cure is to be accomplished; if we reflect that the homoeopaths have so very often remarked that there seldom or never exist two persons who suffer from exactly the same symptoms, but that different persons present unusual symptoms, dependent on their own individuality - we are forced to the conclusion that Isopathy is an abortion of Homoeopathy and an absolute absurdity as a method of cure.

Among the eccentric followers of Lux we find the early friend and co-labourer of Hahnemann, Dr. Gross; Hahnemann mentions his apostasy in the preface to the *Organon*, where he deals with Isopathy in a foot-note. Dr. Gross had listened to the premature and extravagant promises held out by Lux and did advance into Isopathy and became an eccentric defender of that absurdity. Upon mature reflection he returned to pure and simple Homoeopathy, and the bubble burst. Isopathy was for the time abandoned.

The isopathists of the Lux order were not the first men who introduced all sorts of nastiness into the Pharmacopoea. Paulini wrote in 1687 his Pharmacopoea, which comprised excrements of all kinds, urine, placenta, worms, all sorts and parts of animals well powdered (trituated ?), the deer horn of the narwhal was to cure all cases of poisoning and every contagion, the effusion of the viper was a specific for all debilities, and sterility was to be cured with the pulverized testicles of a ram.

Hahnemann gave in the *Chronic Diseases* his reasons for not including among the antipsoric remedies the nosode Psorinum, and his very valid reason was that Psorinum was not sufficiently proved. Not only a proving of a drug was in those days considered necessary before a new remedy could be incorporated into our materia medica, but it was considered absolutely necessary to have the provings verified by the clinical experiment, and therefore Psorinum had to wait for verifications.

If Isopathy was correct, in the propositions made by Lux of old, and also by the reviver of Lux's apostasy, the Psorinum would cure all and every case of the "itch." The fact is that as far as we know Psorinum has rarely ever cured a case of the "itch" proper, *scabies sicca*. The clinical experiments of this now well-proved remedy show very singular cures when it was administered under the exclusive law of the similars. We find, for instance, a case related in *Rueckert's Homoeopathic Therapia*.

- Psorinum 30, one globule dissolved in 4 oz. of water for three days, one tablespoonful a day, relieved a case of religious melancholy in an epileptic patient.
- Psorinum 30, two globules in seven doses, one dose given every fortnight, cured almost completely a scrofulous inflammation of the eyelids. The eyelids were covered with thick crusts; at the same time almost the whole body was covered with a bran like tetter.
- Psorinum 30, two globules repeated every eight days, cured in a boy inguinal hernia reaching down to the testicles. The hernial sack, in consequence of previous inflammations, contained a large quantity of water - complete cure (Archiv. XIV. 2, p. 136).
- Psorinum appears to be one of the remedies in chronic constipation (Allg. Hom. Ztg., 2, p. 69).
- Psorinum 30, two globules, two doses eight days apart, cured a case of hydrocele caused by repeated inflammation in consequence of pressure from a truss.
- Psorinum seems to be effective in certain forms of dry coryza with stoppage of the nose (Allg. Hom. Ztg., II, p. 69).
- Psorinum 10 cured a dry cough with dyspnoea and a pain in the chest as if it were raw and scratched (Arch. XII, 2, p. 90).
- Psorinum 2 was useful in not far advanced phthisis pulmonalis purulenta (Allg. Hom. Ztg. V., p. 107).
- Psorinum in repeated dose prevented the suppuration of tubercles in the lungs. Symptoms: Dull pressure extending from the right side all over the chest; aggravated by bending forward; mostly dry cough with expectoration of small, lumpy masses; very much exhausted by talking; the voice is not hoarse but full; much tired from preaching; chest contracted; shoulders standing forward.
- Psorinum 30, three pellets, a dose once a month, removed chronic rheumatism in the limbs with a dry eruption on the wrists.
- Psorinum 30, repeated three times, removed almost entirely a pain in the knee caused by a fall a year ago.
- Psorinum 30, two doses, cured in a child an offensive smelling crusty eruption extending over the whole face which for three months had completely closed the eyes (Arch. XIV, 3, p. 132).
- Psorinum 30, three doses, a previous tetter on the arm with small, millet-like eruption exuding a yellow fluid. The eruption itches intensely in the heat.
- Psorinum 30, three doses every month, once cured a dry tetter on the wrists with rheumatism in the limbs.
- Psorinum cured in three days a copper-colored eruption on (the top of) the hand.
- Psorinum, two doses, cured in a month a moist scab behind the ears with dry tetter on the back of the head, on both cheeks extending upward to the eyes and downward to the corners of the mouth, reddish, very closely packed, milletseed-like itching, dry pimples, with frequent loose stools, in a child one and a half years old.
- Psorinum 30, one dose cured in a month the eruption in the face of a child. The whole face was covered by a crust, lips and eyelids were swollen, aversion to light, large, moistening spots on the head and behind the ears (Allg. Horn. Ztg. IV, p. 14).
- Psorinum 30, two doses in a fortnight cured large condylomata located and extending around the edge of the prepuce, moist, itching, and at times burning, at the same time involuntary urinary secretion at night and frequent micturition during the day, small quantities being emitted, with burning; in the condylomata and the urethra, ulcerated lips and dry tetter in the bends of the knee (Allg. Horn. Ztg. IV, p. 14).
- Psorinum, two doses, cured a malignant boil. Symptoms: On the hand a cone-shaped scab in the size of a quarter of a dollar, on a base as large again, bluish red and strongly demarcated, where the scab extends over the ring there is another white moist ring which forms a new scab. The whole causes much tension and burning (Allg. Horn. Ztg. III, p. 117).

