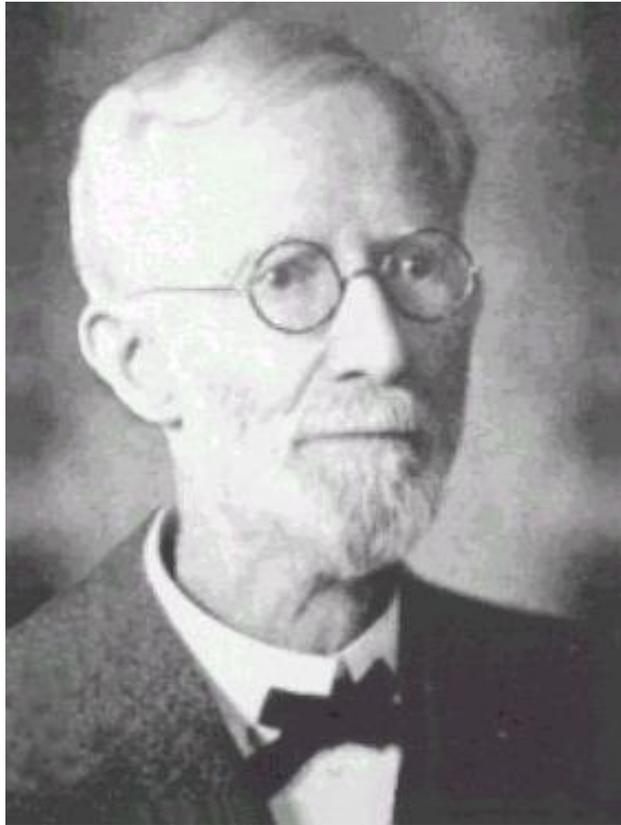


# Pyrogenium



William A. Yingling (1851-1933)  
One of the pioneers of Pyrogenium

“If physicians would give it a trial, I think they would never after be without it.”  
(Samuel Swan, 1888)

“I have now had two years' experience with this grand nosode, and it is one of the grandest monuments to Hahnemann and to Homoeopathy, as it covers a wide range of action, and it fills a place of its own that no other remedy can fill.”  
(G. W. Sherbino, 1892)

“In septic poisoning after abortion or confinement this is the remedy par excellence.”  
(William A. Yingling, 1895)

“Pyrogen is one of our most wonderful weapons, if rightly used.”  
(H. R. Bellairs, 1899)

“For the first use of Pyrogen in typhoid and septic conditions we are indebted to our English homoeopathic brethren. It is adapted to the most malignant type, cases in which we formerly zig-zagged a cure with Arsenic, Carbo veg., Rhus or Terebinth, are met directly by this powerful nosode. But it is in puerperalism that it bids fair to occupy a unique place in our therapeutics; here it is almost without a rival, in prompt and effective action, when the best selected remedy fails to ameliorate or improve.”  
(Henry C. Allen, 1902)

“It will often save life in the most dangerous and rapid septic fevers.”  
(James T. Kent, 1904)

„The remedies *Pyrogen* and *Septicaemin* are very little known and yet they are of such sovereign value that one can only regret that they do not stand in the front rank of homoeopathic use and wont in the choice of the prescribers who act on the principle of the adjustment of remedy to malady. Many cases of blood-poisoning and ptomaine poisoning, peritonitis, and pyaemia could be saved by *Pyrogen*, if the medical practitioners would only study our *Materia Medica* and apply it in cases which show the characteristics I mentioned.”  
(Dorothy Shepherd, 1946)

## **Inhalt / Content**

### **Die Substanz / The Substance**

Pyrogen and Septicaemin - Dorothy Shepherd  
Dr. Drysdale's preparations  
Samuel Swan on his "Pyrogen"  
Was Pyrogen prepared from decomposed beef or from septic pus? - Rudolph Rabe

### **Prüfungen / Provings**

1890 - G. W. Sherbino  
1890 - Florence Taft  
1892 - Robert Boocock

### **Heilungen / Cures**

1890 - Childbed fever in a primipara - G. W. Sherbino  
1890 - Accelerated pulse after convalescence from typhoid fever - G. W. Sherbino  
1890 - Fever in a girl aged 17 - G. W. Sherbino  
1890 - A desperate case of sewer gas poisoning in a child of four years - Henry C. Allen  
1890 - High temperature with conspicuous absence of symptoms, in a girl aged 14 - Henry C. Allen  
1891 - A young woman in a desperate state of Bright's disease - T. M. Dillingham  
1892 - Bad cough in a girl aged 16 with horrible offensive secretions - J. A. Wakeman  
1892 - Septicemia after abortion in a woman aged 32 - Jennie Medley  
1893 - Severe chills after abortion in a woman aged 32 - John H. Allen  
1893 - Chills after abortion in a mother of two children - John H. Allen  
1894 - Two fever cases - H. C. Morrows  
1897 - Unbearable back pains in a man who has not been well since he had the grippe - William A. Yingling  
1902 - Rheumatism of the right knee - Dr. Dunn  
1904 - Septic fever after confinement, in a woman aged 30 - J. E. Huffman  
1906 - Abszess des Felsenbeins und nach Operation folgendes wochenlanges pyämisches Siechtum bei einem 9jährigen Mädchen, das zum Sterben aufgegeben war - G. Boeckh  
1906 - Peritonitis mit nachfolgendem kindskopfgroßem Beckenexsudat bei einer 29jährigen Frau - G. Boeckh  
1908 - Septic condition due to curettement in a woman aged 30 who was suffering from a terrible dysmenorrhoea - Nettie Campbell  
1920 - Septic condition after induced abortion of twins at fifth month - H. M. Maynard  
1943 - Acute appendicitis complicated with pneumonia in a man - W. Leroy Bonnell  
1946 - A serious attack of "wartime flu" in a young man invalided out of the army on account of shrapnel wounds in his ankle - Dorothy Shepherd  
1947 - Very bad and choking cough caused by the stench of an excavated rotten cadaver - S.P. Koppikar  
1976 - Complications after appendectomy in a boy aged 10 - Pierre Schmidt  
1988 - Septisches Fieber nach schwerem Verkehrsunfall, bei einem 45jährigen Mann - R. Römer  
1988 - Schleichendes septisches Fieber nach Entfernung eines Leberflecks, bei einem 13jährigen Mädchen - R. Römer  
1988 - Septische Arthritis des linken Kniegelenks, bei einem 56jährigen Mann - R. Römer  
1988 - Atypische Appendizitis bei einer 71jährigen Frau - R. Römer  
1988 - Fieberschübe nach Katheterisierung bei einem Mann in den 70ern - R. Römer

### **Klinische Hinweise / Clinical Hints**

1888 - Samuel Swan  
1891 - La Grippe and other "miasmatic" conditions - W. H. Leonard

#### **1892 - Clinical verifications - G. W. Sherbino**

- Pneumonia in a girl aged 14
- Aching all over with great restlessness
- Paralysis in a little girl
- Fever with great restlessness
- Grippe in a child

- Grippe with strange sensations, in a man
- Dysmenorrhoea
- Partial paralysis in a girl aged 12
- Fever in a child
- Bearing down in uterine region with great restlessness
- Pneumonia
- Fever in a woman aged 21
- Typhoid fever
- Severe cough after confinement
- Relapse from typhoid fever

1893 - Neglected pneumonia - J. Emmons

#### **1894 - Clinical cases - William A. Yingling**

- Feverish state in a woman aged 30
- High fever in a girl aged 4
- Feverish state in a boy aged 8
- Grippe in a woman aged 36 and her daughter aged 17
- Grippe-like state in a school teacher

1894 - Complications of measles in a child - Henry C. Allen

1895 - Pyrogenium in typhoid fever - John H. Allen

1895 - Pyrogenium in labor - William A. Yingling

1897 - A kind of Grippe in a woman aged 48 - William A. Yingling

1899 - An elderly woman suffered for years from an awful ulcerated leg - H. R. Bellairs

1902 - Pyrogenium fevers - Henry C. Allen

1904 - Abortion - J. E. Huffman

1913 - Pyrogenium and Anthracinum - Eugene B. Nash

1928 - Pyrogenium in scarlet fever - Elisabeth Wright Hubbard

1929 - The relation of Calcareo sulphurica to Pyrogen - Elizabeth Wright Hubbard

1939 - Clinical experiences with Pyrogen - Margaret Burgess Webster

1939 - Pyrogenium in influenza - Douglas M. Borland

1939 - Pyrogenium pneumonias - Douglas M. Borland

1942 - Clinical experiences with Pyrogen - Margaret L. Tyler

#### **Symptom-Register**

1893 - William A. Yingling

1910 - Henry C. Allen

#### **Leitsymptome und Charakteristika - Keynotes and Characteristics**

1899 - Henry C. Allen

1902 - John H. Clarke

1915 - Cyrus M. Boger

#### **Kommentare / Commentaries**

1892 - G. W. Sherbino

1895 - James T. Kent

1904 - James T. Kent

1908 - Baptisia and Pyrogenium - Cyrus M. Boger

1930 - H. A. Roberts

1946 - Dorothy Shepherd

#### **Bibliographie / Bibliography**

#### **Anhang / Appendix**

- Drysdale, On Pyrexin or Pyrogen as a therapeutic agent, 1880

# Die Substanz / The Substance

## Übersicht

Pyrogen and Septicaemin - Dorothy Shepherd

Dr. Drysdale's preparations

Samuel Swan on his "Pyrogen"

Was Pyrogen prepared from decomposed beef or from septic pus? - Rudolph Rabe

## Pyrogen and Septicaemin - Dorothy Shepherd

„The remedies *Pyrogen* and *Septicaemin* are very little known and yet they are of such sovereign value that one can only regret that they do not stand in the front rank of homoeopathic use and wont in the choice of the prescribers who act on the principle of the adjustment of remedy to malady.

Professor Burdon Sanderson was a great orthodox Materia medica man and physiologist. He taught that decomposing organic materials were unique in inducing rise of temperature in the body. He did not go any further than that. Dr. Drysdale, a homoeopath, recognized the value of and began to experiment with this pyrexia-producing fluid on homoeopathic lines as a powerful remedial measure. He called this crude substance used by him, *Pyrogen*, which he prepared by macerating raw beef in cold water, thereafter exposing this infusion for weeks to the rays of the sun. Burnett standardized this preparation and made use of it in fevers and blood-poisoning, the result of which he published in a monograph in 1888. The crude substance from which potencies were prepared in the usual manner was decomposing animal fluid, the retrograde change in its composition occurred outside the body. The American Homoeopaths then began to make use of the septic substance of the morbid fluids of the body and proved then the close parallelism of the symptoms produced by the morbid agent and clinical human pathology.

Dr. Swan, who was the high priest and instigator of the high dilution school, raised the morbid *Pyrogen* containing material from the contents of a septic abscess to the highest level of transcendental potencies, and commenced that series of well-nigh miraculous cures which are only paralleled by the clinical experiences of Hahnemann himself in the post-Napoleon years. These potencies of Swan were made from septic pus; Sherbino later made provings with Swan's potencies: while the earlier British work was done with decomposing beef as the crude primary agent, but the therapeutic successes were astounding whether made, as in America, with septic pus, or as in England, with septic beef. As time went on, the tendency was to change the potency from 6c., administered night and morning, to 10 m. or cm., administered in unit doses."

(Dorothy Shepherd, M.D., *Magic of the Minimum Dose*, 2<sup>nd</sup> edition 1946, *Pyrogen* (After Dr. George Burford), p. 165-166)

## Dr. Drysdale's preparations

"In order to put the matter to the test, I prepared some of Panum's *Sepsin* in the following three different ways.

1<sup>st</sup>. Half a pound of chopped lean beef was put into one pint of water from the tap and set to macerate on the sunny side of a wall in June, 1879. As the weather was unusually cold and

cloudy no pellicle had formed in fourteen days, so it was left a week longer. The maceration fluid was then reddish, thick, and fetid; this was strained through muslin, then filtered. The filtration was slow and difficult. The filtered liquid was then evaporated to dryness in a water-bath at boiling heat. The dry residue formed a brownish caky mass, which was then rubbed up in a glass mortar with two ounces of rectified spirits of wine, and then allowed to digest two hours. This spirituous maceration was then boiled for five minutes, then filtered. The residue on the filter was then thoroughly dried in the warm chamber, and formed a hard brownish mass, weighing fifty-four grains. This was rubbed up with 540 minims of distilled water, allowed to stand an hour and a half, and then filtered. The clear amber-coloured liquid which passed through is the watery extract or solution of *Sepsin*. To this was added double the volume, i.e. 1080 minims, of *Glycerine*, and labelled "*Pyrexin*"  $\theta$ , forming the standard solution of *Sepsin*, of which one minim corresponds to the water extract of 1/30th of a grain of dry *Sepsin*. The solution is amber-coloured, and remains perfectly clear throughout, and without any trace of mould fungi on the surface eight months after preparation. On testing by subcutaneous injection in white mice in quantities from one minim upwards, and with simultaneous control experiments with like quantities of pure *Glycerine* diluted with one third water, it was found that one, two, and three minima produced palpable effects, though not fatal, while four minima were fatal in some cases, and six minima uniformly so, the corresponding control experiments being innocuous.

2<sup>nd</sup> Mode. A similar maceration, after standing fourteen days in July, 1879, was strained through a linen cloth, measured twelve ounces, of a deep and clear solution. This was at once precipitated with twelve ounces of strong spirits of wine (90°), mixed thoroughly by stirring, and set aside to stand all night. The precipitate was buff-coloured, and very bulky, taking up nearly half of the glass beaker. The supernatant alcohol was decanted off and the precipitate drained upon a filter, then washed off into a beaker with boiling spirit, made up to twelve ounces, and boiled over the lamp for five minutes with constant stirring. Filtered and washed with boiling spirits. The precipitate was removed to a clock-glass, and kept *in vacuo* over strong sulphuric acid for thirty-six hours, during which time it shriveled into a small compass, and became blackish. It weighed forty-two grains. Now treated with ten parts of cold water for an hour in a mortar, triturating constantly. Then filtered and washed twice over. The two filtrates and washings were then evaporated in a water-bath to dryness, and weighed 1.5 grain. This was triturated in an agate mortar with 150 minims of a mixture of one part of water and two parts of *Glycerine*. This was marked *Sepsin* or *Pyrexin*, 100 minims = 1 grain. The solution is not complete, and flocculent particles are visible. Of this three minims are fatal to mice, and it is thus, therefore, more virulent than the former preparation, but from the small quantity of dry precipitate got and the large quantity of *Alcohol* consumed in the process it is not one to be recommended.

3<sup>rd</sup> Mode. A similar maceration of the nineteenth day, in the open air of a cold September. The filtered maceration liquid (11.3 ounces) was mixed at once with two volumes of rectified spirits of wine and precipitated. The precipitate was of a dull brown colour, and the solution containing it was allowed to stand six days, then filtered, drained, and washed with hot spirits of wine. The precipitate was detached from the filter, dried in a warm chamber at 150° for eighteen hours, then ground very fine, and weighed 3.14 grammes = 48  $\frac{3}{4}$  grains. This was macerated six hours over a water-bath with ten parts of water, then twenty parts of *Glycerine* added, and filtered under pressure. The fluid was very pale amber-coloured, and keeps perfectly like the mode No. 1. But seven drops are not uniformly fatal to mice. It is, therefore, weaker than the first mode, and more *Alcohol* is consumed. The first mode is preferable in

yielding a product of sufficient strength and in tolerable quantity, and with moderate expense of *Alcohol*. But it has the drawback that the preliminary evaporation is attended with such a horrible smell.”

(Dr. Drysdale, On Pyrexin or Pyrogen as a therapeutic agent, The British Journal of Homoeopathy vol. 38 (1880), Modes of preparation of sepsin, p. 152-154)

### **Samuel Swan on his “Pyrogen”**

"Some years ago, I do not remember how many, Messrs. Alfred Heath & Co. (I think it was) sent me some " Sepsin " artificially prepared. Some time subsequent to that Dr. William Todd Helmuth sent me a vial of pus from an abscess in the thigh, in the "worst case of septicaemia he had ever seen", the patient at the time being moribund. This I potentized and named it Pyrogen - the English preparation being then called Sepsin.”

(Samuel Swan, M. D., New York, Pyrogen - Sepsin, The Medical Advance Bd. 21 (1888), p. 545)

### **Was Pyrogen prepared from decomposed beef or from septic pus? - Rudolph Rabe**

“Heath, of London, used decomposed beef from which to make his potencies, and these were used by Burnett, who in 1888 published his pamphlet on “Pyrogenium in Fevers and Blood Poisoning.” Clarke, in his dictionary of Materia Medica, maintains that Swan procured some of Heath’s preparation and made his high potencies from this. Both Allen and Kent of Chicago dispute this and maintain that Swan’s potencies were made from pus from a septic abscess, provided by the late Dr. William Todd Helmuth. Swan’s list of high potencies bears out this latter statement, Pyrogen being marked as pus from septic abscess, and Heath’s preparation designated as sepsin, artificial. On the Skinner machine, Boericke & Tafel prepare the high and highest potencies, made from decomposed meat and there have been used by the writer whenever the drug has been prescribed.”

(Rudolph R. Rabe, Pyrogen, The Medical Advance vol. 44 (1906), p. 783)

# Heilungen / Cures

## Übersicht

- 1890 - Childbed fever in a primipara - G. W. Sherbino
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## **1890 - Childbed fever in a primipara - G. W. Sherbino**

"Mrs., primipara, was taken with child bed fever; she complained of being so sore all over, body aching, hard bed (Bapt., Arn. Rhus), a high fever, temperature 103. I tried to check it with Bap., for two days, without controlling it; her pulse was 140, and she was relieved by turning over, or any change in position; great restlessness ; she thought she would break if she laid too long in one position. I gave her a dose of Rhus cm., and for twenty-four hours I waited on it without any change. The rapidity of the pulse called my attention to Pyrogen ; one dose cured in twelve hours." (G. W. Sherbino, M. D., Abilene, Texas, Proving of Pyrogen, Proceedings of the International Hahnemannian Association 1890, p. 212-221)

## **1890 - Accelerated pulse after convalescence from typhoid fever - G. W. Sherbino**

"Miss W. E., after being convalescent from typhoid fever, in about a week or ten days, from unaccountable cause, a relapse came on ; the most characteristic feature was the rapidity of

the pulse, it being about 140 ; temperature 102 ; one dose of Pyrogen, cmm. cured in twenty-four hours."

(G. W. Sherbino, M. D., Abilene, Texas, Proving of Pyrogen, Proceedings of the International Hahnemannian Association 1890, p. 212-221)

### **1890 - Fever in a girl aged 17 - G. W. Sherbino**

"Miss P., aged 17, was taken sick with a fever; tongue heavily coated and complete loss of appetite; aching in the bones; she complained of the bed feeling hard.

She moaned most of the time, was very restless; could not lie long in one place.

She had to be turned to one side or the other; this she said she wanted done to relieve the hardness of the bed and the restlessness, as she was relieved for a short time and then the same thing over again.

She complained of a soreness in the throat, yet no soreness could be discovered ; in three or four day she became almost paralyzed, especially the lower extremities; she could not walk without help and then she had to drag her legs along in a paralytic manner.

She now became so that she could with difficulty articulate.

I could hardly understand her; she talked as if she had her mouth full of hot mush, and it imparted a nasal twang.

She became so helpless that she could not feed herself nor could she turn over in bed, and was so that she could not walk for a long time after she was convalescent.

She complained of feeling numb all the time; it looked at one time as though she would not survive, as the paralysis was growing worse all the time.

She received Bapt. in the very highest potencies; also Rhus, cm. and mm. (Fincke), without any benefit.

After her fever left her, her pulse kept on climbing up.

I could not account for this, unless it denoted the approach of dissolution.

Her pulse was 120 when her temperature was normal.

With this symptom I thought of Pyrogen.

She got it in the cmm (Swan) and it always helped her, and brought her pulse down and relieved that intolerable restlessness.

A dose would not last long till relapse would come on and another dose would have to be given.

But this strange case was cured with this nosode; it was so much like Rhus, and yet Rhus did not even palliate.

Don't forget Pyrogen with rapid heart action, when the temperature is normal or subnormal, and in heart failure."

(G. W. Sherbino, M. D., Abilene, Texas, Proving of Pyrogen, Proceedings of the International Hahnemannian Association 1890, p. 212-221)

### **1890 - A desperate case of sewer gas poisoning in a child of four years - Henry C. Allen**

"In August, 1888, N. B., a child of four years spent a few weeks at his grandmother's in Detroit, in whose residence the sewer pipes and plumbing were being repaired. September 3d, a few days after his return, he was attacked at 2 A. M. I was called at 5 A. M. and found the following :

Vomiting and purging; stools profuse and watery. Cold extremities, cold ears and nose ; forehead bathed in cold perspiration. Tongue heavily coated, yellowish gray fur ; edges and

tip very red. Great prostration. No pain or cramps.

Veratrum, 1 m., in water, a teaspoonful after every attack of vomiting, which would average about ten minutes.

Saw him again at 8 A. M. Could not take the medicine in water < the vomiting. Vomiting and purging no better, though the stool was not so profuse. The coldness and prostration were marked and the pale face was bathed in cold sweat. Great restlessness, mental and physical. Pulse 140, feeble and wiry; temp. 99. Great thirst for small quantities, but the smallest quantity was instantly rejected by the stomach.

Arsenicum, cm., three powders, one every half hour, then Sac. lac. until I saw him.

12:30. No improvement. Pulse 160, weak and thready. Nausea and vomiting persistent, and the stool though not so profuse as in early morning was now horribly offensive - a carrion-like odor. Face pale and sunken, and bathed in cold perspiration. The tongue was dark red, and devoid of the heavy coating of the early morning. Intense thirst, but water < both vomiting and purging. No pain.

Carbo V. 1 m. every 15 minutes for four doses, then placebo.

4 P. M. No improvement. Patient evidently sinking, impossible to count the pulse. The symptoms being unchanged, except for the worse, especially the odor of the stool, I gave him Baptisia 200, in solution of alcohol and water, every half hour, but at 8 P. M. there was still no reaction from the evidently downward course.

Thinking perhaps that sewer gas poison may have been a factor in the cause and the clean, fiery red tongue, persistent vomiting and purging and the horribly offensive odor of the stool with entire absence of pain, called my attention to the report of a case in the Homoeopathic World, by Dr. Burnett, cured with Pyrogen.

Pyrogen cm., two doses, dry on the tongue, and placebo gave prompt and permanent relief." (Henry C. Allen, M. D., Pyrogen, Proceedings of the International Hahnemannian Association 1890, p. 360-361)

### **1890 - High temperature with conspicuous absence of symptoms, in a girl aged 14 - Henry C. Allen**

"April 24, 1890. Elsie B., age 14, could not go to school.

Had complained for a week of feeling tired, but in every other respect was well, she said. Her father on application of thermometer found the temperature 102, pulse 108, and was alarmed.

I found her tongue abnormally red, with a very thin white fur at base, but no symptoms.

As she had had a slight epistaxis in the morning and the genus epidemicus at the time being Bryonia, I gave her a dose of the 1 m. and left Sac. lac.

There was no further nasal hemorrhage and a conspicuous absence of symptoms ; yet pulse and temperature continued to rise each day reaching 120 and 104 ½ respectively, while the tongue was dark red and very dry, but without thirst.

She took Sac. lac. for a few days, waiting for symptoms on which to hang a prescription.

As they declined to appear and suspecting sewer gas as a cause, Pyrogen, one dose, was given and she rapidly recovered.

An examination revealed a defective pipe in the basement."

(Henry C. Allen, M. D., Pyrogen, Proceedings of the International Hahnemannian Association 1890, p. 360-361)

### **1891 - A young woman in a desperate state of Bright's disease - T. M. Dillingham**

"A young German woman was admitted to the wards of the Hahnemann Hospital, January 2d, 1890, suffering with Bright's disease. She had previously been in one of the city hospitals where she got no relief and, applying to Dr. W. G. Fralick, was advised to look for help in the "Hahnemann," where she was admitted on the above date, and remained until March 1st, when she was discharged somewhat improved. My term of service began March 1st, and on the 14th I was asked by the house physician as to the advisability of admitting an incurable case of Bright's Disease which had already been two months in the hospital as a free patient. The woman declared she could only be comfortable or helped in the "Hahnemann" and begged so earnestly to be saved from the Mt. Sinai Hospital, where she would otherwise be forced to go, that we readmitted her.

An examination of the urine showed an enormous amount of albumen and a variety of casts. Feet and legs terribly swollen, so that she could not wear her own shoes, with much puffiness of the face. The most characteristic conditions were a throbbing headache < by motion and light. Abnormal brightness of the eyes, with greatly dilated pupils.

Belladonna had been given her and was followed by such relief of her condition that she was discharged on March 1st, as previously stated. She now received it again in a very high potency and after two weeks was so much improved that she was again discharged. The "Hahnemann" is not designed as a retreat for incurables, although no one is ever turned away. When the woman left the hospital I promised to continue the care of her case, and she reported at my office once each week.

By the 31st of May she was in a desperate condition. Too sick to work; she had long since lost her position as "sales-woman" and her poor relatives could no longer support her. I applied to the lady managers of the hospital for a free bed where the woman could stay until better or relieved by death from her pitiable condition and it was most cheerfully granted.

With more than previous interest in the case I made a thorough examination as to the cause of her trouble, and learned it dated from a large abscess, the result of a lanced and badly cared for felon on the thumb of left hand. She was sick for weeks with this abscess and had what the doctors told her was blood poisoning. Soon after this the swelling of her feet and face commenced.

Up to this time I had not had occasion to use Pyrogen, but concluded that here was a suitable case in all respects to give it a trial. Her condition and symptoms were about as follows: I made no note of them, fully expected the woman would die at this time, but determined to give her all possible relief, and constantly declared I was going to win the case. Feet, legs and genitals seriously swollen. Frightful throbbing headache, which was better from a tight band constantly worn about her head. Relief from heat. She was very fond of the hot bath, which I forbade as soon as I learned of it being taken. The headaches had most terrible aggravations lasting two to four days. During this aggravation she could neither lie in bed nor sit up, but was in constant motion, groaning and crying piteously for help. She was indeed a pitiable object. Swollen face, projecting eyes, legs swollen to the utmost extent of the skin. The urine was loaded with albumen and casts frequent, but never numerous.

It was a desperate chance; but, having with great care prescribed with only very temporary and unsatisfactory results, I was determined to make no change in the remedy, dose or habit of life. I was absent from the city from July 15th to September 15th, receiving regular reports from the house physician as to this case. I have every reason to believe he faithfully followed my directions. Only once during the last stay in the hospital did the woman lose her courage

and declared in her sleepless and persistent distress that I must give her something to stop the pain which she could no longer endure. I was forced to order her to leave the hospital or obey me. This was in June, and soon after it she began to mend. In September, on my return to town, she was much better, and begged me to allow her to return to Germany to her father, a poor German peddler. She, however, remained until October 20th, when I discharged her as cured. I have heard from her twice since in reply to packages of "no medicine," with which I kept her supplied. In the last letter she thanked me for the medicine, but was so well that she did not think she required it.

The most touching incident connected with this case was on the day of her departure, when she knelt in the center of the ward and offered a prayer, the like of which the nurses declared they had never heard. She was a Jewess.

NOTE. - The excruciating, bursting, throbbing headache with intense restlessness, moving and crying, slightly ameliorated by a tight compress. The headaches were accompanied often with profuse bleeding at the nose and nausea and vomiting, which I have omitted to mention in the proper place.

This is the only case in which I have used Pyrogen, but I feel that it cured that desperate case and that Swan's comm. will become an invaluable remedy when we know how to use it. My reasons for using it were purely empirical.

Dr. Bell cured a case of blood poisoning with it, and was so impressed with its power and use that, on my departure for Europe three years ago, he gave me a vial, with an urgent request to use it if I wounded myself while dissecting in Leipsic. It has proved a life saver in several cases of malignant typhoid fever, and I think it advisable for our Bureau of Materia Medica to have it proved as early as possible."

(Thomas M. Dillingham, M. D., Bright's disease cured with one dose of Pyrogen CMM. (Swan), Proceedings of the International Hahnemannian Association 1891, p. 144-146)

### **1892 - Bad cough in a girl aged 16 with horrible offensive secretions - J. A. Wakeman**

"Carrie, aged 16 years, been sick two or three months under allopathic care. Breath, perspiration, expectoration, menses, urine and feces horribly offensive, carrionlike; disgust up to nausea about any effluvia that arises from her own body; soreness of the chest and abdomen, menses last but one day and a sanguineous leucorrhoea that is of the same odor; pulse 106, with a bad cough, worse coming into a warm room; large, fleshy, pale, greenish or chlorotic face, mother having just died of consumption. Medicine given at office, and better in ten hours, and on November 12<sup>th</sup> cough, odor and soreness nearly all gone, pulse 80, tongue clean. Sac. lac. and she remains well to this writing, January 18<sup>th</sup>. What do you think of it." (J. A. Wakeman, M. D., Centralia, Ill., Pyrogen CM., one dose. The Medical Advance vol. 28 (1892), p. 298)

### **1892 - Septicemia after abortion in a woman aged 32 - Jennie Medley**

"Mrs. W., aet. thirty-two, mother of four children, three months advanced in pregnancy. From the beginning of her pregnant condition had suffered with constipation, would be worn out after a stool, she was obliged to go to bed; during the three months of pregnancy didn't have what she would call a good movement. At last she took la grippe which Rhus-t., the 1m, helped in twenty-four hours. She felt so well that she was going to get up, when suddenly she was taken with a hemorrhage, not violent, but very steady; the blood was bright red with dark clots. She had no pain, but terrific nausea. She had been in this condition two hours when I

arrived. I immediately gave her a dose of Ipecac, but it neither brought on pains nor stopped the hemorrhage, so all to be done was to wait. The hemorrhage continued and still symptoms did not change. After several hours of watching and waiting she became weak, a profuse cold sweat covered her body, wanted to make her will immediately, would not be persuaded not to. Acon. 2c was given in a broken dose, three teaspoonfuls of water every fifteen minutes; pains come on and the foetus and all, which was of five weeks' development at most, was expelled. She was now exceedingly weak and immediately after delivery I gave a dose of Sul. cm. After several hours she became violently thirsty. She dropped to sleep and in a few minutes woke up with violent pain in the heart. This made me think of Lach. but felt I would be sure of it. I then waited until she fell asleep again. She awoke in the same manner. I then gave her Lach. This relieved her. After taking the Lach. she again slept, but it was only for a very short time, and the pain was still quite severe but less sharp. Two of my brother physicians suggested remedies: one suggested Sepia and the other Pyrogen. Having given Sepia myself in the beginning for the constipation, I knew it would be of no avail now, and I felt certain that Pyrogen would be the remedy to pull her through if it were possible. Accordingly, after watching the temperature gradually rise to 101 ½ °, eight hours after the Lach., I gave Pyrogen 50m; that was about 2 P. M. At 5 P. M. she urinated naturally. One hour later she had a large stool, the first hard lump was removed with the fingers, she was too weak to strain it away. Two hours later she had another soft stool without the least trouble. When the examination was first made at the beginning of the abortion the rectum was piled full of hard stool. These two symptoms encouraged me very much; the Pyrogen wore out every seven hours, which was also the experience of the physician who suggested it. After several doses of the 50m had been given the cm was given the patient. In four days the patient was completely out of danger and in three weeks was sitting up. In exactly four weeks after the abortion menstruation came on with a hemorrhage at twelve o'clock at night. She lost about a quart and a half of blood; this was also full of dark clots. The same physician who suggested the Pyrogen now gave Ipecac. I called several hours after, but the hemorrhage still continued. I gave Pyrogen, which stopped the hemorrhage and the patient made a good recovery. After the first six hours during the abortion I censured myself for not using mechanical measures, but now I am satisfied, as I feel quite sure I would have had a post-partum hemorrhage that I could not manage, being ignorant of how closely Pyrogen resembled Ipecac, in that respect. I also feel satisfied that the patient would have died had she not received Pyrogen, as the only case of septicemia I have ever lost was one which presented just such symptoms.”

(Jennie Medley, M.D., Philadelphia, Pa., Clinical Cases, Proceedings of the 13<sup>th</sup> Annual Session of the International Hahnemannian Association 1892, Case II, p. 315-317)

### **1893 - Severe chills after abortion in a woman aged 32 - John H. Allen**

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

She was then in the midst of one, and never recollect of seeing one more severe. Her teeth were chattering and the whole body shaking; limbs cold; heart action weak; pulse small and thread-like. She complained of feeling cold to the very bone. The chills last fully an hour and are followed with high fever and a burning sensation in the skin; severe aching in all the muscles; restlessness, with a desire to change position as in Rhus; also worse by uncovering and better by warmth and covering up warm. The paroxysm ended with a profuse, sour

perspiration, which produced smarting and itching. Rhus tox was' given in the cm. potency, but with no result whatever. Chills continued to, return every three or four hours.

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

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

Forty-eight hours later the contents of the uterus were expelled, with a few plains and very little hemorrhage, though it had undergone marked dissolution; but what was most peculiar in the case, it was almost inodorous; the brownish discharge had ceased soon after taking the potency of Pyrogen. Recovery was perfected in this case without further treatment."

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

### **1893 - Chills after abortion in a mother of two children - John H. Allen**

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

Her mother had previous attended her during her confinements and felt confident she could bring her out all right this time as she formerly had, but, unfortunately, after trying forty-eight hours failed to remove the placenta, which she decided was adherent. Being ten miles away from a physician she had taken chances, hoping it would be expelled at any time.

After failing they called me, and on investigating her case I found the placenta almost entirely extended from the uterus, and had become very soft and was rapidly breaking down. From the very fetid odor I anticipated a septic condition had already developed in the case which suggested a dose of Pyrogen, but the hemorrhage had been so profuse after the expulsion of the foetus that her whole being seemed to be calling for China, which was administered, giving her prompt relief.

Twelve hours later, I was hastily summoned by her husband, who said that she was having severe chills every half hour and that he was sure she would die in one of them, they were so severe. Not feeling inclined to ride ten miles after night in a pouring rain, I sent a substitute in the shape of three doses of Pyrogen DMM. (Swan), which reached her about midnight.

She informed her husband that during his absence she had had four chills, and insisted on his returning at once for her physician, but after some persuasion he induced her to take a powder of the potency, and within thirty minutes she went to sleep and slept until late in the morning. Improvement followed, with no return of the chills."

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

### **1894 - Two fever cases - H. C. Morrows**

„Mrs. M., three weeks after parturition. Chill every day about 11 A.M. Chill commences between the shoulders and extends to the shoulders and back of the arms. Chilliness aggravated by draft of air. Heat with chilliness if wind strikes her. Aching in back and legs

severe during all stages. *Chill preceded by dizziness*, even when sitting. Headache in occiput; extends there from the nape of the neck. Thirst for large quantities of cold water frequently in all stages and apyrexia. Aching in sternum during chill and heat. Bed feels hard at night. Very restless. Pyrogen<sup>m</sup> (Swan) cured.

I will add that the lochia had not yet ceased, but were thin, watery, and very offensive.

Mr. L. Chill every day about 10 A.M. Chills run up and down back. Thirst before and during chill and fever. Short chill and long lasting fever. Terrible headache during fever, and face as red as a beet. Fever lasted until in the night, when it went off with profuse perspiration. Very severe aching all over the body - bed and pillow felt very hard. Very restless, rolling and tossing about the bed. Pyrogen<sup>cm</sup> (Swan) cured the chill and fever, but had to be followed by Rhus tox.<sup>cm</sup> to remove the effects of sprain in lumbar region produced by lifting. In this case Baptisia was given before the Pyrogen, but did not benefit any. This case shows that Rhus tox. follows Pyrogen well.”

(H. C. Morrows, M.D., Sherman, Texas, Pyrogen, The Medical Advance vol. 31 (1894), p. 233-234)

### **1897 - Unbearable back pains in a man who has not been well since he had the grippe - W. A. Yingling**

"February 6, 1897. Mr. C., aet, 31. Has had the grippe off and on for eight years, or rather he has not been well since he had the grippe under the care of an allopathic physician. Now has a very severe pain clear round the body and small of back; a pain or steady ache which left the circle round the body, and settled in one large place in and a little above the small of the back; *very severe and unbearable. Worse when quiet and from continued motion. Better when first moving and directly after moving; changing position; passing urine. Very restless* last night, twisting and turning all the time; his wife said he would at times turn clear over in bed without seeming to touch the bed, and *very quickly*. Occasional pains in the forehead, a dull shooting pain. *Thirsty for small quantities of water frequently. Desire to change position* often and from place to place. Feels as if he would break in two if lying in one place too long. Face indicates his great suffering.

Pyrogen<sup>cmm</sup> (Sw.), three doses two hours apart until better.

Prompt and rapid relief from the restlessness and pain. He became quiet within a few moments, with rapid diminution of suffering. On a slight aggravation the same night, about 12 hours after first dose, he took the second powder with permanent relief."

(W. A. Yingling, M. D., Emporia, Kansas, Clinical cases, Proceedings of the International Hahnemannian Association 1897, p. 272-274)

### **1902 - Rheumatism of the right knee - Dr. Dunn**

“In the fall of 1899 my old enemy, rheumatism, settled in its old haunt, my right knee. The attack was not severe, therefore but little was done. It remained all winter about the same, the joint feeling stiff and sore after rest, but limbering considerably with use; however, if exercised long the lameness and soreness increased. There was no acute pain when at rest, but a sore, boring, burning sensation. In June of the following year I went east and did more than my usual amount of walking, after which it grew rapidly worse, so that I could scarcely get about or bear any weight upon my right limb.

Upon lying down the discomfort would increase, and at night the only relief for an hour or two was in constantly moving the afflicted member; would frequently rise and take a few

turns about the room. After a variable length of time would drop asleep and rest very well the remainder of the night.

I was also greatly tried while riding. No matter what the position in a carriage, the pain would shortly begin, boring, burning and occasionally stabbing. Constant moving would follow, and the greatest and only relief was from hanging my foot outside and allowing it to swing. After perhaps an hour, could ride quite comfortably, the pain ceasing for that time.

Among the various remedies I will mention *Rhus*, *Bry.*, *Colch.* high and low. Dry heat, hot baths, etc. Our old and tried friend, Dr. Wakeman, kindly listened to my "tale of woe" and prescribed *Pyrogen* c.m. one dose. About a week later my knee was perceptibly improved, and in two months I pronounced myself practically well. Have taken nothing since to this date, November, 1901. The past two or three weeks have a slight return of the old trouble. Shall I repeat the single dose? Yes, in ten days, relieved."

(Dr. Dunn, Centralia, Illinois, *Pyrogen in Rheumatism*, *The Homoeopathic Recorder* vol. 14 (1902), p. 74-75)

### **1904 - Septic fever after confinement, in a woman aged 30 - J. E. Huffman**

"Mrs. W., age 30. Has three children living and three or four abortions to her credit.

Jan. 9, 1904. At 9 A. M. a boy was born after normal labor. Evening of second day the breasts contained considerable milk. Morning of third day appeared well and cheerful. At 7 P. M. telephoned that, she was very sick. Arrived at house about 7:30 and telephoned Dr. McNeil to come and then proceeded to write the following symptoms:

Had chill at 3 P. M. and shook for 15 minutes; another a little later and shook for 5 minutes.

Drawing pain in uterus. Drawing pain in throat. Least air causes chilliness. Touch of hands on abdomen after careful warming caused chilliness. Cloth wrung out of very hot water felt cold to external genitals. Pain in right ovary, extends to uterus and from ovary up right side, < lying on either side. About 4 P. M. headache began, like several hammers in frontal region for half hour. Dark flashes before eyes occasionally. Eyes burn. Feel bloated and pass much gas. Wants body hot and head cold. Temperature 101.5 and pulse 100.

Dr. McNeil arrived at 8:45 and after looking over the case suggested *Pyrogen*, and at 9 we gave one dose of the cm. Saw her again at 11 P. M. and found her much better. Slept from 11:30 to 2:30 A. M. when she had slight chill.

Jan. 10, 1904. All symptoms less severe. Thirst since last chill. Wants warm drink and much at a time. Raises sputa that tastes like "matter." Abdomen not so sensitive to cold today.

Lochia scanty after the last chill. Head feels sore all over. 4 P. M. Sputa not so offensive in taste. Not so much thirst. Less pain in the uterus.

Lochia became offensive but all symptoms improved till the 15th when she was free from pain and made good recovery getting up on the fourteenth day from confinement.

One dose of *Pyrogen* was all the medicine given.

She said she had had blood poisoning at second confinement and from experience then, expected to be curetted and douched till she could get no rest, but was agreeably surprised at mild, but effective treatment."

(J. E. Huffman, M. D., H. M., San Francisco, Cal., *Clinical cases*, *Proceedings of the International Hahnemannian Association* 1904, p. 272-273)

**1906 - Abszess des Felsenbeins und nach Operation folgendes wochenlanges pyämisches Siechtum bei einem 9jährigen Mädchen, das zum Sterben aufgegeben war - G. Boeckh**

„Die mir schon seit 8 Jahren bekannte, jetzt 9 Jahre alte Rosa K. in C. war am 18. Oktober plötzlich unter hohem Fieber und Schluckschmerzen erkrankt. Aus ihrer Vorgeschichte verdient erwähnt zu werden, dass sie mit 1 ½ Jahren eine Diphtherie durchgemacht hat, nach deren Verlauf eine Neigung zu scrofulösen Erkrankungen zurückblieb, welche alsbald in Gestalt von Lidrandkatarrhen, Drüsenschwellungen und namentlich als chronischer eitriger Mittelohrkatarrh (links) in die Erscheinung traten. Der letztere zeichnete sich stets durch einen ungemein übelriechenden Ausfluss aus; die Hörkraft war fast ganz geschwunden, seit ich das Kind kenne. Im Übrigen machte die Kleine einen recht guten Eindruck; sie war gut ernährt, sogar etwas reichlich mit Fettpolster versehen, war intelligent und hatte ein blühendes frisches Aussehen.