- Psorinum is recommended by Gutt. Archiv. 14, 2, 137, as a possible successful remedy in hydrocele; he recommends it referring to a cure of a case of hernia with accumulation of water in the hernial sack. Later cases of hydrocele cured with Psorinum have been reported.
- Psorinum has often cured the consequences of itch suppressed by the use of sulphur ointment.
- Psorinum has some very prominent guiding symptoms, as, for instance, dyspnoea, worse when sitting up and relieved by lying down; congestion to the head after dinner; great despondency predominates.

This collection of clinical reports, made in former years, shows that while Psorinum is by no means a specific for the "itch," the results of careful provings have enabled the healer to make good use of it in a great variety of ailments. It is obvious that the assertions of the isopaths are a fallacy; it is obvious that in former years the *30th potency* did cure the sick when the remedy was homoeopathic to the case; it is obvious that its homoeopathicity depended on the similarity of the symptoms of the patient with those observed on the provers; it is also obvious that the symptoms of the itch miasm do not constitute a proving, as has been claimed by some, who also claim that Syphilinum and other nosodes have been sufficiently proved in the sufferings of those infected, that no other provings were necessary, but instead of an old-fashioned proving they must be "highly potentized" and thereby become reliable, truly homoeopathic remedies. Where is "the logic" of these eccentric men? Jenner's small-pox preventive is the corner-stone on which is built the new labour-saving healing art. A poor foundation at best for anything; but if, for mere argument's sake, we admit the correctness of Jenner's theory, what relation can morbid products of sick men have to the morbid product of a lower animal? Again, for argument's sake, suppose he is exempt, what comfort can thereby come to the advocates of modern Luxism with a variation. Jenner's remedy is the morbid product of a cow disease transferred on man to protect him against small-pox. The modern advocates of Luxism with a variation claim that the morbid product of a disease taken from one human being *if highly potentized* (that is, the variation) will cure the same disease in others; and that is boldly claimed to be "Homoeopathy." Since when does Homoeopathy treat diseases - we mean forms of diseases?

Hahnemann tells us in paragraph 153, of his *Organon*: 'The search for a homoeopathic specific remedy consists in the comparison of the totality of the symptoms of the natural disease with the lists of symptoms of our tested drugs, among which a morbid potency is to be found corresponding in similitude with the disease to be cured. In making this comparison, the more *prominent, uncommon, and peculiar* (characteristic) features of the case are especially, and almost exclusively, considered and noted; for these in particular should bear the closest similitude to the symptoms of the desired medicine, if that is to accomplish the cure.'

What we want are "provings" - *genuine provings*, not symptoms accidentally cured by the hap-hazard administration of an unproved but highly potentized remedy to be set down as symptoms absolutely obtained by proving the drug on the healthy, that is laborious, and this is exactly where the shoe pinches. We hope we have shown the absurdity of Luxism with and without modern (ingenious?) variations, and we have chosen to give clinical reflections on Psorinum, one of the well-proved nosodes, to show the proper and only practicable method to "advance." Sober and logical reflections will convince every sensible man in what manner we may advance and develop the healing art."