Am 18. Oktober 1905 fand ich das nun plötzlich schwer erkrankte Mädchen in hohem Fieber (40° C. und 120 Puls) und untersuchte alsbald die Fauces wegen des, allerdings nicht in diese, sondern in die seitliche linke Halsgegend lokalisierten, intensiven Schluckschmerzes. Es fand sich höchstens eine leichte Rötung der Fauces, kein Belag. Ich stellte sodann die genaueren Grenzen des Schmerz-Gebietes am Hals fest und fand, dass dieses etwa dem Verlauf des Sternocleido bzw. der darunter befindlichen Gefäße entsprach und sich vom Schlüsselbein bis etwa zum Proc. mastoideus verfolgen liess. Ich erkundigte mich nach dem Stand des Ohrenleidens und hörte von der Mutter, dass der Ausfluss gegenwärtig vermindert sei. Eine oberflächliche Untersuchung des Ohrs ergab keinerlei Druckschmerz an den bekannten Stellen. Fehlende Luft- und Knochenleitung. Das Kind klagte nicht über Ohrenweh, höchstens über einen diffusen, aber mäßigen Kopfschmerz. Ord.: Aconit 3. Wickel.

Am 19. und 20. Oktober bleibt das Fieber auf gleicher Höhe, es treten häufige Schüttelfröste auf. Der intensive Schluckschmerz macht die Nahrungsaufnahme fast unmöglich; das Kind bekommt dazu noch eine stärkere Diarrhoe und eine diffuse Bronchitis. Sein Zustand ist ein sehr ernster, zumal das Herz jetzt 140 Schläge in der Minute macht.

Nachdem ich bereits am 18. Oktober den Eltern meine Befürchtung ausgesprochen hatte, es handle sich hier wohl um eine mit dem chronischen Ohrkatarrh in Zusammenhang stehende Erkrankung, welche unter Umständen, um den vorhandenen Eiter Abfluss zu verschaffen, chirurgische Hilfe notwendig machen werde, verlangte ich, nachdem ich meiner Sache gewiss war, dringend die Überführung des Kindes in die Klinik eines mir bekannten Ohrenarztes. Nur ungerne und mit Widerstreben entsprachen die Eltern meinem Wunsche; das Kind wurde noch am gleichen Tage (21. Oktober) operiert (Radikaloperation) und als in den auf die Operation folgenden 8 Tagen keinerlei Wendung zum Besseren eintrat, obgleich aus dem Felsenbein und aus dem Sinus transversus große Mengen stinkenden Eiters entleert worden waren, entschloss sich der Ohrenarzt zur Ausräumung der V. jugularis bis herab zum Truncus anonymus; er fand sie völlig obturiert von eitrigen Thromben. Auch diese zweite Operation brachte keine Entfieberung; im Gegenteil. Der Zustand verschlimmerte sich täglich, so dass der Kollege vom Spezialfach den Eltern alle Hoffnung auf Rettung des Kindes nahm; es werde sicher sterben. Mir schrieb er wörtlich: „Es folgten nach der zweiten Operation noch wochenlange Schüttelfröste, Lungenabszesse mit entsetzlich stinkendem Auswurf, ein Leberabszess, der in den Darm perforiert zu sein scheint.“

Damit das Kind wenigstens daheim sterbe, nahmen es die Eltern, da nach Aussage des Ohrenarztes doch nichts mehr zu retten war nach Hause, wo ich es am 6. Dezember besuchen konnte. Das Mädchen war kaum wieder zu erkennen, ganz abgezehrt, bleich mit bläulichen

Lippen; im Zimmer herrschte ein Fäulnisgeruch und machte den Aufenthalt darin nur bei geöffneten Fenstern und unter Terpentin-Verstäubung möglich. Die Quelle des üblen Geruchs war der immer noch vorhandene, reichliche Auswurf aus der Lunge. Bei der Untersuchung der Respirationsorgane fand ich über der ganzen linken Lunge vorn und hinten ein nach unten an Intensität zunehmendes lautes Rasseln, welches oben das Atmungsgeräusch noch vernehmen liess, unten dagegen vollständig übertönte; in diesen unteren Partien herrschte auch verkürzter Schall. Die Temperatur schwankte täglich zwischen 38.5 und 39°, der Puls zwischen 100 und 120. Appetit fehlte ganz. Dagegen litt das Mädchen unter starkem Durst. Im Übrigen war es apathisch und nahm von meinen Besuchen und Untersuchungen kaum Notiz.

Ich verordnete unter diesen Umständen eine möglichst kräftige Ernährung unter Verabreichung mäßiger Gaben stärkeren Weins (Samos, Tokayer, Malaga); sodann täglich 1-2malige Rumpfpackungen, und endlich gab ich innerlich einige Tage Lachesis 6. und dann Pyrogenium 10., jedes täglich 2 Mal (5 gtt.).

Um den wenig bemittelten Eltern, welche die Kosten der fast 10 wöchentlichen Spezialbehandlung zu tragen hatten, möglichst wenig neue Ausgaben für ärztliche Behandlung zu bereiten, sah ich erst nach 2 Wochen wieder nach der Kranken <sup>(1)</sup> und hörte zu meiner großen Überraschung, dass es soeben unten im Bäckerladen Brot hole; es gehe ihr so gut, dass sie von diesem kleinen Gang im Haus nicht hätte abgehalten werden können.

(1) Ein häufigeres Besuchen war mir auch deshalb nicht möglich, weil ich dem das Kind noch jeden zweiten Tag verbindenden Spezialkollegen hatte sagen lassen, ich wolle mit seiner Erlaubnis das Mädchen dann und wann besuchen, um den weiteren Verlauf der Krankheit zu beobachten.

Mein Staunen wurde aber noch größer, als meine Kranke nach wenigen Minuten zur Tür hereinkam mit frischem, fröhlichem Gesicht und vollen runden Backen. Zuerst war ich misstrauisch und den Eltern fast böse, dass sie so leichtsinnig waren, das Kind aufstehen zu lassen. Indessen musste ich mich bei der körperlichen Untersuchung überzeugen, dass bei der Kranken eine gewaltige Veränderung vorgegangen war: die Abmagerung war geschwunden, die frühere Körperfülle wieder erreicht. Fieber war seit 14 Tagen keines mehr da, der Puls schlug 80 Mal in der Minute, die Operationswunden, welche bei meinem letzten Besuch noch stark eiterten, waren vernarbt; Husten und Auswurf hatten aufgehört und eine Untersuchung der Lungen liess nicht nur noch l. h. u. einen schmalen Streifen mit spärlichen, schwachen Rasselgeräuschen, ohne Dämpfung, finden.

Meine Mittel, zuletzt nur Pyrogenium 10., waren pünktlich gegeben worden. Der Appetit gestaltete sich allmählich zu einem vorzüglichen, und das Kind lebte zusehends auf.

Ich irrte mich nun wohl nicht, wenn ich diese ganz plötzliche Wendung zum Besseren der homöopathischen Verordnung von Lachesis 6. und namentlich von Pyrogenium 10. zuzuschreiben wage. Und ich schmälere damit das zweifellose Verdienst des tüchtigen Spezialisten nicht, denn die erste Lebensrettung verdankt das Kind sicher seiner Technik: er hat getan, was er tun konnte. Die Rettung aber aus dem pyämischen Siechtum war der Homöopathie vorbehalten; hier versagte die allöopathische Behandlung, wenn überhaupt von einer solchen gesprochen werden konnte. Die Instrumente des Operators erreichten einen kleinen Bruchteil des im Körper vorhandenen Krankheitsproduktes, unsere Mittel dagegen durchdrangen den ganzen kranken Körper und verhalfen seinen Verteidigungskräften zum Sieg über die Blutvergiftung.“

(Dr. med. G. Boeckh, Cannstatt, Casuistische Beiträge zur Pyrogenium-Wirkung, Allgemeine homöopathische Zeitung Bd. 152 (1906), S. 33-34)

### **1906 - Peritonitis mit nachfolgendem kindskopfgroßem Beckenexsudat bei einer 29jährigen Frau - G. Boeckh**

„Die günstige Wirkung des Pyrogeniums in obigem Fall veranlasste mich, das Mittel auch in Folgendem zu versuchen.

Eine 29jährige Frau, welche in 6jähriger Ehe einmal totgeboren und später unter starkem Blutverlust im 3. Monat abortiert hatte, erkrankte plötzlich unter stürmischen Erscheinungen an Peritonitis (Schüttelfrost, fliegender Puls von 130-140, Temperatur 40.5°, ungeheure Empfindlichkeit des Abdomens gegen leiseste Berührung), deren erstes akutestes Stadium mit Bryonia 3. überwunden werden konnte. Die Temperatur ging allmählich auf 38.5-39° herab; als Folgen des ersten Krankheitsansturmes konnte ein reichlich kindskopfgroßes Exsudat im Douglas und rechten Parametrium, eine Anschwellung des linken Ovariums und eine leichte septische Endocarditis (Mitralis) festgestellt werden. Der Zustand blieb nach Beginn der Krankheit ziemlich gleich; etwa 6 Wochen nach Beginn der Krankheit traten ungemein heftige rheumatische Schmerzen im rechten Ischiadicus auf, begleitet von einer kaum zu bezähmenden Unruhe der sonst geduldigen Patientin und bald darauf eine außerordentlich profuse Metrorrhagie mit Abgang faustgroßer Koagula (nachdem 4 Wochen vorher sich die Menstruation nur wenige Stunden in Spuren gezeigt hatte).

Ich gab Pyrogen 10., morgens und abends 5 Tropfen und beobachtete von da an nicht nur einen raschen totalen Abfall der Temperatur auf die Norm, eine schnelle Abnahme der Pulsfrequenz von 100 auf 80, sondern auch eine mir wunderbare Verkleinerung des Beckenexsudates von Kindskopf- bis auf Kleinapfelgröße im Zeitraum von 3 Wochen, ohne dass außer Pyrogen irgend eine therapeutische Maßnahme getroffen worden wäre (von hydropathischen Aufschlägen abgesehen, welche in so kurzer Zeit eine so mächtige Resorption und allgemeine Entgiftung nicht hätten bewerkstelligen können).

Wie mir scheint, haben wir in Pyrogen, einem Isopathicum, ein sehr wertvolles Mittel für Fälle schwerer Sepsis, sowohl für reine Septikämie und Saprämie als auch für im Sinne der Sepsis komplizierte andere schwere Erkrankungen, wie Typhus, Phthisen des späteren Stadiums (Kavernen!), gonorrhöische Metritiden und Pelveoperitonitiden etc. Die Wirkung war in meinen beiden Fällen ein so in die Augen springende, auffallende, dass ein erfolgreiches Eingreifen des Pyrogeniums ernsthaft nicht in Zweifel gezogen werden könnte. Vielleicht gibt meine kurze Notiz einem oder dem anderen Kollegen Veranlassung, seine Erfahrungen mit obigem Mittel bekannt zu geben.“

(Dr. med. G. Boeckh, Cannstatt, Casuistische Beiträge zur Pyrogenium-Wirkung, Allgemeine homöopathische Zeitung Bd. 152 (1906), S. 34-35)

### **1908 - Septic condition due to curettement in a woman aged 30 who was suffering from a terrible dysmenorrhoea - Nettie Campbell**

“Mrs. B., age 30, married, no children. I was the fourth physician in the case; history as follows: Terrible dysmenorrhea, following voluntary suppression of menses the month previous by the use of cold sponge; pain in right ovarian region, bearing down sensation, flow clotted.

A member of the staff of the Chicago hospital had pronounced it an abortion and two other prominent physicians had confirmed the diagnosis, and told her an operation consisting of a curettement and removal of the right tube and ovary was the only alternative; this she emphatically objected to as she well knew she was not pregnant.

A trained nurse was ordered and patient put to bed, under the plea of an examination by the speculum, and, with the consent of the husband, a curettage was performed without an anesthetic. The nurse held her, while her screams drove even the husband from the house. After this she did have temperature; none up to this time. The third day the doctor came to repeat the curettement, but she refused absolutely.

At this stage I was called and found a septic condition due to the curettement, which first of all seemed to require treatment.

Gave pyrogen c. m. in water every hour, which is my rule till pulse and temperature are normal.

1. Pulse was 80 and temperature 104.
2. Chills severe, especially of bones and extremities, it was beginning between the shoulders.
3. Drenching perspiration, requiring even pillows to be changed.
4. Tongue coated dark brown.
5. Taste bitter.
6. Pain right ovary, paroxysmal in character.

In twenty four hours the tongue was clean; bitter taste gone, (the taste under pyrogen is given in text books as sweet - it seems to be sweet after pus has formed, but I have often found it bitter in septic conditions where there was no collection of pus); temperature and pulse normal; chills and drenching perspiration a thing of the past.

The pain in the ovary returned, in paroxysms, and was relieved only slightly by cloths wrung out of water almost scalding. No really distinctive symptoms came to light and I am sorry to say I tried remedy after remedy in vain until I was ashamed. The husband who all along favored an operation began to press it strongly.

Finally, after going over the ground repeatedly in regard to the menses, I found that getting up and walking to the bath room would always cause her to flow more when she menstruated; this was also the case after the curettage, which was three weeks from the previous menstruation.

With these characteristics, "flows only when moving about," and "flow too soon," all the less distinctive symptoms clustered.

1. Cold, clammy limbs, more so when excited or nervous.
2. Frequent desire to urinate, with burning and smarting in the urethra.
3. Pressure in rectum with constant desire to go to stool.
4. Worse by jar of bed, by weight of bed clothes, and better by supporting the abdomen and by pressing upon the vulva.

Gave liliun tig. c. m. and got immediate results. The pain left rapidly and did not return in the six months following.

I wanted to make an examination to see if the ovary and uterus had righted themselves, but she had suffered so much she begged me not to.

There was still a sore, bruised feeling in the pelvis and at the time of the next menstruation I gave arnica c. m. on this one symptom, sore bruised feeling, presenting standing erect, with a speedy relief of all soreness.

I made an examination after the menstrual period and found the ovary and uterus in a normal position and no further complaint of any kind."

(Nettie Campbell, Pyrogen and Liliun tigrinum in a surgical case, Proceedings of the 29<sup>th</sup> Annual Session of the International Hahnemannian Association, 1908, p. 193-195)

### **1920 - Septic condition after induced abortion of twins at fifth month - H. M. Maynard**

"Mrs. S., following induced abortion of twins at fifth month, developed a septic condition with high temperature, chills and sweat. For a period of a week she had so-called regular treatment - douches, Fowler's Solution, curettage, etc. She steadily became worse - developed cough with bloody expectoration and consolidation in spots in both lungs. Her lochia was thin, not much odor, the uterus was still up nearly to the umbilicus.

Every two or four days she would have a hard chill followed by fever and profuse sweat. Thirst constantly for ice water not only during all stages of the paroxysm, but other times, and ravenous appetite. Lying on the left side would start her coughing at once, and any exertion caused profuse sweating.

Phosphorus 50m. cleared up the lungs, stopped the chills and fever, but after the temperature had been normal of nearly ten days her joints became stiff, starting first in the shoulders, then knees, and she became nearly helpless. The pain was seldom very severe, but the limbs were very sore to pressure, and she wanted to be turned often and to be kept very warm. Pyrogen 50m. cleared up the case promptly."

(Herbert M. Maynard, M. D., Boston, Mass., Clinical Cases. Read before the annual convention of the International Hahnemannian Association, Cleveland, Ohio, June, 1920. The Homoeopathic Recorder vol. 35 (1920), p. 440)

### **1943 - Acute appendicitis complicated with pneumonia in a man - W. Leroy Bonnell**

"Homoeopathy in the truest sense means curing, if possible, by a single remedy, and surgery to a true homoeopath means that medicine is a failure. When we of the homoeopathic school are placed in absolute control of our patients welfare, and life and death rests on our every decision, we often find in an extreme emergency that some of our wonderful remedies surpass even our fondest expectations.

I have never claimed to be better than an average homoeopathic prescriber, but every day and every week I have sought to improve my ability in prescribing. Of times in an emergency I have found that my thirty-five years of experience and the late hours I have spent in extra study unexpectedly have given me wonderful returns and helped my patient to a speedy recovery. It is this satisfaction that has prompted me to accept even a small place on this program and report a surgical experience.

On the evening of January 22, this year, I closed my office at 4:30 and left with my wife to drive twenty miles to visit my father-in-law who was quite ill. When leaving we informed our nurse that we might not return until nearly midnight. About half an hour after our departure, one of my regular patients called for me to come immediately to see her husband who was seriously ill with an acute appendicitis. When the nurse informed her that I was out of the city for a few hours she continued to call at frequent intervals, hoping that I might have returned sooner than expected. Finally in desperation they decided to call an "old school" physician. This doctor reported a temperature of 102.5°, pulse 98, terrible pain over McBurneys point, and an acute appendicitis that needed surgery at once. On being informed that the family physician was temporarily out of town and that they had called him for relief, this doctor

hurriedly mixed two small white tablets in hot water, gave the solution hypodermically and left. About 4:30 a. m. I was urged to hurry to the sick mans home.

On examination I found a dangerously ill patient. The weather was 5° above zero, and the patient, in great pain and suffering, had gotten out of bed, lain down on the cold floor and rolled. His temperature was 104.4°, pulse 124 to 128. This man had suffered from a mitral insufficiency for over eight years, and a right inguinal hernia for over ten years. I diagnosed a severe acute appendicitis complicated with a bad case of bronchial pneumonia from exposure on the cold floor.

The tongue was very much coated, foul breath, and every cough caused the hernia to stand out very noticeably. I shall never forget the expression on his face. Fully aware of the condition of his heart and other complications, I asked for consultation and we agreed on the head surgeon of one of our hospitals, who happens to be president of our State Hospital Association this year.

When he arrived and examined the patient he promptly reported that an operation meant sure death. In fact, that if either surgery or medicine was decided upon, it meant death in twenty-four hours. The surgeon recommended that no other consultations be held as it was useless. When I left him at his home he informed me that he did not envy me my responsibility, for he doubted if my patient could last more than twenty-five to thirty hours. I hurriedly drove to my office, some twenty-two blocks, and all the way there I could think of nothing but pus, pus, pus, pus in the lungs from pneumonia, pus forming in the appendix, a typical pus tongue, with all the other pus “red flags” presenting themselves.

Like a wireless message, Pyrogen (or Pyrogenium) kept ringing in my ears. Time was precious and my patient was dangerously ill. I rushed to my office and got some pyrogen 200. It had never failed me. Upon opening my case I found I had no 200th; all I had was a bottle of 5M. Surely the totality of the symptoms called for Pyrogen, and I decided I would risk my patients life on Pyrogen 5M., one dose. I hurried back to him and I myself gave the one dose on the tongue. This was early in the morning. Again at 11:30 a.m. I called to see my complicated case; this was six to eight hours later. The temperature had receded from 104.4° to 101.6°, nearly three degrees. The abdominal pain especially was lessened, and breathing was less difficult, more regular, and, best of all, my patient had had nearly two hours rest at two different intervals.

That morning when I had prescribed the single dose I decided to remain with my patient for fifty or sixty minutes. I feel sure that the homoeopathic medicine given this boy caused an improvement in no more than twenty-five minutes. Even the patient informed me that he really could tell that it gave him more relief, and I was asked if there was a narcotic in the medicine.

The second morning, a little over twenty-four hours, my patient was still improved, temperature 101°, pulse 96, and more rational. On the fourth day the surgeon who had been in consultation on this case called me by phone, stating that he had not seen a death notice in the paper for my patient. When I replied that his temperature was down to 99.4°, and his pulse was 86, he replied that it seemed impossible. From that morning my patient went on to an uneventful recovery.”

(W. Leroy Bonnell, M.D., Chiackasha, Oklahoma, Pyrogen in Pneumonia complicating appendicitis, The Homoeopathic Recorder vol. 59 (1943), p. 16-18)

**1946 - A serious attack of “wartime flu” in a young man invalided out of the army on account of shrapnel wounds in his ankle - Dorothy Shepherd**

“There was another case that caused me some anxiety, as it would not respond to the usual remedies. He was a young man invalided out of the army on account of shrapnel wounds in his ankle. The rest of the family, both parents, several brothers and sisters, responded quickly to the treatment given, temperatures came down within twelve to twenty-four hours. They were kept in bed for several days, after the first day of normal temperature, and kept for two or three days only on a fruit diet which was gradually augmented by ordering vegetable soups and egg dishes. His mother could not understand why her eldest son did not get well as quickly as the rest, and put it down to the effects of the war wounds. She was not far wrong either, as it turned out in the end. After nearly a week of pyrexia I had visited him at all hours of the day and night to get all the symptoms collected together, nurses were at a premium just at that time, and one depended on the relatives, provided there was anybody left to do the nursing, and I carried several door keys in my pocket to let myself into the various houses. Well, eventually I got the following disease picture: very high, steadily rising temperature, going up to 105° at night, the pulse remaining somewhere about 100-110, therefore the pulse and temperature was quite out of proportion. He was extremely restless, never staying long in one position, very confused as regards the number of extremities he owned, there seemed to be so many arms and legs in the bed; he complained of the extreme hardness of the bed, his back was so painful and the bed was so hard as a board. He had received *Rhus tox.* for his restlessness, also *Arnica* for the hardness of the bed and (?) remote effects of war injuries; also *Baptisia*, which seemed to correspond to the confusion of the mind and the sensation of there being more than one person in the bed; nothing would touch the illness, however; the weakness went from bad to worse. There were drenching sweats, an offensive, penetrating odour from his perspiration; he had to change his shirts several times in the twenty-four hours; his mouth and tongue were foul, and yet *Mercury* did not touch him. I did not give up hope, but continued to study the case. In the back of my mind I knew there was something that would act as a key to open the door to this maze, this complicated septic fever. Suddenly it came to me, there was a certain remedy which has this arrhythmia of pulse and temperature, a high temperature with a low pulse or vice versa. This was *Pyrogen*, and in reading up *Pyrogen* in *Materia Medica*, there was the simillimum; the extreme restlessness, the bruised feeling of the parts lain on, the relief by movement of feet, by change of position; offensive, disgusting perspiration, great weakness and lassitude; it was all there. So *Pyrogen cm.* - the only potency I had except the *mm.*, both Heath potencies from America - was given two-hourly in a watery solution, and by the morning, a few hours after the late night visit - I found the patient had slept more restfully and the temperature was down to 100°, that night, within twenty-four hours of starting this new medicine, the temperature was normal, and it kept normal after that. I continued the remedy for a couple of days and then finished off with one dose of *Pyrogen mm.*, dry on the tongue. I do not remember now, whether he had a constitutional remedy at the end of “seven days bed,” after the temperature reached the normal level. Anyway, the patient was kept under observation for several years afterwards, and he had no after-effects from his serious attack of “wartime flu,” and on the whole he came off quite lightly, compared with many other victims; he was only in bed for a little over two weeks: eight days’ temperature and seven days’ recuperative rest. In this case normal influenza, if one may be allowed to call any influenza normal - was complicated by previous inoculations of the various typhoid, paratyphoid and cholera bacilli; he had had anti-malarial inoculation, he had been vaccinated, he had anti-streptococcal injections and inoculations against tetanus, and he could not remember what other inoculations he had had to submit to. I

came to the conclusion that he was full of septic matter, and his blood stream was a battlefield of all sorts of serums and bacteria, and hence the drenching sweats, the high temperature, the offensive odour and the extreme prostration.

In my own mind I am absolutely convinced that this young man would have been another of the numerous victims of the fatal influenza epidemic, if it had not been for our *Pyrogen*.

A number of years passed by, but the lesson one was taught of the action of *Pyrogen* was never forgotten."

(Dorothy Shepherd, M.D., *Magic of the Minimum Dose*, 2<sup>nd</sup> edition 1946, *Pyrogen* (After Dr. George Burford), p. 168-189)

### **1947 - Very bad and choking cough caused by the stench of an excavated rotten cadaver - S.P. Koppikar**

"A gentleman was suffering from very bad asthma. More than the dyspnoea, which was of course there, his cough troubled him greatly. It came in sudden fits, at any time of the day, with choking and redness of the face, lachrymation and involuntary urine, and would leave him completely breathless for three to five minutes. The history of its beginning was interesting. He had been officiating as a magistrate in a town and in some criminal investigation had to be present at an exhumation. The cadaver was practically rotten as it was an old one, and the stench was unbearable, but he had to suffer it for more than two hours. It fairly choked him. When he went home, the feeling persisted and even after a thorough wash, the sick feeling would not leave him. That night he had a severe cough, which became worse in spite of all treatment for nearly six months. Then for a time he was better. After a year, he had to go to attend a marriage in a village. There all the children were having whooping cough. He again got a severe cough there, which had persisted, till he saw me. Seeing the cough, I had thought of various remedies like Drosera, Belladonna and others; but when, the cause became known, I felt it would be better to give a remedy indicated by the cause. *Pyrogen* 200 put a stop to his cough at once. After one month, there was a slight return. Could there be any "suppressed whooping cough" to be tackled? The only remedy, which could cover both the sepsis and the whooping cough was *Carbo vegetabilis*, one dose of that in the 1M potency has cured him."

(S. P. Koppikar, M.D., *Causation*, *The Homoeopathic Recorder* vol. 63, September 1947, p. 81)

### **1976 - Complications after appendectomy in a boy aged 10 - Pierre Schmidt**

"Now my last case. I must take a case where really one should see whether homoeopathy is really the remedy for children, and not merely for those who believe in it and for those just psychic cases. You know, I was knowing a young assistant of a professor of Surgery in hospital, a very good professor in a marvellous clinic in Paris. He had an assistant of his who was interested in homoeopathy. One day his wife had a child and a few days later she had hardness of the breast, fever, and pain at 12 o'clock. He asked me what to do. He was preparing to open (incise) it and I came and I found there was hardness and it was better from pressing, and I gave *Bryonia* 10M. The next morning, no pain, no fever, and in two days, she was able to give her breast to her child, and everything was over. So much touched and pleased was he that he said, 'I will be pleased if you will help my children also.' 'Sure', I said and gave him different remedies and he tried homoeopathy with much success.

Now, one day a boy of 10 years came at the outdoor of the polyclinic. He came with his parents, because his parents found that he had often pain in the abdomen. His mother was fearing appendicitis, and [as the assistant said,] 'So I examined him and I found there was really nothing, only a little tenderness. There was no case for opening the abdomen and I said he can come again after a few days or a few months when there was something more important. A few days afterwards, at midnight, the child came with his parents, unconscious, belly absolutely rigid with peritonitis. We had to open it at once and when we had opened the abdomen, a jet of pus was coming out of the opening - the abdominal cavity was full of pus. It was a perforated appendicitis. This, we see sometimes. So, with our new wonderful remedies, you know, *Penicillin*, *Streptomycin*, in and out of the body, by mouth, injection etc., within 3 days the child was well and the parents came and thanked the professor. They said they were very pleased. He said, 'I think the child is saved and I am very pleased at the modern way of therapeutics and the weapons we have now to fight microbes.'

[And, as the assistant continued,] 'This was all right. Now one day later the child was not so well. He could not eat anything or tolerate any liquid because he was vomiting at once. So he began to emaciate. After some days there was complete disintegration, and he could not eat, he could not drink. They tried to give enema. But he could not support it. They tried to give an injection of glucose, different preparations you know, solutions and so on. It was causing a swelling there and was remaining like that. No absorption. Then they became desperate. So I was called in. The boy could not speak. The poor one had emaciated much, he had high fever and the case seemed lost. There was septicaemia. So the professor called the parents and said, 'I am very sorry. I did my best, but the infection came again. We have tried everything. I can do nothing more, the child is probably lost. We tried even, at 10 o'clock and then again at 4 o'clock, we tried to give an injection of *Penicillin* but the child is only 10 years of age and his veins are very small. We must take an incision there and find it and so on; it is very difficult.' So at 4 o'clock after the professor's visit, the assistant phoned me [Pierre Schmidt] and said, 'Doctor, I am so sorry about this child, I have taken him to my heart. I have tried my best. I was so pleased to see him get well and now he is going from bad to worse and he is lost. Have you any advice? Anything whatever that I can do to help him?'

Surely, homoeopathy has so many weapons. But it was not a case to be laughed at. It was a very serious case. I said, 'The first thing, you give him *Arnica montana* 10,000.' Why *Arnica*? Because there is zymotic disease, there is infection, there is traumatism (by surgery), because he has been opened up - traumatism. The remedy for traumatism is habitually *Arnica*. So, *Arnica* may help him. It is a marvellous remedy. 'Give him *Arnica* at 4 o'clock today and tomorrow in the morning when he wakes up, give him one dose of *Pyrogenium* 10 M.'

Like Wilhelm Tell in Switzerland who was asked by the terrible man in Austria (Gessler) to put an apple over the head of his son, and to shoot it with one arrow, you know, the Swiss homoeopaths are also like that (sharp shooters) when they give one dose of the remedy. So in the evening the professor asked his assistants to try to give him an injection of *Penicillin*. Others were not keen because they knew what it was to go into the vein of a boy of 10 years. Besides this, they had done that before. He was not absorbing *Penicillin*. So they said, 'What is the use, beginning this again? Only to satisfy the parents? To say, we have done something? But this is very wrong.'

So he said he will come and see the patient at 10 o'clock, and for the first time in many days, the patient was asleep. They said, 'Sleep is a very good boon. So let him sleep until tomorrow morning.' And the assistant said to the nurse, 'Give him the powder tomorrow at 6 o'clock.' At 6 o'clock the nurse gave him the powder, *Pyrogenium*, and at 9 or 10 o'clock when the professor came with his assistants and you know, the corps of the ballet with him, he went

into the room with all the white shirts to look at the patient, he found the child smiling and saying, 'Please give me something to drink.' But the nurse said, 'I will not give him something to drink because I know he will vomit again at once.' The professor said, 'Try it.' So they gave him a tiny half-spoon of water. They put it into the mouth and he was so pleased and everyone was so pleased they were looking with their mouth open, and it was not vomited. He asked for more and then he drank the whole glass, you know. After this they tried to give him a little milk. He could retain this very well and can you believe, two days later the drain was removed, for there was no pus to be drained. And five days later he was leaving the hospital cured not knowing who had cured him, what had cured him, only that he was cured. And his parents were so pleased.

The other assistants did not know what it was, the nurse did not know what it was. But my assistant went to the professor and said, 'I must tell you, Doctor, I gave him two homoeopathic remedies.' And the professor was very intelligent. He said, 'If ever I am sick I will take a homoeopathic remedy.' "

(Pierre Schmidt, The Art of Case Taking, B. Jain Publishers (1976), p. 48-51)

### **1988 - Septisches Fieber nach schwerem Verkehrsunfall, bei einem 45jährigen Mann - R. Römer**

"R. S. Der 45 Jahre alte Neffe meiner Frau verunglückte bei einem Frontalzusammenstoß mit einem Geisterfahrer am 23.2.81 als Beifahrer im Wagen so schwer, daß er auf die Intensiv-Station eines Münchner Krankenhauses eingeliefert werden mußte, wo er mehrere Stunden lang noch bewußtlos lag. Neben der Gehirnerschütterung hatte er mehrere Rippen gebrochen, die linke Hüftpfanne war abgesprengt und der rechte Oberschenkelknochen im mittleren Bereich zertrümmert, mit Verkürzung des Beins um 4 cm. 4 Wochen später stellte man überdies noch die Fraktur des 8. und 10. Brustwirbelkörpers fest. Wenn auch die Rippen, die linke Hüfte und die Wirbel nach einigen Wochen heilten, so sorgte doch die Verletzung am rechten Oberschenkel in der Folge für Infektion des Trümmerbruchs mit ständigem Fieber trotz monatelanger Dauerinfusion mit Antibiotika. Einzelne Knochenstücke stießen sich im Laufe dieser Zeit ab. Seitens des Stationsarztes wurde dem Patienten gesagt, daß an eine operative Korrektur solange nicht zu denken sei, wie die Infektion noch schwele. Die Blutsenkung war ständig sehr hoch.

Am 3.5.81 besuchte ich den noch immer unverändert mit Fieber und Eiterung im Bett liegenden Neffen auf der Station. Ich fand ihn völlig verzweifelt dem Weinen nah, als er mir vom bisherigen Verlauf und den trüben Aussichten erzählte.

Gerade vor ein paar Tagen habe ihm der Arzt im Hinblick auf das unentwegt hohe Fieber gesagt, am besten reise er nach Lourdes um dort zu beten, daß das Fieber vergehe und das Blutbild normal werde. Nun wisse er nicht, ob er eine solche Äußerung als Sarkasmus oder als Ausdruck völliger Hilflosigkeit auffassen solle. Vor dem Fieberanstieg habe er übrigens zumeist eine Art Schüttelfrost. Als Erreger sei Staphylococcus albus nachgewiesen. Die Darmentleerung sei schon immer flott. - Das rechte Bein ist durch Verriegelungsnagelung in Extension festgelegt, so daß der Patient sich nicht bewegen kann; die aufliegenden Stellen von Rücken und Kreuz schmerzen sehr. Der Patient hat das Bedürfnis, sich soweit er kann, ständig zu rühren. Sein Gesicht ist gerötet und schweißbedeckt, die Temperatur wie jeden Nachmittag um 39° C. Puls 88/Min., also relativ langsam. Ich entschieße mich, dem Neffen eine Dosis von 5 Kügelchen **Pyrogen C 30** auf die Zunge zum Lutschen zu geben und löse

eine zweite in ½ Glas Wasser auf mit der Maßgabe, alle 3-4 Stunden heute und morgen nach Umrühren einen Teelöffel davon zu nehmen.

Am 3.6.81 teilte mir der Neffe brieflich mit, daß die von Stationsarzt ihm anempfohlene göttliche Wendung inzwischen eingetreten sei. Das Fieber sei schon am Tag nach der Einnahme der Kügelchen weggeblieben. Die ständig hohe Blutsenkung habe sich bei der 4 Tage später durchgeführten Kontrolle als fast normal erwiesen, so daß die Ärzte bei der Visite ihm sagten: "Es ist ein Wunder geschehen." Nachkontrollen das Blutbildes und der Senkung, die inzwischen unternommen worden seien, haben normale Ergebnisse gebracht. Er habe wieder guten Appetit, und das Bierchen schmecke ihm wieder. Freilich spüre er noch Schmerz in der Bruchstelle am rechten Oberschenkel. Er hänge nun schon lange nicht mehr am Tropf und könne sich dank Schienung des Beins humpelnd auf den sonnigen Balkon begeben.

Am 17.7.81 ruft der Neffe alarmiert an: Er habe seit einigen Tagen wieder Fieber mit Frösteln, starke Schmerzen im rechten Oberschenkel mit erheblicher Anschwellung dort. Außerdem sei die BSG wieder sehr hoch. Ich übersende ihm sofort einige Dosen **Pyrogen C 30 - C 200**, die er 6 Tage lang in Wasser einnehmen soll. Ich vermute Abszeßbildung, Sequesterabstoßung.

Am 24.7.81 telefonische Nachricht: Das Fieber sei am Tag nach Einnahmebeginn weggeblieben, die Schwellungen haben sich wesentlich zurückgebildet. Bei einer Probepunktion aus dem Abszeßgebiet habe man nun wieder pathogene Keime festgestellt.

Telefonische Nachricht am 5.9.81: Wegen Abszeßbildung seien inzwischen 2 Nachoperationen (vermutlich Inzisionen) gemacht worden. Ansonsten fühle er sich munter. Ich übersende ihm eine Dosis zu 5 Glob. **Calc. sulf C 30**.

18.10.81, briefliche Nachricht: Die bis vor 4 Wochen bestehende brettharte Schwellung am rechten Oberschenkel sei weich geworden, und es entleere sich jetzt reichlich Eiter. Ich übersende ihm nun eine Dosis **Tuberculin C 30**.

19.11.82, briefliche Nachricht: Die Eiterung habe nach der Einnahme der letzten Kügelchen sehr rasch nachgelassen. Sein Zustand sei inzwischen so gut, daß er von München in eine Spezialklinik nach Basel verlegt worden sei, wo man eine metallene Verbindung zur Stützung der Knochenbruchstücke eingearbeitet habe, freilich unter Schutz von Antibiotika. Was ihn allerdings seitdem sehr belästige, das seien Hämorrhoiden, die zwar weder jucken noch wehtun, wohl aber "so fürchterlich bluten, daß man kaum noch Herr wird." Er verschmiere Mengen von Hametumsalbe und nehme - von einem Münchner Heilpraktiker verordnet - Mercurius vivus compositus ein, alles ohne Effekt. Er vermute, daß die Blutungsneigung von den blutverdünnenden Infusionen verursacht sei, die er während der Operation in Basel erhalten habe. "Es wäre wirklich fabelhaft, wenn Du mich von dieser Lästigkeit befreien könntest, ansonsten müßte ich wirklich ungern bei meiner nächsten Operation im März '82 die Chirurgen heranlassen." Ich übersende ihm eine Dosis **Gossypium C 30** (das in Urtinktur ein kräftiges Emmenagogum ist, in Hochpotenz profuse Blutungen zum Stehen bringt und sich mir schon mehrfach bei solchen Anlässen bewährt hat).

1.12.81, Nachricht: 2 Tage nach Einnahme der letztgesandten Kügelchen sei die Hämorrhoidenblutung versiegt und bisher weggeblieben.

Der Neffe hat noch im Laufe der nächsten 3 Jahre weitere 16 Operationen im Bereich des rechten Oberschenkels über sich ergehen lassen müssen. Dank chirurgischen und

orthopädischen Könnens ist er wieder frei beweglich, wobei allerdings eine metallene Verbindung zwischen den inzwischen zusammengewachsenen Bruchstücken des rechten Femurs vorerst für die nötige Sicherheit sorgt."

(Dr. med. Robert Römer, Rüsselsheim, Pyrogenium bei septischen Erkrankungen, Zeitschrift für klassische Homöopathie 1988, S. 21-22)

### **1988 - Schleichendes septisches Fieber nach Entfernung eines Leberflecks, bei einem 13jährigen Mädchen - R. Römer**

E. S., ein 13jähriges Mädchen, ließ sich im Oktober 1982 (6 Wochen bevor ich zugezogen wurde) aus der Vorderseite des linken Oberschenkels einen großen braunen Fleck (Leberfleck!) entfernen. 3 Tage nach dem chirurgischen Eingriff erwies sich die Wunde als infiziert und begann zu eitern, wobei die regionalen Lymphknoten der linken Leiste anschwellen. Vor 8 Tagen trat plötzlich für 3 Stunden ein Fieberschub bis 38° C auf, der vom Hausarzt mit Antibiotika abgefangen wurde. Vor 4 Tagen schwoll dennoch das Grundgelenk der rechten Großzehe an und schmerzte sehr. Auf Trental ließen die Schmerzen zwar nach, dafür wurde es ihr sehr übel, brecherlich.

30.11.82. Heute mittag sei plötzlich nach heftigem Schüttelfrost das Fieber auf 38,7° C, axillär angestiegen, und sie habe seitdem bis zu meinem Eintreffen 5mal erbrochen. Sie fühle sich sehr elend.

Bei der Untersuchung finde ich Schwellung der linken Leistenlymphknoten mit Rötung der Umgebung sowie einen um 2QF vergrößerten, sehr druckschmerzhaften medialen Anteil der Leber offenbar als Ausdruck der seit 6 Wochen bestehenden schleichenden Sepsis trotz laufender Behandlung mit Antibiotika. Eine Vergrößerung der Milz kann ich nicht mit Sicherheit feststellen. Stühle flott, Puls sehr schnell. Op.-Narbe sezerniert noch eitrig, übelriechend.

In Anbetracht der im Verhältnis zum raschen Puls niedrigen Körpertemperatur entschlief ich mich zur Verabreichung von **Pyrogen C 30** in Wasser, alle 2 Std. 1 Teelöffel nach Umrühren, morgen und in den nächsten 3 Tagen dasselbe Mittel in der C 200, in 5 Tagen in der C 1000, in immer größeren zeitlichen Abständen.

Während der Folgetage ließ ich mir jeweils telefonische Nachricht über den Zustand der Patientin geben. Das Fieber ließ - ich hatte die Antibiotika sogleich völlig abgesetzt - schon am ersten Tag nach und verschwand anderntags genau wie die Übelkeit völlig. Die Wunde hörte auf zu sezernieren. Als ich am 6. Tag zum Nachsehen kam, war sie verheilt, die Leistenlymphknoten unauffällig, die Leber noch um einen halben QF im medialen Anteil vergrößert und nur noch wenig druckschmerzhaft. Die Patientin war schon seit 2 Tagen aus dem Bett und entwickelte einen riesigen Appetit. Sie ist inzwischen längst verheiratet und Mutter geworden und fühlt sich auch heute noch wohl."