(Adolph Lippe, M. D., Philadelphia, Psorinum: Clinical Reflections, The Homoeopathic Physician vol. 4 (1884), p. 83-87)

1884 - The "Sifting of our Materia Medica:" A Clinical Illustration

"The case here referred to has been laid before the profession many years ago, but at this time, when a great effort is going to be made to destroy the usefulness of our materia medica by means of an indiscriminate sifting process, a little illustration may serve to cause some thoughtful colleagues to reflect before they progress with and go into the destruction-bringing sifting-trap.

The patient was a boy about fifteen years old, who was in the twenty-first day of typhus abdominalis. Dr. H. N. Guernsey had been in attendance and had treated him in his always careful manner, when the following prominently characteristic symptoms were observed: The whole alimentary canal and organs were in a state of ulceration ; his mouth especially was extremely painful; could not even allow fluids to touch his mouth without complaining severely; he vomited blood-streaked mucus, and had severe diarrhoea; sleepless; during the night he would shriek out violently without being able to state the cause of it. Nitr. ac., Mercury, Arum triphyllum had had no effect on him. The mental symptoms called our attention to Stramonium; but here was that last tormenting symptom, the sore mouth, and as we were in doubt whether Stramonium could be administered under the strict law of the similars, we resolved to study up the case before prescribing. In the admirable rendition of Stramonium by the ever painstaking C. Hering we found symptom 1023: 'It feels as if the inner mouth were raw and sore (Hahnemann)' - and in going as a last resort, as is our habit, to the *Materia Medica Pura* of Hahnemann, we there found that symptom (20) an observation of Hahnemann himself. After further comparisons, we were satisfied that Stramonium was the similar remedy, and a few doses of it (high potencies) were administered with the hoped-for result - a speedy cure. The prover had only a sensation (feeling) as if the mouth were raw and sore; the patient had that sensation also, and additionally had really a raw and sore mouth. The result proved that our interpretation of that single apparently unimportant symptom, observed by one prover only, was correct.

A revision of the materia medica is now seriously proposed, and the American Institute has taken the initial steps for the 'revise.'

The Bureau of Materia Medica, through its Chairman, Dr. J. P. Dake, presented, at the last meeting of the American Institute, a report, and read a schema for the revision and publication of a purified materia medica, sifting out that which is worthless and arranging the whole in a condensed form.

The schema is objectionable on various grounds; for instance, rule 5 reads, '*Include as a rule no drug that has not shown pathogenetic (would read better SICKMAKING) power in two or more provers.*' What would have become of the case above referred to if violent hands were laid on 'singly observed symptoms'?

No. 10 was properly objected to by thinking members. It reads : 10. '*Include no symptoms reported as coming from attenuations above the twelfth decimal only when in accord with symptoms from attenuations below.*' No. 10 is objectionable. It is illogical, to begin with, if it is admitted that attenuations above the twelfth can cause symptoms. Why then reject those not in accord with those observed from attenuations up to the twelfth? Does the learned gentleman, who committed himself unwittingly to the acknowledgment that attenuations above the twelfth can have any sickmaking powers, not know that the higher potencies are more potent in every respect than the twelfth? Does it not follow that on that very account these higher attenuations (potencies?) will cause, in many instances, more characteristic symptoms than the twelfth develops? The arbitrary limitation to the twelfth attenuation is unwarranted; or does it seem needful in these days to disregard the teachings and statements of the father of our school? What will the revisers do with Theridion curassavum, which has only been proved in the thirtieth decimal potency? Will they throw it overboard and insult every healer who has

reported cases cured by Theridion? Furthermore, there are now a not inconsiderable number of characteristic symptoms of acknowledged value observed only by provings with high potencies. Will the makers of the revised and purified materia medica throw them out? *They will if they know them!* But alas! they do not know much about the way the materia medica was obtained; we do, and if that promised *Opus* should see the light of day it may give us great pleasure to expose these purifiers, especially if they have admitted symptoms only obtained from and only cured by high potencies.

11. *Omit the contributions of Hahnemann and his fellow-provers to the Materia Medica Pura and Chronic Diseases, which are already accessible to the profession, and of which we do not possess the day books.* The play of Hamlet with Hamlet left out! Why reject that immortal work of Hahnemann? *Because we do not possess the day books!* For the same reason, Hering's provings may be set aside as well as other provings. It is an old complaint made by Dr. Richard Hughes and his followers that we have not Hahnemann's day books. Will these everlasting fault-finders take up Hahnemann's *Materia Medica Pura* and his *Chronic Diseases*, and for their own satisfaction write out the day books! If they desire to have the day books they are there, can be obtained easily if they observe on what day the various provers observed the symptoms. If they write them out as far as given, the day books are ready. Hahnemann gave the name of the provers, and the abbreviations of their names are given. To many a symptom is added the day on which it was observed. When Hahnemann performed the herculean work of *creating* a pure materia medica it was very difficult to find a publisher, and his ardent friend who was fully convinced of the great truth of Homoeopathy, the bookseller Arnold, at Dresden, published these works at a very great pecuniary sacrifice, and now, some sixty years later, it is claimed that he should have published 'day books' also. Fault-finders who have not the remotest idea of the magnitude of Hahnemann's and his publisher's sacrifices. In our days we find published 'new remedies' without 'sacrifices,' and these fault-finders never mention these innovations adversely. What was the corner-stone of our school? Why, Hahnemann's works.

Once more we return to the case above related. From the facts there stated different men who have differing views of Homoeopathy will make different uses, draw different deductions. The thoughtful healer will mark in his *Materia Medica* opposite the symptom related 'Confirmed' (sore mouth and alimentary canal in typhus healed). The man who rides the pathological hobby-horse will draw the deduction that Stramonium will heal sore mouth and ulcerated alimentary canals in every case of typhus fever, and he will be sadly disappointed if he leaves out 'the mental symptoms,' as related in this case. Natrum sulphuricum has healed similar pathological conditions, so have Nitr. ac., Arum tri., Argt. nitr. The true healer considers the 'totality of symptoms,' not a hypothetical pathological condition. He individualizes and does not generalize, guided by a pathological picture-book; he also does not reject a symptom because it was only observed by one prover; nor does he ever dream of labour-saving books, such as the condensing, purifying divisions, with the twelfth dilution as a standard, propose to publish. If the *Opus* really comes out there will be found among the 'veterans' a goodly number who will write 'A Criticism.' These old veterans did utilize Hahnemann's *Materia Medica Pura* and his *Chronic Diseases*, and there were many among them who learned the German language that they might have access to this indispensable work, as many years elapsed before a translation into the English and French languages appeared, while still later it was translated into almost all languages. With Hahnemann's great unparalleled *Materia Medica Pura* in hand, the battle against the common school of medicine, with their materia medica bristling with materialism and arbitrary classifications, began, and by the aid of Hahnemann's works battles were won; Homoeopathy was established because it cured. Would not men endowed with a reasonable amount of common sense leave the foundation on which was built our school intact and be content with adding to the inheritance left us. I well remember

to have seen a copy of Hahnemann's *Materia Medica Pura* and his *Chronic Diseases* at the residence of the late Dr. Bousquet, at Havana, in 1856. Thumbed as these volumes were, their soiled condition gave evidence of their frequent use, and this old Frenchman had introduced Homoeopathy into Cuba; the yellow fever and the cholera were by him cured, by means of the *Materia Medica* unabridged and unrevised, and with the thirtieth potency. Later this good healer learned to use higher potencies, and Homoeopathy was by him permanently established and used by an intelligent community. Many similar cases have come to my knowledge. The early practitioners in all parts of the world established and made respected our school by just these means. The English reading homoeopaths will continue to use the superior translation of our *Hahnemannian Materia Medica* by Dr. Drysdale, far superior to the slovenly translation by the late J. C. Julius Hempel, who had even omitted that greatest paper of the Master, 'The Genius of the Homoeopathic Healing Art,' which paper we take the liberty to recommend for study to men now deliberating how to 'condense and purify' our own *materia medica* before they present to the world 'a *Caricature*.'"