(Dr. med. Robert Römer, Rüsselsheim, Pyrogenium bei septischen Erkrankungen, Zeitschrift für klassische Homöopathie 1988, S. 22-23)

### **1988 - Septische Arthritis des linken Kniegelenks, bei einem 56jährigen Mann - R. Römer**

"R. M., ein 56 Jahre alter Angestellter, den ich vor etwa 20 Jahren mit **Elaps corallinus** (in Hochpotenz) von seinen Kreislaufstörungen befreien konnte, läßt mir am 28.11.85 durch einen Freund eine Bitte um Hilfe übermitteln. Vor 6 Wochen etwa sei er mit Schmerzen im

linken Knie erkrankt. Das Gelenk sei damals stark angeschwollen, so daß er es kaum mehr bewegen konnte. Gleichzeitig habe sich Fieber im Wechsel mit Frostgefühlen eingestellt, so daß er vor über 3 Wochen in ein Krankenhaus der benachbarten Universitätsstadt vom Hausarzt eingewiesen worden sei. Dort habe man mehrfach das Gelenk punktiert und dabei festgestellt, daß eine Infektion mit *Staphylococcus aureus* vorliege. Er habe inzwischen reichlich Antibiotika erhalten, die aber an seinem Zustand kaum etwas geändert haben. Das Knie sei noch heiß, geschwollen, schmerzhaft bei jeder Bewegung, und bestehen immer noch Fieber mit Frösteln im Wechsel. Er habe schon immer flotte Morgenstühle gehabt, nun aber belästigen ihn seit den Antibiotika mehrfach täglich Durchfälle, sehr stinkend.

Aufgrund dieser Angaben und in Anbetracht der Schwere der Infektion, die offenbar auch unter klinischer Anwendung gezielter Antibiotika bislang nicht beherrscht worden ist, entschieße ich mich, dem Patienten **Pyrogenium C 30 - C 200** (Glob.) zu übersenden mit der Maßgabe, die 5 Kügelchen der C 30 sogleich in  $\frac{1}{2}$  Glas Wasser zu lösen und davon am 1. Tag alle 2 Stunden nach Umrühren 1 Teelöffel zu nehmen, ab 3. Tag alle 3 Stunden mit der gelösten C 200 genauso zu verfahren und dann nur noch 3 x 1 Teelöffel täglich, insgesamt 5 Tage lang, mit jeweils frisch angesetzter, neuer Lösung fortzufahren.

9.1.86: Der Patient sucht mich in meiner Praxis auf und berichtet: Er habe nach meiner Anweisung die Kügelchenlösungen genommen. Schon anderntags seien Fieber und Frösteln weggeblieben und nicht mehr wiedergekehrt. Innerhalb weniger Tage seien Hitze, Schmerzen und Schwellung des Knies vergangen. Das Gelenk sei wieder beweglich geworden und er habe sich so rasch erholt, daß der ihn behandelnde Professor sich darüber gewundert und ihn als Glückspilz bezeichnet habe. Am 12.12.85 sei er in die Obhut eines orthopädischen Arztes nach Hause entlassen worden, der ihm nach Überprüfung der Sachlage versicherte, daß er "die 6 im Lotto" wohl gezogen habe, so außergewöhnlich sei der Heilungsverlauf. Eine Heilung ohne Versteifung des Knies sei äußerst selten!

An klinischen Angaben weiß der Patient noch zu berichten, daß die Blutsenkung bei Einweisung ins Krankenhaus 76/105, bei Entlassung 17/30 gewesen sei. Er habe etwa 30 Tage lang am Dauertropf gehangen. Die Leukozytenzahl pro Millimeter Kniepunktat habe zu Beginn 40.000 erreicht, um dann unter den Antibiotika vorübergehend auf 2.000 abzusinken. Jedoch sei sie nach einiger Zeit trotz dieser Behandlung wieder auf 40.000 angestiegen. Nach den Pyrogenium-Kügelchen sei sie rasch abgesunken.

Dem Entlassungsbefund entnehme ich folgende Diagnosen: 1. Septische Arthritis des linken Kniegelenks mit *Staphylococcus aureus*, 2. Gonarthrose beiderseits, 3. P.-pulmonale im EKG, 4. im Kniepunktat anfangs 40.000 Leuko./mm<sup>3</sup>, zuletzt 2.000 Leuko./mm<sup>3</sup>. Weiter gibt der Patient an, daß er sich inzwischen noch immer 3 x 1 Tabl. Ceporexin täglich einverleibe, sowie wegen der sich danach einstellenden Magendarmbeschwerden mit Durchfällen 6 x 1 Eßl. Maaloxan. Trotz der Arznei verspüre er seit einigen Tagen Schluckschmerzen im Rachen. Ich reduziere auf 2 x 1 Ceporexin und 2 x 1 Eßl. Maaloxan und gebe dem Patienten **Kreosot C 30** mit, das er in 10 Tagen etwa nehmen soll, wenn die Halsbeschwerden sich nicht bessern.

Hinsichtlich seines Knies äußert sich der Patient, daß es bei Belastung, besonders beim Treppensteigen noch schmerzt, weshalb er als Stütze noch einen Stock benützt. Ansonsten sei das Gelenk in seiner freien Beweglichkeit kaum noch eingeschränkt.

27.1.86: Vor 8 Tagen habe er die ihm mitgegebenen Kügelchen (Kreosot) gelutscht, beim Schlafengehen abends. Anderntags habe er den ganzen Tag über lebhaft Schmerzen im

linken Knie verspürt, die danach fast ganz weggeblieben seien und sich nur noch gering beim Treppensteigen bemerkbar machen. Das Knie sei am Tag nach den Kügelchen nicht angeschwollen. Er nehme jetzt nur noch eine halbe Tabl. Ceporexin 2 x tgl. und kaum noch Maaloxan. Ich setze **Echinacea D4** 3 x 5 Trpf./ tgl. ein und gebe ihm eine Dosis **Staphylococcin D 30** mit, die er in 10 Tagen benutzen soll. Ceporexin ganz weglassen.

4.3.86: Ähnlich wie nach den Kreosot-Kügelchen habe er auch auf die letzten für 2 Tage merklich stärkere Schmerzen im linken Knie verspürt. Das Gelenk sei jetzt frei beweglich, schmerze auch nicht mehr beim Treppensteigen. Er benötigt schon lange keinen Stock mehr. BSG: 6/16.

Ich habe den Patienten bis in die letzte Zeit in großen Abständen gesehen. Er hat wohl noch zeitweise - offenbar bei Wetterwechsel - etwas Schmerzen im linken Knie, die sich wohl als Folge der nachgewiesenen Arthrose erklären lassen."

(Dr. med. Robert Römer, Rüsselsheim, Pyrogenium bei septischen Erkrankungen, Zeitschrift für klassische Homöopathie 1988, S. 23-24)

### **1988 - Atypische Appendizitis bei einer 71jährigen Frau - R. Römer**

"T. S., eine 71 Jahre alte Hausfrau, meine Schwester, erkrankt während eines Ferienaufenthalts, den sie gemeinsam mit meiner Frau und mir im Wallis auf 1.400 m Höhe zu verbringen begonnen hat, in der 4. Nacht unseres Dortseins im August 1985. Sie empfängt mich morgens mit der unerfreulichen Mitteilung, daß sie kaum geschlafen habe, weil sie die ganze Nacht hindurch alle 20-30 Minuten mit sehr schmerzhaftem Ziehen im Unterbauch und Blase habe Wasser lassen müssen. Zeitweise friere es sie innerlich, danach werde es ihr heiß, so daß sie sich aufdecken müsse. Der Urin ist klar. Meine Schwester bemerkt auch nichts von den für eine Blasenentzündung typischen Brennschmerzen. Der Schmerz strahle beim Wasserlassen zur rechten Unterbauchseite aus. Bei der Palpation gibt sie in der Tiefe dort konstant einen Schmerz an. Da das rechte Bein im Liegen gestreckt gelassen werden kann, und der Bauchdeckentonus kaum merklich erhöht ist, vermute ich eine atypische Appendizitis, wobei der Wurmfortsatz in der Nähe der Harnblase liegt und durch seine entzündliche Schwellung diese zu häufiger Entleerung reizt.

Ich lasse die Temperatur messen, zunächst 5 Minuten unter der Achsel, dann 5 Minuten lang im After. Axillar: 37,6° C, rektal 38,4, also eine merkliche höhere Temperaturdifferenz als der Norm entspricht, was auf einen entzündlichen Prozess im Unterbauch hinweist. Meine Schwester klagt über Übelkeit, sie habe gar keinen Appetit. Sie ist sehr unruhig, will nicht liegen bleiben. Ihre Stuhlentleerung funktioniere immer gut, auch heute habe sie schon flott geklappt. Die Pulsfrequenz liegt mit 116/Min. ziemlich hoch.

Aufgrund der Schüttelfrostschübe, der verhältnismäßig hohen Pulszahl gemessen an der mittelhohen Temperatur, der Unruhe der Patientin und der flotten Stühle entschieße ich mich, meiner Reiseapotheke einige Kügelchen **Pyrogen C 30** zu entnehmen und sie in einem halben Glas Wasser zu lösen. Maßgabe: alle 2 Std. nach Umrühren 1 Teelöffel davon.

Verlauf: schon nach dem 1. Teelöffel lassen der schmerzhaft Harndrang und die wellenartig kommenden Frostgefühle merklich nach, und die Übelkeit vergeht. Die unmittelbare Druckschmerzhaftigkeit im rechten Unterbauch und die rektale Temperaturerhöhung jedoch vergehen erst am 3. Tag gänzlich unter Bettruhe und **Pyrogen C 200** alle 3-4 Stunden. Danach Wohlbefinden und Teilnahme an allen weiteren Wanderungen.

Freilich wird nun mancher sagen, solche Fälle kann man auch mit Ruhigstellung und einem Eisbeutel auf den rechten Unterbauch ohne Operation in den Griff bekommen. Ich gebe das zu, weise aber doch auf das besondere Risiko beim atypisch liegenden Appendix in. Auf die Gefährlichkeit dieses Sachverhaltes hat vor über 50 Jahren *August Heisler* in seinem von den damaligen Studenten in klinischen Semestern sehr beachtetem Buch "Und dennoch Landarzt" aufmerksam gemacht. Er beschreibt darin eindrucksvoll die Erkrankung eines Mädchens seiner Kindergrippe mit Blasenschmerzen ohne cystitische Erscheinungen; die richtige Diagnose rettete damals das Leben des Kindes. Er konnte es noch rechtzeitig nach Freiburg in die Klinik zur Operation bringen, bei der sich ein berstend praller, eitriger Wurmfortsatz fand.

Die Plastizität von *Heislers* Bericht hat sich meinem Gedächtnis tief eingepägt. Während meiner Assistentenzeit in der Gießener Medizinischen Poliklinik konnte ich bei gleichgelagerten Beschwerden einen etwa 35jährigen Mann dazu bewegen, sich spornstreichs in die chirurgische Klinik zu begeben, um sich operieren zu lassen. Der Chirurg verwunderte sich über meine präzise Indikationsstellung: atypischer, der Blase angelagerter entzündlicher Appendix, operierte indes jedoch sofort und konnte eine dem Bersten nahe Eiterwalze entfernen.

Schließlich ein weiterer Fall, der sich vor ½ Jahren am Morgen einer dringlichen Reise ereignete: eine Frau Mitte der Vierzig erscheint mit obigen "Blasenbeschwerden"; axillare Temperatur 37,7, rektale 38,6° C. Wegen der Schmerzen, die sich bei der Blasenentleerung jeweils mit einem "Stich" enden, verordne ich **Guajacum C 30** in Wasser, schluckweise zu nehmen, rate aber dringend, da ich für mehrere Tage verreise, zur Operation. Der Chirurg fand ebenso wie in den anderen Fällen einen hochentzündlichen Appendix vor. Die Heilung verlief sehr rasch.

Ich gebe zu, daß mir bei der Behandlung meiner Schwester anfangs nicht ganz wohl zumute war und daß ich mich nach dem nächsten Krankenhaus erkundigte. Es lag 14 km weit weg und 1.000 m tiefer. Da ich aber die schleunige Besserung vor Augen hatte, verloren sich meine Befürchtungen. Sie ist bis heute gesund geblieben."

(Dr. med. Robert Römer, Rüsselsheim, Pyrogenium bei septischen Erkrankungen, Zeitschrift für klassische Homöopathie 1988, S. 24)

### **1988 - Fieberschübe nach Katheterisierung bei einem Mann in den 70ern - R. Römer**

"M. A., ein 72 Jahre alter Mann. Zu ihm werde ich am 6.7.62 gerufen. Seit 4 Jahren leide er an Prostataschwelung. Wegen gelegentlich auftretender Harnverhaltung sei er schon mehrfach im hiesigen Krankenhaus katheterisiert worden, Mittlerweile habe er gelernt, sich selber zu katheterisieren. Gestern habe er dies wieder tun müssen. Heute habe er plötzlich einen schrecklichen Schüttelfrost mit nachfolgendem Fieber über 40° C. Die Körperhaut fühlt sich heiß und trocken an. Puls 96/Min., also in Anbetracht der hohen Temperatur verhältnismäßig langsam. Im Urin finde ich Eiweiß, im Sediment 7-10 Leukozyten, reichlich Stäbchenbakterien. Griesß'sche Probe stark positiv.

Ich löse ein paar Kügelchen **Pyrogenium C 30** in ½ Glas Wasser mit der Anweisung, alle 3 Stunden davon nach Umrühren einen Schluck zu nehmen; morgen solle er mit einer 2. Kügelchendosi (diesmal die C 200) genauso, nur in größeren Abständen verfahren, also alle 4-5 Stunden.

17.7.62: Auf die Einnahme seien Fieber und Beschwerden sehr rasch vergangen, schon anderntags habe er wieder aufstehen können. Seit 3 Tagen jedoch fühle er sich wieder heiß

und habe 38° C Fieber jetzt gemessen. Die Nierenlager finde ich stoßschmerzhaft. Im Sediment massenhaft Leukozyten. Urin trübe, stinkt. Da trotz des Fiebers kein Durst besteht, verordne ich **Apis C 30 - C 200** in Wasser, was aber nur kurze Besserung bringt. Deswegen lasse ich anderntags **Copaiva Balsam D6** folgen, 3 x 5 Trpf./tgl., worauf wiederum rasche Besserung eintritt.

24.9.62: Ich werde erneut zum Patient gerufen. Gestern mußte er sich wieder einmal katheterisieren, worauf wieder Schüttelfrost mit hohem Fieber auftrat. Erneut **Pyrogen C 200** in geteilten, aufgelösten Dosen, am Folgetag C 1000. Danach Fieber sehr rasch weg. Urin zwar immer etwas trübe in der Folgezeit, indes unter **Copaiva D 6** kein eitriger Absatz mehr. Solche Fieberschübe nach Katheterismus bekam der Patient im Laufe der nächsten 5 Jahre. Nach voranlaufendem Schüttelfrost stieg das Fieber gewöhnlich über 40° C, stets innerhalb von 24 Stunden durch Pyrogen C 200 - C 1000 rasch beseitigt. In keinem Falle war ein Antibiotikum notwendig."

(Dr. med. Robert Römer, Rüsselsheim, Pyrogenium bei septischen Erkrankungen, Zeitschrift für klassische Homöopathie 1988, S. 24-25)

# Klinische Hinweise / Clinical Hints

## Übersicht

1888 - Samuel Swan

1891 - La Grippe and other "miasmatic" conditions - W. H. Leonard

### 1892 - Clinical verifications - G. W. Sherbino

- Pneumonia in a girl aged 14
- Aching all over with great restlessness
- Paralysis in a little girl
- Fever with great restlessness
- Grippe in a child
- Grippe with strange sensations, in a man
- Dysmenorrhoea
- Partial paralysis in a girl aged 12
- Fever in a child
- Bearing down in uterine region with great restlessness
- Pneumonia
- Fever in a woman aged 21
- Typhoid fever
- Severe cough after confinement
- Relapse from typhoid fever

1893 - Neglected pneumonia - J. Emmons

### 1894 - Clinical cases - William A. Yingling

- Feverish state in a woman aged 30
- High fever in a girl aged 4
- Feverish state in a boy aged 8
- Grippe in a woman aged 36 and her daughter aged 17
- Grippe-like state in a school teacher

1894 - Complications of measles in a child - Henry C. Allen

1895 - Pyrogenium in typhoid fever - John H. Allen

1895 - Pyrogenium in labor - William A. Yingling

1897 - A kind of Grippe in a woman aged 48 - William A. Yingling

1899 - An elderly woman suffered for years from an awful ulcerated leg - H. R. Bellairs

1902 - Pyrogenium fevers - Henry C. Allen

1904 - Abortion - J. E. Huffman

1913 - Pyrogenium and Anthracinum - Eugene B. Nash

1928 - Pyrogenium in scarlet fever - Elisabeth Wright Hubbard

1929 - The relation of Calcearia sulphurica to Pyrogen - Elizabeth Wright Hubbard

1939 - Clinical experiences with Pyrogen - Margaret Burgess Webster

1939 - Pyrogenium in influenza - Douglas M. Borland

1939 - Pyrogenium pneumonias - Douglas M. Borland

1942 - Clinical experiences with Pyrogen - Margaret L. Tyler

## 1888 - Samuel Swan

"Some years ago, I do not remember how many, Messrs. Alfred Heath & Co. (I think it was) sent me some " Sepsin " artificially prepared. Some time subsequent to that Dr. William Tod Helmuth sent me a vial of pus from an abscess in the thigh, in the "worst case of septicaemia he had ever seen", the patient at the time being moribund. This I potentized and named it Pyrogen - the English preparation being then called Sepsin.

I have made several partial provings, have used it extensively in cases of blood-poisoning, and it has been used by other physicians in such cases, and in certain forms of malaria, especially those taking on the typhoid form; also in typhoid fever, and surgical diseases where the symptoms of blood-poison were marked.

In the proving there is a marked similarity to the premonitory symptoms of small-pox, diphtheria, scarlet fever, malarial fevers - such as aching in the limbs, chills down the back, severe pain in small of back, pain in stomach, soreness in the whole body and especially in the region of the spleen - with extreme sensibility of the parts - also complete apathy, wants to be let alone, is very comfortable; dull, sleepy.

It has greatly modified, and in some cases cured, typhoid fever.

It cured a case of purpura haemorrhagica.

There is great dryness of all the mucous surfaces.

Dr. G. H. Carr cured a case of puerperal peritonitis in a very short time with four doses, one-third hour apart.

Headache, extending to nape and dorsal vertebra.

It should be the first thing thought of in surgical wounds, and in all cases where blood-poison is suspected.

If used in high potencies, no person need die of blood-poison; and seldom more than one dose is needed.

If physicians would give it a trial, I think they would never after be without it."

(Samuel Swan, M. D., New York, Pyrogen - Sepsin, The Medical Advance Bd. 21 (1888), p. 545-546)

### **1891 - La Grippe and other "miasmatic" conditions - W. H. Leonard**

"This remedy has been of good service in La Grippe during the past winter. Consider La Grippe a miasm, and Pyrogen an antidote for many miasmatic conditions. Many cases of La Grippe have been relieved, requiring no other remedy except for the peculiar cough, calling for Phos, Rumex, or other well indicated remedies. Leading indications: Great depression, great pains all over body, even to the bones.

CASE I. - Mr. C., came from Arkansas, a malarial district. He had fever; dry, red tongue; aching pain all over, especially in back and limbs. "Knew he was going to have typho-malarial fever," which he had two years previous, after a malarious exposure on a foreign mission field. Had every other day what he called "dumb ague." The case looked promising for what he anticipated - a long sickness. Gave him Pyrogen high, every half hour, in water. Was to continue it until sweating was finally established, when the time should be extended to two hours. Saw him after twenty-four hours. A great change had taken place; perspiration had set in after six hours, which was profuse when seen at second visit. The remedy was continued, at lengthened intervals, for two days, when he was well.

CASE II. - Mr. N., hard student and overworked; had, for several weeks, what he thought was La Grippe, and was undoubtedly correct; but hoped to get well on domestic treatment. Found him with a well marked enteric fever (typhoid), much prostration, diarrhoea profuse, of terrible odor, pain in occipital region, dry tongue, with red center. Sleepless or disturbed; very talkative in sleep; dry, hacking cough. Considered the case a serious one. Gave at once Pyrogen. It soon modified the symptoms, except the diarrhoea, especially the odor, which was terrible, permeating all parts of house but for thorough ventilation and disinfectants. Tried to

correct the odor with Kali phos., with no success. Gave two or three doses Psorinum, which changed matters. Pyrogen was principal remedy, except Phos., for cough. Complete recovery.

CASE III. - Mr. M., was much broken in health during late war, being a prisoner in Libby for many months. Had pneumonia eighteen years ago, which was a close call for him. However, judicious treatment gave him a fair condition of health, but he was left with a weak lung. One year ago this May, 1889, he had an attack of what was called congestion of this weak lung. Saw him after the attack and found an unsatisfactory condition. The lower half of it useless. Gave a dose of Sulphur high. He continued to improve and went to California for the winter; came back last May, 1890; found him confined to bed with little use of this lung; hard cough, asthmatic spells at night with great suffocation; difficult expectoration of heavy sputa, dark yellowish green; chill every other day, showing the miasmatic character, anticipating one or two hours. Every night before midnight he would be very nervous, which with his asthmatic attacks made the night almost intolerable, but towards morning would get some sleep. Gave him two or three doses of Pyrogen high, in the evening. At once he commenced to improve; less cough and expectoration, but the nervous spells would come in the morning at 6 o'clock. In three days he had no chill or fever. He begged for less medicine as he dreaded the morning nervousness. After three days he took only one dose in the evening, all symptoms continuing to improve.