(Adolph Lippe, M. D., Philadelphia, The 'Sifting of our *Materia Medica*:" A Clinical Illustration, The Homoeopathic Physician vol. 4 (1884), p. 311-314)

1886 - Clinical Reflections

"Mr. B., forty years old, always in robust health, called to complain of very intense pain in the right shoulder joint; can hardly move the arm, but is absolutely unable to lift the arm up; had a bad night, almost sleepless, on account of the pain. He received a few pellets of *Sanguinaria canadensis* ^{cm} (Fk.), and in forty-eight hours he reported himself well.

A coachman had fallen off a ladder and had bruised his right shoulder. Suffered intense pain at night; described it as great soreness. One dose of *Arnica* ^{cm} (Fk.) relieved the great soreness, but he was unable to move the arm, when a dose of *Bryonia* ^{cm} (Fk.) gave some relief. He now told me that some twenty years ago he had injured the same shoulder in a similar way, and that he was then laid up for some months. It was now the seventh day of his fall, and the shoulder remained very stiff; he could not raise his right arm without severe pain; at rest he was comfortable when he kept his arm in a sling. I now gave him one dose of *Sanguinaria canadensis* ^{cm} (Fk.). Five days later he was able to resume his duties as a coachman.

Comments. - The first proving of *Sanguinaria canadensis* was published in the English language in the first volume of the *Transactions of the American Institute of Homoeopathy*. On page 239 we find the characteristic shoulder symptoms, both pathogenetic and curative, and the symptoms have been so often verified that it might seem useless to report more such cases cured by *Sanguinaria*. As the tendency of modern *Materia Medica* compilers is so very different from our early *Materia Medica* producers it is well to call the attention of reflecting healers to the growing evil. Here on p. 239 of the first great work of the early members of the American Institute of Homoeopathy we find not only the pathogenetic symptoms, but their verification, by admitting into the pathogenesis of a then new remedy also the curative symptoms. Drs. Husmann and Jeanes, two excellent observers and true healers, have long ago joined the majority. Compilers, and most of these *Materia Medica* compilers and reformers, have become notorious despoilers of the laborious men who created our *Materia Medica*. Among them stands foremost Dr. Richard Hughes, who mercilessly abuses the memory of our best provers. May not my old early friends, Drs. Husmann and Jeanes, fare better? It is high time that the profession demand "a halt" in these wicked abuses of the dead, who left their works behind them, seeking no other reward than the knowledge of having tried their best to augment our *Materia Medica Pura* as the only means by which we can apply the only law for

the cure of the sick. What results can we hope our rising generation will obtain when nothing but a sad caricature of the *Materia Medica* is bestowed on them for references?

In the two cases related the guidance to a certain cure were the similarity of symptoms as we found them on record, made by the early pioneers of our healing art. Symptoms 235 and 236 were present, and the remedy was administered in a single dose and a high potency. Of course, some of our colleagues will deny the efficacy of a dose in which no perceptible quantities of the drug can be detected by the microscope; the learned friar at the Hub will, of course, splutter about the absurdity of administering such a dose, but it does not change the facts at all. There are now attempts made to put a scientific looking pathological livery on our *Materia Medica Pura*. We find clearly related, changed sensations of the organism stated in the *Materia Medica Pura*, and we have the law of similars to guide us to successful cures, not once, but invariably. It is obvious that without a *Materia Medica* it would have been impossible for Hahnemann or anybody else to even test the applicability of the law of the similars for the cure of the sick. This *Materia Medica* was *created* by Samuel Hahnemann, and with his *Materia Medica Pura* it was possible to prove beyond a possible doubt that the law of the similars was a natural law, and that under *that* law and under no other law diseases could and were cured, provided their similar symptoms were found among the *proved* remedies, and it seemed that no man of common sense and tolerable intellect could draw another deduction from these facts than a conviction that the progressive successfulness of our healing art depended in a progressive development of our *Materia Medica* in just exactly the same manner as Hahnemann employed when he *created* a *Materia Medica Pura*. This was the conviction of the founders of the American Institute of Homoeopathy, the first fruits of their honest and intelligent labors are mentioned in this paper, their early publication of the pathogenesis of *Sanguinaria canadensis*, the appreciation of their labors may be expressed time and again by the survivors of the early pioneers and by a grateful posterity. While Homoeopathy progressed rapidly, while the sick were cured by healers who followed Hahnemann's teachings and methods, a set of pseudo-homoeopaths arose, and we could not describe these men better than Hahnemann himself described so frequently "*the pretenders*", men who wear the livery of Heaven to serve the devil, as an uncompromising allopathist writes to me expressing his utter contempt for these men who preach one thing and practice another. That is *all* the recognition cranks obtain. Various modes have been tried by these pretenders to undermine our noble healing art. All to no purpose, always tripped up when these men tried to discredit Hahnemann and set themselves up as reforming progressionists for the sake of "*recognition*", which only comes in the shape of *detestation*, and now finally these men resolved to destroy our *Materia Medica*. The archfilers of the great philosopher who founded our school cried out against Hahnemann's *Materia Medica Pura* because the day-books of the provers were not published, showing his ignorance (not confined to this point only) of the fact that the publisher of this work (Arnold) did it at a great pecuniary loss out of gratitude he owed Hahnemann for *curing* him.

Instead of going on in the beaten path, which had secured cures and successes, a set of illogical men pretend to *purify* our *Materia Medica Pura* by publishing hastily and inaccurately compiled day-books. There is really no limit to the ignoble acts of these destruction-seeking pretenders. There is the leading spirit of them, who denounces Drs. Mure and Nanning, and fairly crimines Dr. Houatt, charging him with *fraud*. These things become offensive to every true healer. Does Dr. Richard Hughes profess to be conversant with the drift of the homoeopathic literature? If he does, he might remember our publishing a case of "renal colic" cured by *Ocimum canum*. He will find the remedy in my text-book and in Allen's *Encyclopaedia*. He will find it also with the habitual slovenly and inconsistent work - Allen conscientiously excludes *all* curative symptoms. Why? Has he discovered also that of late years our journals are loaded down with incredible observations. They never deceive the thinker. In this case Allen admits

in a parenthesis to be sure *right side* (curative symptoms), but omits a strong curative symptom - the hemorrhage from the kidney after the attack. The cases in which *Ocimum canum* is indicated in renal colic are very rare, but just in such desperate cases we shall have a correct pathogenesis. Nanning's provings have thousands of times been verified. Nanning was the first homoeopath who, *after proving Aconite*, gave it in pleurisy. Let Hughes howl and roar as he seems fit, but when he abuses Houatt he becomes a detestable *slanderer*. *Bufo* has cured time and over again epileptic attacks, especially when they occur during the night and are followed by coma and headache, and *Bufo* is also an *indispensable* remedy in what is called the malignant pustule, a most malignant and fatal malady. Time and again I have verified Houatt's provings by the actual test and *cured*. Now, will that blasted despoiler of our healing art publish one single case in which he prescribed a remedy proved by these by him maligned men, administered it according to Hahnemann's methods, and then failed. *No*, never will any of these destruction breeders commit themselves. Till they do let them be branded "slanderers of the dead." Every true healer will hold on to our own old-time, honored *Materia Medica*. Guided by it he will surely heal the sick, and he will resent all new-fangled propositions to purify the *Materia Medica Pura*. The motive of these proponents is *wicked*."

(Adolph Lippe, M.D., *Clinical Reflections, The Homoeopathic Physician* vol. 6 (1886), p. 294-297)

1887 - Tellurium

"The mental symptoms may be comprised in 'quietude,' less inclined to be lively or to fly into a passion.

This condition might properly come under the head of '*apathy*,' which we find strongly under *Arsenicum*, *Phosphoricum acidum*, *Ignatia*, *Natrum muriaticum*, etc.

There is vertigo when rising in the morning, aggravated from every movement, similar to *Carbo vegetabilis*.

Glonoin has a similar vertigo with diabetes.

There is fullness of the head with sleepiness, similar to *Belladonna*.

The most characteristic headache is a violent linear pain in a small spot over the left eye - the locality is similar to *Kalmia* and *Lycopodium*.

The *Tellurium* headache comes suddenly, and leaves as suddenly as it came.

The eye symptoms are very important and may indicate it in pterygium and cataract.

We have not as yet any clinical verifications of the eye symptom.