This case may be considered as miasmatic in its origin, hence the relief obtained by the dose of Pyrogen. How long the effect may remain is yet to be seen."

(W. H. Leonard, M. D., Minneapolis, Minn., Clinical Notes, The Medical Advance vol. 26 (1891), p. 103-104)

## **1892 - Clinical verifications - G. W. Sherbino**

### **Pneumonia in a girl aged 14**

"I was called on the 2d day of January, at one o'clock p. M., to see girl aet. fourteen, who had been suffering for about one week, and for the last two days had been attended by an allopath. I soon diagnosed the case, for the benefit of the family and the neighbors, to be that of pneumonia.

I found the temperature  $105\frac{1}{2}^{\circ}$ ; respirations, 52 per minute; pulse, 120; coughing up rusty-colored mucus; pain in the right lung and shoulder, worse from coughing or talking; circumscribed redness of both cheeks; fan-like motion of the alae nasi. (Ant-t., Bapt., Brom., Bell., Lyc., Phos., Rhus-t, Pyrog.)

Restlessness, when first beginning to move, restlessness all night.

January 2d. - Temperature,  $102\frac{1}{2}^{\circ}$ ; pulse, 104; much better every way; improving fast.

January 3d. - Temperature,  $100^{\circ}$ ; pulse, 96; respiration, 32.

January 4th. - Temperature,  $97\frac{1}{2}^{\circ}$ ; pulse, 80. Discharged the case cured.

She took four doses of Pyrogenum cmm."

### **Aching all over with great restlessness**

"Mrs. - sent to the office for medicine for an aching all over; says she was so very restless last night, could not keep still.

I sent her one dose of Pyrogen., which cured her by morning."

### **Paralysis in a little girl**

"I was sent for to go and see a little girl that had been taken sick at night with symptoms of paralysis.

She was well up to that time.

When I arrived she could not stand on her feet; when they set her up in bed she would wave back and forward, as if she had no control of herself; her pulse was 120 per minute, her temperature was 98.3°.

Taking the increased heart action as a leading symptom, I gave her a dose of the CMM of Pyrogen., which cured her quickly."

### **Fever with great restlessness**

"Mrs. A. was taken with a fever yesterday, and she had a miserable night last night; her temperature is 103°, and pulse 130; was very restless, especially after midnight, constantly changing her position in bed.

R. Rhus-t. cm.

Called the next morning and found her no better, and had put in a bad night again, never sleeping at all; says that it keeps her busy trying to get into an easy position, and she noticed that she was better while she kept up this motion all the time.

R. Pyrogen CMM.

She commenced to improve at once, rested better at night, and all of the aching left, the pulse was 108 the last time I saw her, and at that time it was at normal temperature; she had a great deal of throbbing of the vessels of the upper thorax and neck.

It would shake the bed it was so violent."

### **Grippe in a child**

"Her father called at the office for medicine, and said that she was very restless; worse from lying down, better sitting up.

Vomiting water after drinking as soon as it gets warm in the stomach (Phos.). Better by vomiting.

Cured with one dose of Pyrogenum CMM."

### **Grippe with strange sensations, in a man**

Mr. complains of a feeling of coldness and chilliness that no fire can warm. This kept up all day and all night. As night came on he grew more restless, and as he had been breathing hot air all day from the fires he now had an intense desire for fresh air, and thought if he did not get it his lungs would burn up. His respiration was quite quick, but the fresh air soon brought relief in that respect. He groaned all night, and rolled and tumbled from one side of the bed to the other, not lying in one spot but a moment at a time. The bed was as hard as a board (Bapt.), the pillow was as hard, and he was as sore as if a train had run over him. He tried to lie on his face but he found that side of his body was sore too. Before daylight he awoke and told his wife he was so glad that he had got rid of those arms and legs that had crowded him all night; if he turned over they were there, and he was trying all night to get them out of the bed. As soon as the fever began to come on he commenced to urinate, and he must have passed water every half-hour. The urine was as pale as spring water; the fever went down the next day; but when it commenced to rise again he commenced to have frequent urinations as before, and he knew that the fever was coming up as he was urinating so frequently.

He took two or three doses of Pyrogenum CMM."

### **Dysmenorrhoea**

"Mrs. W. F. F. has had painful menstruation for several years, and it is always preceded by aching in the bones, causing her to complain of the bed being hard and accompanied by intolerable restlessness. She is better when first beginning to move - and she has to keep this up, as it affords some relief to the restlessness. I saw her have one of these spells, and she was on the floor, and she would curl up and then straighten out, and then turn and twist in every possible position. The CMM of Pyrogenum would always relieve her, till now she does not have the aching, and is doing nicely.

This remedy has cured this condition, but other remedies had to be used - Lac-can., Aesc., and Helon."

### **Partial paralysis in a girl aged 12**

"I was called to see a colored girl about twelve years old, who seemed to be partially paralyzed. She could not sit up or stand nor walk a step without help. She was very restless and kept rocking back and forth while sitting on the edge of the bed. She said that this rocking motion relieved her and so she kept it up. I gave her a dose of Pyrogenum CMM and she was all right in a day or two, as I only saw her but once."

### **Fever in a child**

"Mr. M. H. - Child had had a fever for several days and was getting worse (Bell. and Rhus-tox. had failed). I sat up all night with the case and it had the restlessness of death. There was more motion of the right leg and arm, and she would make a semicircle from left to right, and her feet would get upon the pillow and she was not still for one moment all night long. She would make this peculiar circle and would have to be put on the pillow, and in a very short time she would be kicking the headboard with her feet. All of these symptoms passed away under the action of Pyrogenum DMM."

### **Bearing down in uterine region with great restlessness**

"Mrs. M. has been troubled for some time with bearing-down feelings in the uterine region, relieved by holding her breath and pressing down as in labor. She was very restless at night and had to keep in motion, as only then could she get any relief (better when first beginning to move). Cured by Pyrogenum DMM."

### **Pneumonia**

"January 4th, 1892. - I was called to see Mr. K., who took a severe chill yesterday and was chilly all night long. I found him expectorating rusty-colored blood this morning. He complains of aching all over and his eyeballs are sore and his ears are sore. The bed is hard and he aches in all the bones in his body. He groans all night and he was restless. He is worse from moving at first, but better after he gets quiet again, and then after lying long in one place he is compelled to move again.

Rhus-tox. cm, one dose. Temperature, 102 ½ °; pulse, 100; respiration, 32.

I called in the evening at five o'clock. Temperature, 103.3°.

January 5th. - He had a bad night, his wife could hardly keep him in the bed; he was groaning and restless. He had to keep moving all the time to get a little ease. He felt as if a train had run over him and bruised him badly.

He took two doses of Pyrogenum CMM in the night.

January 5th. - I find him better this morning. Temperature, 100°; pulse, 80; respiration, 24.

January 6th. - I found my patient had eaten some hot tomatoes and at one o'clock A. M. he commenced vomiting and is now having cramp in the stomach.

Gave a dose of Nux cm, as it covered his symptoms well. Temperature and pulse going up again.

January 7th. - He had a very restless night of it last night. He ate some fresh oysters yesterday and they disagreed with him and kept his stomach in an agitated condition. He complains of feeling so full after eating, and has fan-like motion of the alae nasi and he thinks he is worse in the after part of the afternoon.

I gave him Lyc. mm (H. S.), one dose, dry.

January 8th. - He was very restless last night. Temperature,  $103^{\circ}$  ; respiration, 32; pulse, 100. I called at night and he was sitting up and he had a restless spell about half an hour before I called and was still in the same condition. He could not sit still or keep in one position a half-second without changing; this he said was all the relief he could get. He was better while moving, but the relief lasted only a moment and he had to keep changing in that way continually.

I gave him a dose of Pyrogenum CMM dry on the tongue.

This was all the medicine required, and I discharged him on the 11th cured."

### **Fever in a woman aged 21**

"November 29th. - I was called to see Mrs. R., aet. twenty-one, who was taken sick last night while at the opera, and had to leave as she felt as if she was going to faint. She left with her husband, and she says that she knew nothing while going down the stairs as it was all a blank to her. As soon as she reached the carriage she fainted, and did not come to her senses till she got near home ; at about five o'clock she was taken with a hard chill and shook for about an hour, with chattering of the teeth.

She complains of aching all over; the bed feels hard, also the pillows (Bapt., Rhus-t.) fan-like motion of the alae nasi (Ant-t., Bapt., Brom., Lyc., Phos.). Temperature,  $105^{\circ}$  ; pulse, 126 ; respiration, 44. The heart action was so strong that her clothing had a distinct vibration on the neck and thorax ; throbbing of the arteries of the neck most noticed in the lower part of the clavicles, upwards. Numbness of the hands and arms (Bapt., Rhus).

R. Baptisia 600 (M. S. G.).

November 30th. - Called this morning and found that she had had a bad night, was restless, worse after midnight. She could not lie but one moment in one place in the bed, there was momentary amelioration from motion; as soon as she would stop moving she got so restless she could not stand it, and had to keep this up all the latter part of the night. She complained that the heart action kept up, throbbing so violently that she got very tired of it; aching worse than yesterday; is delirious this morning when she closes her eyes. Temperature,  $105^{\circ}$ ; pulse, 126 ; respiration, 44; this was at 10 A. M.

Taking the rapidity of the heart's action; the amelioration from constantly changing the position; amelioration during act of moving (Rhus-tox., aggravation when first beginning to move), I gave Pyrogen CMM (Swan), one dose at 10 A. M.

I took the temperature at 11 A. M., and it had come down to  $104^{\circ}$  ; at 4 p. M. the temperature was  $103.3^{\circ}$ ; was not aching so hard, not so delirious.

December 1st. - Called this morning at 9 A. M., found the temperature,  $99.4^{\circ}$ ; pulse, 80; respiration, 28 ; says she has had a bad night; was very restless as she was night before, was unable to tell where she was, and that she made her husband get up several times to see if a man was in the house, she could see a man standing by the bed or at the farther part of the room ; hands cold and clammy. Bowels acted several times last night. Her bowels are so sore

that she can't bear the least pressure over the right side. She can't sit up they pain her so; she gets dizzy whenever she rises up in the bed (Bap., Bry., Phyt.). Tongue coated white, has had nothing to eat during this sickness, but has wanted nothing but water.

December 2d. - I left a dose of the Pyrogen to take last night if she did not rest better, and it made her rest better. She feels pretty well this morning; has no appetite yet. Tongue not coated so much. Temperature, 98.3°; pulse, 64; respiration.

December 3d. - Is not quite so well this morning as she feels a little aching, has no appetite; temperature, 100°; pulse, 68.

December 4th. - Called and found her sitting up and has no fever and I discharged her cured."

### **Typhoid fever**

"January 22d. - Was called in about three A. M. to see a man who had taken a chill in the night and very severe pain in his right side, the pain starting in the lower part of the chest and going through to his back, worse from every motion; from coughing or taking a long breath; relieved from lying on the affected side (Bap., Bry.); this pain was knife-like and was very severe; he groaned with every breath.

R. Bryonia 5CM.

Called at ten A. M., found the pain all gone, pulse, 100; temperature, 102°; respiration, 30. He is very stupid and drowsy, and will not keep awake long enough to get his symptoms. Aches all over.

R. Bapt. 600M (S. G.), one dose.

January 23d. - Was called at ten p. M. as he was so restless, he could not keep still. The pain had come back again in his side. I sat myself down to watch him and he was in constant motion. He was relieved when first beginning to move. Coughing and groaning; temperature, 102°; pulse, 100; respiration, 30. Fan-like motion of the alae nasi; aching worse; has been delirious all day; does not know that I have been to see him; tongue covered with a very thick white coat; it is as white as milk; fetid breath.

R. Pyrogen. CMM (Swan).

24th. - Very much worse; had a very miserable night; did not rest any. Temperature, 104°, at six A. M. Respiration, 30; pulse, 100. Incoherent talking in his sleep; terrible throbbing of the carotid arteries from the sternum up to the head and neck; throbbing of the temporal arteries; face very flushed, and the ears were very red, as if the blood would burst out of them. The intense restlessness kept up all night, and in fact it was worse after taking the medicine. His bowels had moved, and they had him up before I arrived, and the mother thought it was the bowels moving that relieved him, but I did not think so. I thought it was the getting out of bed that gave him the relief. He became more quiet and had a fair day. He is still very stupid; he answers questions, but goes immediately back into his stupor again; has been snoring all day whilst asleep.

January 25th. - He had not so good a night last night; gave him a dose of the DMM (Swan). He is not so stupid to-day; did not know that I had been attending to him or that I had been about the house. Pulse, 92; temperature, 103.30; respiration, 30. Coughing almost incessantly all day long; relieved immediately by getting in a chair; aggravation as soon as he lies down again; does not ache so much when sitting; is conscious to-day and knows what he is talking about.

January 26th. - Very much better to-day; the temperature, 100°; pulse, 80; coughs up a stringy mucus that looks as if mixed with iron-rust. He has been expectorating this all day.

January 27th. - Found him with no fever this morning, but coughing up large quantities of rusty-colored mucus. He seems all right, but upon one point he is off - that is, no sort of

persuasion can make him think but that he has lots of money in the bank ; talks about his big pile of money.

January 28th. - He slept well last night, not coughing so much this morning; tongue is cleaning off, and he says he feels pretty well to-day ; is sitting up. I discharged him cured. He still thinks he has the money in the bank."

### **Severe cough after confinement**

"Mrs. was confined under the care of one of the materialistic school.

She, at the time, having a very severe cough, her husband called at the office to get a remedy for after-pains.

I was called in the morning and found the patient in the following condition :

She had had a very restless night, coughing up rusty-colored sputa; rapid fan-like motion of the alae nasi; respirations, 84 per minute; pulse, 140; temperature, 102°; called in the evening at four p. M.; respirations, 100 per minute; pulse 140; temperature, 102° ; she was very restless and found relief while she was moving; pain in each hypochondrium when coughing ; called at nine p. M.; pulse, 144 ; respirations, 96 ; temperature, 101°.

April 3d. - Respirations, 72 ; pulse, 132 ; temperature, 99.3°; called at eight p. M.; respirations, 54; pulse, 124; temperature, 99°.

April 4th. - Temperature, 98.2° ; pulse, 116; respirations, 34 ; she feels well this morning; rested well last night.

I am now sure she will recover.

She has taken three doses of Pyrogenum CMM in a glass half full of water, and taken at once S. L. every half-hour while awake."

### **Relapse from typhoid fever**

"Mrs. L., aet. sixty, had just gotten over a spell of fever when one morning she was taken with a palpitation of the heart; her pulse was running at the rate of 160 per minute, and the temperature about normal.

I thought from the condition it called for Digitalis, as she was so afraid to move, but it did her no good; the next night she began to ache all over in the bones, and was very restless.

I tried Bapt. and then Rhus-tox. without any benefit whatever.

The fever kept climbing up each day till it got to 104.3°, and this was always in the after part of the night, about two or three o'clock A. M. She always felt best when the fever was on, but as soon as the fever left the aching came again.

Bapt. and Rhus-tox. have aching worse when the fever is on.

There was one peculiar thing about the temperature. Her daughter took her temperature about every two hours through the twenty-four, and it would vary from one to two degrees each time; this was so during the inclination and the declination.

October 14th. - Had a very restless night last night.

She says she could not lie still but a few seconds, as she must keep moving all the time, and felt better from doing so. At nine A. M. tried to vomit; has no appetite nor any thirst; feels deathly sick at the stomach. Gave one dose of Pyrogen CMM (Swan).

October 15th. - Pulse, 120; temperature, 104.3°; bed still feels hard ; aching all over; still restless, worse after midnight, till morning; better from constantly changing the position.

October 17th. - Rested better last night after taking a dose of the CMM ; inclined to talk all the time in an excited way ; cold sweat over the body.

October 19th. - Pulse, 88 ; temperature, 104; pain severe in the small of the back; desires to

urinate; it is scant; talks to herself; tries to vomit.

October 21st. - Pulse, 84; temperature, 103°; strains to vomit; cold feet.

Restlessness is better as she sleeps some.

October 23d. - Getting better. Purple spots on the chest; pulse, 80; temperature, 103° ; cries out in her sleep that a heavy weight is resting upon her; more restless last night.

Gave a dose of Pyrogen CMM.

October 26th. - Pulse, 72; temperature, 101°; heart beats hard, has a laborious action ; sensation as if the heart were too full of blood; it beats very loud ; heart sounds can be heard a foot away from the thorax (always can hear her heart beat); fan-like motion of the alae nasi (Ant-t., Bapt., Brom., Bell., Lyc., Phos., Pyrog., Rhus-tox.).

October 28th. - She could not sleep last night for the heart whizzing and purring so; when she did drop off to sleep she was delirious ; sensation as if a cap were on her head ; when she awakens and finds this cap on her head she knows that she is all right - that is, she is not delirious; better after vomiting; whispers in her sleep; whispers to herself; if you ask what she has said she does not answer; sensation as if she covered the whole bed ; she knew that her head was on the pillow, but she could not tell where the rest of her body was.

She feels when lying on left side that she is one person, and when she turns to the other side that she is another person; she can't get the fever to run in the other person like herself; the fever wants to run separately; tongue dry, is not a particle of moisture on it.

October 31st. - Bitter taste in the mouth; tongue dry down the centre; has had no thirst since she has been sick. Pulse, 76 ; temperature, 98.5°.

Discharged her cured."

(G. W. Sherbino, M. D., Abilene, Texas, Clinical verifications of Pyrogenum, Proceedings of the International Hahnemannian Association 1892, p. 412-425)

### **1893 - Neglected pneumonia - J. Emmons**

"Mr. R., married, about twenty-five years old. He lived six miles away, had been sick some time from a mismanaged or neglected pneumonia. Cough, night-sweats, frequent pulse, and, to all appearances, as if in the last stage of pneumonic consumption. An abscess had burst that day and was discharging a great amount of pus. He said it "tasted like *matter*." He received three doses of Pyrogen <sup>cm</sup> that day, three hours apart. Made a rapid recovery without any more medicine."

(J. Emmons, M. D., Richmond, Ind., A few more cases cured with the high and highest potencies, The Homoeopathy Physician vol. 13 (1893), p. 284)

### **1894 - Clinical cases - W. A. Yingling**

#### **Feverish state in a woman aged 30**

"On the afternoon of November 11th, 1893, was called to see Mrs. J., aged 30, dark hair and eyes, medium build ; married ; mother of two children.

Began last night to feel tired; was up with the children during the night. This morning felt very tired, ached all over, feverish ; headache in the temples, in the morning it was only a dull, heavy pain, but now a shooting pain through the temples. Pains all left body an hour ago and all seemed to have gone to the head, with great arterial excitement. Tongue white, with red tip. Head and face hot and flushed. Pulse 124 ; thermometer 101. Breath somewhat offensive. Inclined to be costive.

Had taken Acon. and Bell. from the family case without benefit.

Gave one powder of Pyrogen CM, (Swan), in eight spoons of water, a spoonful every three hours until better, but in no case was to take more than three doses, or spoonfuls.

Reported some weeks after that she made a very rapid recovery ; in several hours she was up and got supper for the family. No bad results whatever.

#### **High fever in a girl aged 4**

The afternoon of November 12, '93, was called to see Inez, aged 4; rather light complexion. Commenced this morning with rather high fever, flushed face and head. Pulse 135 ; fever 103 ½ . Very restless. Dry cough. Face very red. Complains of being hot, and somewhat sick at the stomach. Breath smells like worms. Eyes red and injected. No appetite. Tongue white with red tip. Great enervation, or rather languor ; felt mopish. Had taken Acon. and Bell. from family case; no results.

Prescribed Pyrogen CM, (Swan), one powder as in Case No. I. Very rapid improvement; well next day, with no bad results.

#### **Feverish state in a boy aged 8**

Afternoon of the twelfth of November, '93, called to see Lee, aged 8 ; medium complexion. Commenced last night feeling tired, some fever, head felt big, hot and flushed face and head ; nervous, very restless. Tongue slightly white with red tip. Pulse 130 ; fever 104. Looks languid and mopy. Some little moisture about the head; skin rather moist. Has been troubled with worms, which Cina has always relieved.

Has taken from the family case Acon., Bell. and Cina with no result.

Pyrogen CM (Swan), as in No. 1. Made a very rapid recovery ; well next day. No bad results.

#### **Grippe in a woman aged 36 and her daughter aged 17**

Mrs. M., aged 36; rather light complexion. On November 25, '93, her daughter came to the office for medicine stating that her mother had "the grippe." Head felt big; jumping headache which was ameliorated by rubbing. Very high fever, seemed like she was burning up, yet her flesh felt cool. Pulse "very, very rapid. " Ached all over; every bone in her body ached. When moving cold chills would run over her.

Pyrogen CMM, (Swan), in water as in No. 1. Relief in a couple of hours with very rapid cure. Well as usual next day. No bad results.

Ida, aged 17, the daughter of the preceding, and the same who came for the medicine yesterday, who then was perfectly well. The father came to the office and said the symptoms were the same as those of her mother. Came on her very suddenly. Rolling all over the bed with fever and restlessness ; ached all over; face red.

Pyrogen CMM, (Swan), as before.

Notwithstanding the very high fever and the severe pains through the system, she was so much better in several hours that she was up and out walking for a stroll. Rapid and effective cure. No bad results.

The CMM potency has proven more rapid in its effects, though the CM is wonderfully prompt.

#### **Grippe-like state in a school teacher**

November 17, '93. Mr. O., aged 28, dark complexion. Single. School teacher.

Felt very badly all day ; could hardly get about his school room. After school he walked to my office, a distance of eight miles, and kept in the main travelled road so as to be found if he fell by the way. As soon as he arrived he threw himself on the lounge completely exhausted, hardly able to give his symptoms, which were very meagre. Ordinarily this walk would have been but a pleasure. Headache; fullness and confusion of the head. Face flushed ; pain behind the eyes; eyes sensitive to touch ; felt languid and hardly able to be up during the day. Great arterial disturbance, felt the blood coursing through the body; pulse 125. Did not prescribe at once, as I desired the fatigue to pass away before deciding. Tongue white with red tip.

At bed time one dose of Pyrogen CMM, (Swan), dry on the tongue.

Slept very well during the night. Next morning felt very much better, but remained in bed "to rest" during most of the morning. Head somewhat uneasy. Got up at noon feeling very much better. Continued to improve all day and attended a social gathering in the evening. He received but one dose. No bad results."

(W. A. Yingling, M. D., Nonchalanta, Kansas, Clinical cases, Proceedings of the International Hahnemannian Association 1894, p. 86-89)

### **1894 - Complications of measles in a child - Henry C. Allen**

"Last February I treated a case of ordinary measles, apparently. The eruption was well developed, lasted five days, with the usual symptoms, and under Bryonia made a good recovery. The child was up and well for ten days. Then the cough and coryza of measles began again, followed by another eruption of measles, lasting as before for five days. This terminated in an abscess at the inner angle of the left eye, which under remedies discharged itself, leaving no scar. About three weeks after the left parotid gland began to swell, It got as large as a goose egg, very hard and dense. I could make nothing out of it except an enlarged gland. After a little it pointed as large as a hickory nut, and I gave the child a dose of Hepar, quite certain it would rupture a few hours after. After a few days I called again and was astonished to find the whole thing had gradually disappeared but the child's tongue was red, smooth, and shining, marking the absorption of pus. A dose of Pyrogen brought the patient to a normal condition."

(Materia Medica Club of Chicago, Henry C. Allen, Salpingitis, Discussion, The Medical Advance vol. 30 (1894), p. 142)

### **1895 - Pyrogenium in typhoid fever - John H. Allen**

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

"The symptoms that will first call your attention to this remedy are usually the foul smelling discharges, the breath, the diarrhoea or perhaps urine, while the patient may be suddenly taken with a chill, with a rapid rise of temperature; pulse so quick it can scarcely be counted, tongue dry, nose pointed, upper lip drawn, exposing the teeth, which are covered with sordes, and a cadaverous smell from the mouth; it will often follow *Baptisia* or *Rhus*, especially if we get a high temperature, with rapid, feeble pulse, more especially if we find a subnormal pulse or temperature after the disease has run a course of three or four weeks, or about the time the temperature should begin to decline. These cases, whether treated homoeopathically or not,

never had any similia, or this dreadful condition would not have developed. When a case of typhoid fever dwells on my hands longer than three weeks, I am fully convinced in my mind that I have not benefited the case and that similia has not been truly applied. A case of typhoid fever treated by the true similimum should have very little, if any delirium, no sordes on the teeth, no subsultus tendinum, and the diarrhoea should not last longer than a few days.”

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

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

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

## 1895 - Pyrogenium in labor - W. A. Yingling

### Labor:

ABORTION. - With bright-red blood, with dark clots. In the course of septic or zymotic diseases. From la grippe.

HAEMORRHAGE. - Of bright-red blood, with dark clots. Pyrogen resembles *Ipecac* very closely in uterine haemorrhage; if *Ipecac* fails when seemingly well indicated, think of Pyrogen.

GENERALITIES. - *A very rapid pulse, without corresponding increase of temperature. Pulsations felt away through the body, head, ears, etc. Painless pulsations. Aching all over the body and extremities. Great restlessness; can lie in one position but a very short time; better when first beginning to move. Bed feels very hard. Worse from sitting up in bed; from rising up. Amelioration of the death-like restlessness from sitting up in chair and rocking hard. Very loquacious. Irritable. She feels when lying on one side that she is one person, when lying on the other side that she is another person. Sense of being crowded with arms and legs. Face pale; very red; yellow; circumscribed redness of the cheeks. Terribly foetid taste. Tongue fiery red; glossy, shiny; very dry, but easily moistened. Stool, urine, perspiration, menses, etc. all horribly offensive. Pain starts in the umbilicus or a little above, and passing down toward the uterus, midway meets a similar pain from the uterus towards the umbilicus, then gradually dies out, to be repeated. In septic poisoning after abortion or confinement this is the remedy par excellence.”*

(W. A. Yingling, The accoucheur's emergency manual (1895), Pyrogenum, p. 171-172)

### **1897 - A kind of Grippe in a woman aged 48 - William A. Yingling**

January 10, 1897. Mrs. S., aet. 48, dark. Found her lying by the side of a hot stove, closely covered with numerous blankets, shaking with the cold. *Chilliness that no fire seemed able to remove*, yet her skin was hot, face flushed, and pulse 125. She said she felt as if her heart was pumping ice cold water. She had been shivering, in spite of a very warm room and abundance of covering, since last evening. *Sore all over, flesh and bones felt sore; bed felt hard; aching*. Felt the blood coursing through the head. *Restlessness*. Desiring frequent small drinks of water. Tongue slightly coated white, or a dirty white color. Bowels inactive.

Pyrogen cmm (Sw.), three doses two hours apart until better. The next morning she was found to be much relieved in every way, and the "sensation as if the heart was pumping cold water" had promptly disappeared. She was warm and comfortable.

The case made an uneventful recovery, but required Bell. and China, for symptoms arising a few days later, to complete the cure.

Pyrogen has been a very frequent remedy for the grippe in this locality, and in most cases has been the only remedy needed for a complete cure. In many cases three doses are needed to complete the cure. The remedy bears repeating well, and without bad results or aggravation.

(W. A. Yingling, M. D., Emporia, Kansas, Clinical cases, Proceedings of the International Hahnemannian Association 1897, p. 272-274)

### **1899 - An elderly woman suffered for years from an awful ulcerated leg - H. R. Bellairs**

„The patient, an elderly woman of slender means, suffered for years from an awful ulcerated leg, which was, so to speak, riddled with deep, burrowing wounds, which discharged freely and were extremely painful.

Various remedies were prescribed and taken without the slightest perceptible change - *Hepar, Silica, Arsenicum, Hamamelis*, among others. Antiseptic dressings were equally futile in their action.

Suddenly *Pyrogen* flashed, like an inspiration, into the writer's mind. Its success in "bad legs" has previously been made known in the pages of *The Homoeopathic World*. A few globules of the 200 (Heath) were dissolved in an 8-oz. bottle of distilled water; a teaspoonful to be taken once or twice a day.

The result was brilliant. To use the patient's words, "a large boil" formed on the calf of the leg, after the discharge of the contents of which all the various ulcers healed up directly.

There is no pain now, and but little irritation.

*Pyrogen* is one of our most wonderful weapons, if rightly used. It is invaluable in varicose ulcers, and has, according to Dr. Kent, given great relief in the hacking night cough of phthisis, which it often removes. Why it should have been omitted from Dr. H. C. Allen's Keynotes is more than the present writer can conceive." - *Homoeopathic World, July, 1899*.

(H. R. Bellairs, M.D., Oxford, A Pyrogen Case, The Homoeopathic Recorder vol. 14 (1899), p. 366-367)

### **1902 - Pyrogenium fevers - Henry C. Allen**

"For sapraemia or septicaemia: puerperal or surgical; from ptomaine or sewer gas infection; during course of diphtheria, typhoid or typhus; **when the best selected remedy fails to > or permanently improve**.

**The bed feels hard** (Arn.); *parts lain on feel sore and bruised* (Bapt., Nux-m.); rapid decubitus (Carb-ac.).

*Great restlessness*; must move constantly the > the soreness of parts (Arn., Bell-p., Eup-per.).

Taste: *sweetish*; *terribly foetid*; **pus-like**; as from an abscess.

Vomiting: persistent; brownish, coffee-ground; offensive, stercoraceous; with impacted or obstructed bowels (Op., Plb.)

Diarrhoea: horribly offensive (Psor.); brown or black (Lept.); painless, involuntary; uncertain, when passing flatus (Aloe, Nat-m., Olnd.).

Constipation: with complete inertia (Op., Sanic.); *obstinate from impaction, in fevers*; **stool large, black, carrion-like**; *small black balls*, live olives (Op., Plb.).

Menses: horribly offensive, carrion-like; a rotten odor; last but a day, then a bloody leucorrhoea of the same horrible odor.

Foetus or secundines retained, decomposed; dead for days, black; horribly offensive discharge; "never well since" septic fever, following abortion or confinement.

Lochia: thin, acrid, brown, very foetid (Nit-ac.); suppressed, followed by chills, fever and profuse foetid perspiration.

*Distinct consciousness of a heart*; it feels tired; as if enlarged; purring, throbbing, pulsating, constant in ears, preventing sleep; cardiac asthenia from septic conditions.

*Pulse abnormally rapid, out of all proportion to temperature.*

Skin: pale, cold, of an ashy hue (Sec.); obstinate, varicose, offensive ulcers in old persons (Psor.).

**Relations.** - Compare: Arn., Ars., Bapt., Carb-v., Op., Rhus-t., Sec., Verat.

Latent pyrogenic process, patient continually relapsing after apparent simillimum.

**Type.** - Septic and zymotic; tends rapidly to malignancy. Puerperal and surgical fevers, with a rapid tendency to septic typhus.

**Time.** - Forenoon; 10 or 11 A. M. most marked. When distinctly remittent, evening fever lasts all night. Every alternative day.

**Cause.** - Sepsis intestinalis from eating ice cream, cheese, sausage, or canned meats undergoing the putrefactive process; sepsis following abortion, labor or surgical operations; septicemia. Sewer gas poisoning.

**Prodrome.** - **Bone pains**: *aching in the limbs*, or over entire body as from a severe cold; with great *muscular soreness*; **the bed feels hard**. Coldness and numbness of hands and feet, of arms and legs.

**Chill.** - Begins in the back between the scapulae (Caps., Eup-per., Polyp.).

*Chilliness.* Chilly at night; *the bed feels hard*.

Chilly when getting into bed, teeth chattered.

Chilly as soon as he touches the cold sheets (Aran.).

Coldness and chilliness all day that no fire would warm; sits by the fire and breathes the heat from the stove; chilly when leaving the fire; at night when fever came on had a sensation as if lungs were on fire, must have fresh air, which relieved.

Chilly, with increased action of the heart.

Intense restlessness, must move constantly to > the aching bones and sore muscles.

**Heat.** - Feels hot, as if he had a fever, as if temperature was 105, but actually was only 99. Frequent urging to urinate as soon as fever came on; urine profuse and clear as spring water; could tell when fever was coming on from frequent calls to urinate. Great throbbing of temporal arteries, every pulsation felt through the head. Circumscribed redness of the cheeks.

**Sweat.** - Cold sweat over the entire body. Perspiration horribly offensive; carrion-like (Psor.). Profuse, offensive, exhausting perspiration. Sweat: of single parts; of chest and neck; of genital organs; of affected parts; during sleep, stops when he wakes; fetid, cold, viscid, musty.

**Tongue.** - Large, flabby, leaves imprint of teeth; white, or yellowish-white, brown on base; heavy, yellowish-gray fur; tip and edges red; clean and smooth as if varnished; fiery red, then dark red and very dry; yellow-brown streak down centre; dry in central third from base to apex; dry, cracked, articulation difficult (compare, Arn., Ars., Crot-h., Tereb.). Taste: bitter; fetid in mouth and throat as if full of pus; breath horribly offensive.

**Analysis.** - For the first use of Pyrogen in typhoid and septic conditions we are indebted to our English homoeopathic brethren. It is adapted to the most malignant type, cases in which we formerly zig-zagged a cure with Arsenic, Carbo veg., Rhus or Terebinth, are met directly by this powerful nosode. But it is in puerperalism that it bids fair to occupy a unique place in our therapeutics; here it is almost without a rival, in prompt and effective action, when the best selected remedy fails to ameliorate or improve.

*Prodrome:* aching and soreness of the limbs.

*Chill:* begins between scapulae, as soon as he touches the cold sheets; **the bed feels hard.**

*Heat:* frequent urging to urinate as soon as the chill comes on; circumscribed redness of the cheeks.

*Sweat:* profuse, exhausting, carrion-like; cold, musty, viscid; of single parts.

*Chill:* begins in the back, between scapulae; **severe, general of bones and extremities;** marking onset of septic fever; temperature 103 to 106; heat sudden, skin dry and burning; pulse rapid, small, wiry, 140 to 170; cold clammy sweat follows.

In septic fevers, especially puerperal, Pyrogen has demonstrated its great value as a homoeopathic dynamic antiseptic.”

(Henry C. Allen, The Therapeutics of Fevers, Philadelphia 1902, Pyrogen, p. 313-316)

#### **1904 - Abortion - J. E. Huffman**

"Mrs. E. F., age 22. Married about a year. Sept. 24. 1893, Two months ago had operation. Was pregnant three months. Fetus was dead and much decomposed. Had several boils before the operation.

Symptoms at present - Has stupor and the mind seems to become blank. Everything seems as going around. Becomes very irritable, nervous and excitable. Hot flashes begin in the breasts and pass around and down the back. Perspires freely with the flashes. Very constipated, goes several days without desire for stool. Stool dark and in hard lumps. Has numb feeling come on under surface of left arm near axilla and extends to left breast. Breasts were very hard and painful at time of operation and now there is a thick, yellow secretion in them.

Pyrogen; 10 m.

Oct. 5, 1903. Bowels move every second day. Stool about same in appearance. No flashes since medicine till today.

Dec. 7, 1903. No flashes. Has had bilious attack. Constipated. Has not been for medicine since last date but have seen her several times and general health good. On each of above dates gave placebo to last one week."

(J. E. Huffman, M. D., H. M., San Francisco. Cal., Clinical cases, Proceedings of the International Hahnemannian Association 1904, p. 272-273)

### **1913 - Pyrogenium and Anthracinum - Eugene B. Nash**

„As might be expected, Anthracinum is more like this than any other remedy. In all cases simulating septic fever or poisoning Arsenicum, Anthracinum and Pyrogen should be remembered. The horrible burning pains of the first two are prominent.”

(E. B. Nash, Leaders in Homoeopathic Therapeutics, 4. ed. (1913), Pyrogen, p. 432)

### **1928 - Pyrogenium in scarlet fever - Elisabeth Wright Hubbard**

"Next, let us look at a triumvirate of remedies for adynamic scarlet fevers, typhoid forms. First **Rhus Tox.**, which is the least alarming and most normal of the three, and often supplants Belladonna. The mental symptoms of Rhus are helpful. He is a mild patient, aristocratic, especially about his eating, craving oysters and dainties. He fears poison in the medicine or in the cold milk that he craves. He is freaky without being petulant. The rash is truly scarlet red, the abdomen particularly so, and the eruption may be millet-seed in form with violent itching (often better by applications of scalding water, despite the general aggravation of Rhus from bathing), or vesicular and even erysipeloid. The rash is coarser than in Belladonna and may increase like urticaria, passing off in the sweat. It is the first remedy to think of when the glands are involved in scarlet fever, especially if they are affected first on the left and then on the right. It has enlargement of the left parotid, and cellulitis of the neck (like Phosphorus); it has swelling of the axillary glands with suppression of the rash. It goes into a typhoidal state with gentle delirium and picking at flocks. It is a safe remedy to give when the typhoidal state comes on in scarlatina and no special drug is indicated. It is especially helpful where the perspiration has been checked. There are liquid yellow stools and the urine often leaves a red stain. The characteristic Rhus restlessness is present.

When Rhus fails and the typhoidal state merges into sepsis with aching and rigors, and a varnished, fiery tongue replaces the triangular tip of Rhus, when the pulse rate increases much faster than the temperature (or pulse and temperature are out of rhythm either way), especially if there is fighting delirium with semi-clairvoyance and threatening heart failure with a carrion-like sweat and loquacity, **Pyrogen** will be the remedy to follow Rhus.

If your typhoidal scarlet fever case is in a full-blooded, not debilitated person, self-opinionated, obstinate, with overwhelming fear of being hurt, both mentally and physically, think of **Arnica**. He is apathetic and lies drawn up in a heap, though he, too, is restless - not from the internal nervousness of Rhus, but because the bed feels so hard and he is sore from lying. He is so weak he must change position little by little. Black and blue spots and small boils come on the parts lain on. He is chilly, like Rhus, but uncovers. He is morose and sullen, does not want to talk or be touched, thinks he will mortify, dreams of muddy water, wakes with distress in the heart at night with horror of instant death, and wants the doctor sent for at

once. But when the doctor comes he says: 'Go home, I don't need you.' The typhoidal states of Rhus and Arnica come on slowly.

When they come with amazing rapidity, a low septic state in seventy-two hours, accompanied by such a pungent stench that even burnt rags do not relieve it, and the nurse gags and retches, you have a **Baptisia** state. He is besotted, purplish, as though he had been drinking heavily. He lies curled up like a dog, muttering: 'I can't do it, I can't do it', meaning that he cannot gather together the parts of himself which he thinks are scattered all over the bed. He is maudlin, stupid, putrid, with a typical Baptisia mouth and sordes. He can swallow only liquids. The darker his throat the more it is Baptisia. His complaints are remarkably painless. He develops bed sores. He, too, when high fever and loquacity ensue, may need Pyrogen." Elizabeth Wright Hubbard, M.D., Boston, Ten Remedies Indicated in the Treatment of Scarlet Fever and its Complications, The Hahnemannian Monthly vol. 63 (1928), p. 339-356

### **1929 - The relation of Calcarea sulphurica to Pyrogen - Elizabeth Wright Hubbard**

"Let us consider Calc. Sulph.'s relation to some of the nosodes. It is given in some of the books, notably in Kent's, as one of the great remedies for those cases where the seemingly indicated remedy does not act, for those cases which need to be followed up with a deeper influence, and is classed with Tuberculinum and Psorinum. The particular nosode to which I want to point out certain resemblances is Pyrogen. At first sight I did not know myself how I could do it, because they are so different in so many ways. but as you go through, comparing the two, you do see certain striking similarities in usefulness.

Calc. Sulph., for instance, is one of the rare remedies which has hilarity in its mental makeup - it is quite refreshing to see one that is not despondent - particularly toward twilight, at 6 p.m.; Pyrogen too, in its first stages, together with loquacity, has great gaiety.

Moreover, of course, Pyrogen has the tendency to septic abscesses, and is a magnificent remedy for crops of boils which can be traced back to prodromes of blood poisoning in the past; also in peritonitis, if one has the temerity to prescribe before sending for the surgeon, Pyrogen will often be called for; as will Calc. Sulph., where there has been a vent for the pus and where it keeps forming and coming in large quantities long beyond the time when healing should be present.

There are also certain respiratory analogies between Pyrogen and Calc. Sulph. For instance, they both have lung abscess and some of the many symptoms agree fairly well. Pyrogen has a strange keynote 'as if the heart pumped cold water', whereas Calc. Sulph. has 'as if the bronchial tubes were pumped full of hot water'. They also have in common a slight symptom of the head - the sensation of a cap on the head.

A word about Pyrogen. It ought to be called the Briareus of remedies (he was the gentleman who had a hundred hands); your Pyrogen patient will lie terribly sick and feel as though he had hands all over the bed. It has been called the Aconite of typhoid; it is Baptisia with a very high fever; it follows Rhus Tox. often and carries through its work in other cases where there is great rattling of the chest; it may follow Antimonium Tartaricum.

Think of these two remedies when you find cases in the spheres of the respiratory or gynaecological or dermatological diseases which have any of these symptoms."

(Elizabeth Wright Hubbard, M.D., A Tissue Remedy - Calcarea Sulphurica and Its Relation to the Nosode Pyrogen, The Homoeopathic Recorder vol. 44 (1929), p. 537-538)

### **1939 - Clinical experiences with Pyrogen - Margaret Burgess Webster**

“The compilation which I am making of *Pyrogen* is too long for reading at this meeting. Before turning it over for publication I am anxious to have the clinical data as complete as possible and I am asking every member here to give any personal experience with this remarkable remedy.

CASE I. - Woman age 75. Faecal impaction following a broken hip; abdomen enormously distended; *tongue red as if varnished; breath very offensive*; enemata unavailing; *Pyrogen* 50m.