Among the ear symptoms we find a characteristic indication for it which has been verified repeatedly.¹⁾

Itching and swelling, with painful throbbing in external meatus; in three or four days discharges of a watery fluid, smelling like fish-pickle, which causes vesicles wherever it touches; ear is bluish red as if oedematous; hearing impaired.

Tellurium has not the stitches in the ear nor the early swelling and redness of the ear that we find under *Pulsatilla*.

The discharge under *Pulsatilla* is like pus, green.

Tellurium differs from *Mercury*, which has characteristic a great aggravation of the pains and sensation of coldness of the inflamed external meatus when becoming warm in bed.

The discharge from the ear is frequently blood-streaked.

Bovista has also a very offensive discharge from the ear, but the soreness which it causes manifests itself in the formation of scabs.

We find uncommon abundant secretion of saliva from the mouth, like *Mercury*, and also a whitish coated and swollen tongue, so that the impressions of the teeth are clearly shown upon

the margin of the tongue, like Mercury, which has a gray or heavy coated tongue with foul breath.

The breath and other exhalations of Tellurium are like garlic.

Swollen tongue, with indentations of the teeth we find, besides Tellurium and Mercury, also under Stramonium, Arsenicum metallicum, Glonoine, and Iodine.

Gums bleed so that the mouth is filled with blood; similar to Natrum muriaticum, Carbo vegetabilis and Mercury.

The sore throat of Tellurium is always relieved by eating and drinking; very similar to Ignatia. Tellurium has dryness of the throat.

Ignatia has the sensation of a plug in the throat.

The breath smells like garlic; this is a characteristic symptom of Tellurium, and so far not known to have been produced by any other remedy.

Tellurium has weak feeling, like faintness, in the stomach, after congestion of blood in head and nape.

This weak feeling is also found under Sepia accompanied by nausea, and is then caused by thinking of food to be offered.

Baryta has it also, but eating relieves it.

Oleander has relief of it from drinking brandy.

Alumina and Digitalis have an aggravation of it after eating.

Kalmia has it extending to the throat relieved by eructations; Kali carbonicum has the sensation of weakness accompanied by eructations.

Lobelia has it with dyspnoea.

Tellurium has painful sensation of the spine from last cervical to fifth dorsal vertebrae, sensitive to pressure and touch, similar to Nux vomica and Ruta.

A very important symptom is, 'pain in the sacrum passing into the right thigh down the sciatic nerve; worse when pressing at stool, coughing, laughing, also when lying on the affected side.'

Here we have a true picture of a form of sciatica.

Lachesis is also frequently indicated in sciatica, but the Lachesis pains in the sciatic nerve are relieved and very slight when lying quiet in bed.

Sitting up - rising to one's feet - causes a great aggravation.

The pain, if aggravated, is a sensation of intense heat, as from a hot iron, and is often aggravated by sleep.

Rhus tox. will be also a remedy in this painful disease if the pain is worse at night, when rising from bed or from a seat, and relieved by continued motion and walking.

Arsenic will be the remedy if the person can find nor rest in any position, but feels himself compelled to walk about, changing the position, which is painful and gives no relief.

Lycopodium has cured sciatica, returning every four days periodically.

Kali bichromicum has also pain in the sciatic nerve as far as the knee.

Tellurium has cured offensive perspiration of the armpit when the smell was described to be like garlic.

Other offensive perspirations of the armpit are found under Hepar, Dulcamara, Nitricum acid, Rhododendron, Selen, Sepia, and Thuja.

Very characteristic of Tellurium is 'ring-worm.'

The ring-worm consists of red, elevated rings very distinctly marked.

It appears as spots, very bright red and sharply defined, with minute itching vesicles; itching is worse especially at night after going to bed.

The ring-worm of Natrum carbonicum is surrounded by a yellow ring or it suppurates.

Sepia has brown or claret colored spots, or humid ring-worm with itching.

Clematis has red humid herpes and ring-worm with intolerable itching in the warmth of the bed and after washing; the herpes is red and humid with the increasing, but pale and dry with the decreasing moon.

Magnesia carbonica has small red, little elevated, smooth herpes, scaling off afterward without sensation."

¹⁾ In Allen's *Encyclopedia*, this symptom is to found under 'Skin.'

(Adolph Lippe, M. D., Philadelphia, Tellurium, The Homoeopathic Physician vol. 7 (1887), p. 1-3)