CASE II. - Relapse from influenza with severe chill; temperature 105; *sensation as if legs were in a vise and were being screwed tighter and tighter*, had to grit teeth in order to endure pain; great restlessness; *sensation as if legs were all over the bed*, legs lying crosswise and lengthwise.

*Pyrogen* 500 with prompt relief and speedy cure.

CASE III. - Infected foot; acute throbbing pain; foot red and swollen; *restless*, tossing about in bed or *walking the floor for hours at night*; *mouth dry as parchment*; great thirst.

CASE IV. - Under "old school" treatment for three weeks; semi-comatose, roused with difficulty, then very slow in answering questions and then only in monosyllables, dropping again into stupor; pulse 106 to 120; persistently lying on right side with knees hanging over edge of bed and hands under head; when coughing profuse yellow, blood streaked sputum dropped from mouth into vessel; tongue thickly coated yellow; mouth sore; breath offensive; abdomen distended and sensitive; consolidation at base of lungs; incessant cough; constant moaning; PROFUSE DRENCHING PERSPIRATION OVER ENTIRE BODY; RESTLESS.

*Pyrogen* 50M., one dose; in ten days the patient was up and walking about.

CASE V. - Septic metritis. Dreadful unbearable headache with sensation as if a string extended down back to lumbosacral region drawing the two together; mentally half dazed, with sinking spells as if "drifting away". Violent chill lasting half an hour, with *sensation as if a dog had hold of her nipples biting, gnawing and pulling* as hard as he could, or as if a string were wrapped around nipples and pulled, the pain was so intense she screamed in agony. *Drenching sweat*, the bed and clothing were as wet as if a bucket of water had been thrown over her; temperature 102; tongue thick yellow coating; constantly spitting thick white cotton-like mucus; *thirst intense, burning*, for small quantities of water and for ice. Sore as if pounded all over; eyeballs sore on moving them; abdomen very sore to touch. DREADFUL ANXIOUS RESTLESSNESS. Uterus enlarged and sensitive; vaginal examination produced severe pain in the head.

*Pyrogen* 50 M. was given with prompt relief of all symptoms; temperature dropped to normal, but on the second day at 11 a. m. she had another chill lasting fifteen minutes with return of pain in nipples, headache, *anxiety, thirst and sweat*. "My mouth burns and the tips of my fingers burn like fire; give me water, give me ice," she wailed. Eyes glassy, abdomen sensitive, general soreness.

Another dose of *Pyrogen* 50 M. was given, all symptoms promptly subsiding, but no uterine contractions were set up.

Six hours later the uterus was emptied of a two and a half months macerated foetus and the patient made an uninterrupted recovery without return of symptoms. This case was

particularly interesting because all the symptoms disappeared even while the cause of the sepsis was still present.

CASE VI. - Woman age 73, never strong, had been making a good recovery from a bronchopneumonia under *Sulphur* and later *Calc. carb.*, when she suddenly became worse; respiration shallow, labored and rattling; seemed too weak to cough although there was some yellow blood streaked expectoration; restless, anxious, wanted air; *intense thirst*, although water caused burning in stomach; temperature 98, pulse very irregular, almost impossible to count, but about 140; the patient seemed nearing the end.

*Pyrogen 30* was given two hours apart for six doses.

Reaction was prompt and unmistakable, the pulse and strength improved; the cough became easy with large quantities of offensive purulent sputum.

*Pyrogen 50m.* was given later and the patient was discharged in excellent condition.

CASE VII. - Heat exhaustion during the course of a chronic interstitial nephritis; temperature normal; pulse 110; restless; anxious; intense thirst, but could retain nothing on stomach.

Not only did her acute symptoms disappear under *Pyrogen* but her general condition greatly improved.”

(Margaret Burgess Webster, M.D., *Pyrogen*, The Homoeopathic Recorder vol. 55 (1939), p. 12-15. Read by title before I. H. A., Bureau of Materia Medica, June 17, 1938.)

### **1939 - Pyrogenium in influenza - Douglas M. Borland**

"*Pyrogenium* influenza patients usually run a fairly high temperature. Typically, they are flushed, hot, sweaty and somewhat congested-looking. They very often complain of a sensation of burning heat, and feel horribly oppressed by it.

Most of the *Pyrogenium* influenza patients that I have seen have been over-active mentally. They tend to be very loquacious and chatter away readily, and become definitely excited in the evening maybe even delirious.

They are very much troubled with sleeplessness, due again to excessive mental activity; if they become toxic, they may get a slight degree of delirium with a sensation of uncertainty as to where they are. They quite frequently wake up bright and clear and describe unpleasant dreams of having to try and collect themselves from all over the bed - but that is more in their sleep than when they are awake.

A constant *Pyrogenium* indication is that, though the patients feel so very hot and uncomfortable, they are sensitive to any draught. It makes them shiver at once - very much as in *Mercurius* - and they quite frequently get little shivers, almost little rigors, intermingled with their feeling of intense heat. Very often the patient feels chilly for a moment, gets a little shiver, turns horribly hot and then breaks out into a definite sweat. As a rule the sweat in *Pyrogenium* is definitely offensive.

Always, in influenza, they complain of intense, generalised aching pains; they ache from head to foot, and are very uncomfortable with it; they are sensitive to pressure, and often move restlessly about in order to ease the painful part.

They suffer from very violent congestive headaches; either severe occipital headaches or, much more commonly, intense throbbing headaches in the temples with a sensation of heat

and pressure in the head and often, a damp, hot sweat. These congestive headaches are definitely relieved by pressure.

A dry mouth is always found in a *Pyrogenium* case, with a good deal of thirst for small quantities of cold water. The tongue tends to become dry, the mouth offensive.

There are two types of tongue in *Pyrogenium* patients. Much the most common is a dry tongue with a somewhat brown coating. Occasionally - less commonly in influenza than in some of their conditions - the tongue has no coating at all; it is deep red and dry, very sensitive, painful and hot, and it tends to crack. This tongue is found more in the frankly septic fevers of *Pyrogenium* than in the catarrhal influenzal states.

These patients tend to have very violent attacks of sneezing, which are brought on by any cold draught. Uncovering them for examination is enough to start them sneezing; sometimes they actually sneeze if they put a hand out of bed - it is cold that always sets them going.

As a rule, the nasal discharge in *Pyrogenium* is thick and gluey, which is difficult to expel. Patients complain that first one side of the nose and then the other gets blocked up; they have great difficulty in clearing it. The right side is blocked more commonly than the left, but it does tend to alternate.

The typical appearance of the *Pyrogenium* throat is relaxed and unhealthy-looking, probably with a certain amount of superficial ulceration of the tonsils and a good deal of offensive gluey postnasal discharge.

In *Pyrogenium* influenzas there is liable to be involvement of the larynx, with a feeling of intense rawness and burning, and an accumulation of the same kind of glairy, sticky mucus which they have difficulty in expelling. There is very troublesome cough and a good deal of mucus to clear away; the patients cough up sticky, yellowish-coloured mucus.

Most *Pyrogenium* influenza patients have intense ringing in the ears, with a feeling of obstruction, marked tenderness behind the ears, and a severe pressing sensation as if the ears were going to burst. The right ear is much more commonly affected than the left.

Associated with the ear condition is a very similar sensation in the accessory nasal cavities. There is a feeling that the frontal sinuses are blocked, and an intense pressing pain just above the eyes - more commonly above the right eye.

There is also likely to be a similar sensation in the upper jaw from involvement of the antrum, with again the same pressing pain. The antrum pains are liable to go from one side to the other, or to spread right across.

While the condition is acute, the pains are very much aggravated by cold and any active movement of the patient. Coughing, too, increases the pains; the forehead feels as though it would burst, and there is often intense throbbing in the affected area.

There is liable to be an extension further back in the accessory sinuses, very often accompanied by an intense pressing pain deep in the skull. It would seem to be an involvement of the sphenoidal cells. The patients very often complain, at this time, of very severe, distressing headache.

These patients have a certain amount of pain and tenderness in the eyes, very often tenderness on pressure. It is usually accompanied by acute photophobia. In fact, there is often photophobia without any acute inflammatory condition in the eyes: the patient seems to be

disturbed by light quite apart from the local condition. As a rule the eyes are gummy and sticky rather than showing profuse lachrymation.

*Pyrogenium* patients always complain of a unpleasant taste - just a feeling of flatness or lack of taste, or a definite putrid taste. They very often say that a lot of stuff accumulates at the back of their throats and, when they spit it out, it has a foul taste. This gives them complete aversion to food, they have no appetite at all. And their very painful throat makes it difficult for them to swallow.

*Pyrogenium* influenza patients are liable to acute digestive disturbances - enteritis rather than gastritis. They have quite acute abdominal pains accompanied by very violent diarrhoea, always a very offensive and rather profuse watery stool.

Useful for diagnosis is the point that this stinking profuse diarrhoea is not accompanied by a great deal of urging; there is no marked degree of tenesmus. But there is marked abdominal pain, very often in the caecal region, on the right side of the abdomen, and the pain is very much aggravated by motion. The abdomen is sensitive to touch and the patient rather more comfortable lying on the right side.

There are two other indications for *Pyrogenium* that should be mentioned. Firstly, before the patients develop any signs of cold at all, they are conscious of extreme pains starting in the legs and spreading gradually upwards. Secondly, there is always a marked discrepancy between the pulse rate and the temperature of a *Pyrogenium* patient.

The discrepancy can go either way: rapid pulse and comparatively low temperature or high temperature and comparatively slow pulse.

The typical *Pyrogenium* influenza is quite a serious case. However, the patients do respond astonishingly quickly."

(Douglas M. Borland, Lecture on influenzas, given at the London Homoeopathic Hospital, 1939)

### **1939 - *Pyrogenium* pneumonias - Douglas M. Borland**

The *Pyrogen* pneumonias are usually much more rapid in their onset than the *Baptisias*. Mentally the patients are quite different. You will always get a certain amount of loquacity in your *Pyrogen* patients. They are rather impatient, they talk fast, they talk a good deal, and they are liable to be rather irritable.

In appearance the *Pyrogen* patients tend to have a brighter flush, they are not quite so cyanotic as the *Baptisias*. On any exertion, coughing, or anything of that sort, they tend to flush up much more, and they then become definitely dusky. After a paroxysm of coughing the colour tends to ebb, and they may become definitely pale.

The temperature tends to be definitely higher than in the average *Baptisia* case, running up to 104° or 105°, and it is always accompanied by very considerable hot sweat.

The tongue in *Pyrogen* and *Baptisia* cases is sometimes very difficult to distinguish as you will get *Pyrogen* patients with one that is almost as dry as it is in *Baptisia*, and with the same kind of brown, dry coating. But occasionally you will come across a *Pyrogen* patient with a much redder tongue with less coating on it, and which is very dry and accompanied by a good deal of thirst.

Both these patients suffer from waves of heat, but in *Pyrogen* they are always followed by waves of shivering - they are alternate hot and cold waves. It is almost as if the patient

suddenly blushed from his toes to his head, exactly the same thing as would be described as “hot flushes”.

In both the *Baptisias* and the *Pyrogens* there is exactly the same complaint of general soreness, which is described in the same way; they say the bed is too hard and they move about to try to get an easy position, which makes them restless. They give exactly the same description of not knowing where their arms and legs are, and they both say they are moving about in order to bring their sensation back to normal. You cannot distinguish the one from the other in this respect.

There is one point you can tack on to these aching pains, and that is that in *Pyrogen* cases you quite commonly hear the statement that the illness started as an aching in the legs which gradually spread up. It is a quite frequent story.

In contrast to the chest symptoms in *Baptisia*, the *Pyrogen* case suffers much more from a sense of general oppression of the chest, with a good deal of aching soreness actually on the chest wall. And the respirations in the *Pyrogen* case are always very rapid and very shallow, which is frequently the case in *Baptisia* also.

The sputum in the *Pyrogen* case tends to be ore profuse, it is somewhat pussy, and it is always offensive.

Then there is one other point which at once distinguishes the *Pyrogen* pneumonia from that of any other drug in the *Materia Medica*, and that is that there is always a discrepancy between the pulse and the temperature. That discrepancy may be a very rapid pulse with a comparatively low temperature; or equally commonly it may be a high temperature and a comparatively slow pulse. It may go either way, but it is the discrepancy between the pulse and the temperature that really matters.

(Douglas M. Borland, M.D., *Pneumonias*, London 1939, *Pyrogen*, p. 29-30)

### **1942 - Clinical experiences with Pyrogen - Margaret L. Tyler**

“One’s experiences of *Pyrogen* seem hardly worth mentioning after the foregoing, and yet they are corroborative.

INFLUENZA. One recalls the early days of severe influenza, which came, like a bolt from the blue, after many years’ absence - so one was told. It was called the Russian Influenza, because it was supposed to have spread from the Foreign Office, having come in Dispatches from Russia. One remembers the agonies of restlessness, with the utter impossibility of remaining for more than one moment in any position, till, from a chair, one wriggled and twisted, in search for relief, till down on the floor, when one had to start again. This was a cry for *Pyrogen* - had one then known it!

The year when the Duke of Clarence died, the doctors were writing to the papers, almost in panic (because so many people died), that it was imperative, since the disease was so severe and brief, to give the patients quantities of alcohol. With Burnett’s *Pyrogen 6* we had a wonderful experience. At that time we had a number of adults and children living on the place - the family, indoor servants, out-door servants and their families (not the restricted families of 1932!) - and as they went down with influenza one by one, or in batches, *Pyrogen 6*, given six-hourly for a few doses, cured every single case in from twenty-four to forty-eight hours; and there was no alcohol, and there were no complications. And after that it was *Pyrogen*, a

dose or two at the sudden onset of the violent pulsations, that used to announce a fresh attack of influenza, that, for me, finished its bi-annual recurrences.

Of course, epidemics of what we call influenza vary greatly in their symptoms, and in the remedy of the “genus epidemicus”, needed to combat them. One year it may be *Mercurius* - one *Gelsemium*; one year most of the cases will be of the *Baptisia* type, and so on. But the fever of violent pulsations and intense restlessness, because it is only constant movement that makes existence possible, needs *Pyrogen*.

A doctor was telling me the other day about a recent *Pyrogen* case. It was not yielding to likely remedies, when the symptom, “Felt as if he covered the bed”, led him to prescribe *Pyrogen*, which promptly cured.

American doctors find one of their most dramatic uses for *Pyrogen* in sepsis after delivery, with offensive discharges, and where part of the placenta has been retained. They say that they give *Pyrogen* and it “pops out”. Here is such a case:

A couple of years ago one of our cows calved away in the fields. Calf was found dead, and no placenta. The veterinarian removed some of it, but failed to get it all away. She had fever and was very ill, and he was thinking of exploring further; but she was given *Pyrogen*, and the next day the fever was gone and she was well. I don’t know if it was a case of “pooping out”, but there was no further trouble.

One has seen great relief from *Pyrogen* in abscess and whitlow. But here homoeopathy has such a wealth of helpful remedies - *Crotalus*, *Lachesis*, *Anthracinum*, *Silicea*, *Arsenicum*, *Hepar*, *Pyrogen*, etc.

One remembers a case of diarrhoea persisting for years after typhoid fever, and other cases of diarrhoea, cured by *Pyrogen*; also a case of diabetes (indications forgotten) where *Pyrogen* removed the sugar.”

(Margret L. Tyler, M.D., Homoeopathic Drug Pictures, 1942, *Pyrogen*, p. 695-696)

# Symptom-Register

## Übersicht

1893 - William A. Yingling

1910 - Henry C. Allen

## 1893 - William A. Yingling

“I here collate the *reliable* indications of *Pyrogenum*. I have not used any items from the work of Dr. Burnett, as that work is obtainable by everyone. I have omitted to record any symptom where the action of other remedies used in connection with *Pyrogenum* might influence its curative range. As the larger part of this record is clinical, and as the *symptoms cured with a single remedy* are reliable data, I do not indicate the difference. I use the language of the authors as far as practicable.

**Authorities:** A proving by G. W. Sherbino, M. D., Med. Advance, XXV, 369; M. Florence Taft, M. D., Med. Advance, XXV, 378; H. C. Allen, M. D., Med. Advance, XXVI, 36; W. H. Leonard, M. D., Med. Advance, XXVI, 103; J. A. Wakeman, M. D., Med. Advance, XXVIII, 298; G. W. Sherbino, M. D., Homoeopathic Physician, XIII, 204; Jennie Medley, M. D., Homoeopathic Physician, XIII, 114; J. Emmons, M. D., Homoeopathic Physician, XIII, 284; personal letter, Samuel Swan, M. D., J. H. Allen, M. D.

## Mind

- *Very loquacious*. "I never talked so much in one day in all my life." "I could think faster and talk faster than I ever could." Great desire to talk.

- Irritability.

- Feels good and buoyant, in the best of spirits, although feels sick.

- Delirious when closing the eyes; sees a man at the foot of the bed or in the further part of the room.

- Inclined to talk all the time at night during the fever. Talks to herself. Whispers to herself; whispers in her sleep.

- Sensation as if she covered the whole bed; she knew that her head was on the pillow, but she could not tell where the rest of her body was.

- She feels when lying on one side that she is one person and that when she turns to the other side she is another person.

- Sensation as though the fever would not run in her alike - i. e., she felt as though she was existing in a second person, or that there were two of her.

- Sensation as though he was crowded with arms and legs; when turning over in bed they were still crowding him.

- After the fever leaves him he still has the *hallucination that he is very wealthy*, and that he has a very large sum of money in the bank; this idea of having money was the last to leave him.

## Sensorium

- On getting up in the morning staggers as if drunk.

- Dizziness on rising up in bed.

## Head

- Pain in both mastoids, aching worse on right side. A dull throbbing in the mastoid region.

- *Great throbbing of the arteries of the temple and head*; every pulsation felt through the brain; this throbbing would meet on top of the brain. Every pulsation felt in the head and ears.

- *Painless throbbing*: Throbbing all through the fore part of the head; sounds like steam escaping from a steam tug; a puffing and purring sound.
- Forehead bathed in cold perspiration.
- Frightful throbbing headache, which was better from a tight band.
- In the case of *Bright's Disease* the headaches had most terrible aggravations, lasting from two to four days; during the aggravation she could neither lie in bed nor sit up, but was in constant motion, groaning and crying piteously for help.
- Excruciating, bursting, *throbbing headache with intense restlessness*. Headaches were often accompanied with profuse bleeding of the nose and nausea and vomiting.
- Sensation as if a cap were on the head; when she awakens and finds this cap on her head she knows she is all right, that she is not delirious.
- Cerebro-spinal meningitis. (See Limbs in General.)
- Rolling of the head from side to side.

### **Eyes**

- Left eyeball sore, worse by looking up and turning the eyeball outward.
- Projecting eyes.

### **Ears**

- Loud ringing in left ear, like a bell; also in right ear, lasting a few moments.
- Cold ears.
- Redness of the ears, looked as if the blood would burst out of them.

### **Nose**

- Awakened by dreaming that the nose was bleeding, and found it had bled all over the pillow.
- Sneezing every time he puts his hand out from under the cover.
- Sneezing at night; nostrils closing, alternating from side to side.
- Cold nose.
- *Fan-like motion of the alae nasi*.

### **Face**

- Burning of the face.
- Face yellow.
- Face very red.
- Face pale and sunken and bathed in cold sweat.
- Face pale, greenish or chlorotic.
- Circumscribed redness of the cheeks.

### **Tongue and taste**

- Tongue coated white on the forepart and brown on the back part.
- Brownish coat on tongue, mostly back part.
- Tongue coated a yellowish brown.
- Tongue heavily coated, yellowish gray fur; edges and tip very red.
- Yellow brown streak down centre of tongue.
- *Terribly fetid taste*, as if mouth and throat were full of pus (which lasted some twenty-four hours; could only associate it with a broken abscess in the mouth. Proving).
- *Tongue fiery red, then dark red and intensely dry*.

- Tongue clean, smooth and dry; first fiery red and then dark red, glossy, shiny, and easily moistened.
- Tongue dry, not a particle of moisture on it. Tongue dry down the centre.

### **Mouth**

- *Bad taste in the mouth.*
- Bad taste in the morning.
- Terribly fetid taste in the mouth and throat as if full of pus.
- Breath horribly offensive, carrion-like.
- Bitter taste in the mouth.

### **Throat**

- Diphtheria with extreme fetor; rotten odor.

### **Appetite**

- No appetite for breakfast.
- No appetite for dinner.
- No appetite nor thirst.

### **Eating and drinking**

- Great thirst for small quantities, but the smallest quantity was instantly rejected by the stomach.
- Drinking very hot water relieves the sick stomach.
- Entire absence of thirst.

### **Nausea and vomiting**

- Belching of sour water after breakfast.
- Vomiting and purging; stool profuse and watery.
- Nausea and vomiting persistent.
- Vomiting water when it becomes w T arm in the stomach.
- Sick stomach better by drinking very hot water.
- Vomiting ameliorates the sick stomach.
- Tries to vomit; urging to vomit, with cold feet.
- Feels better after vomiting.

### **Stomach**

- Feels too full in the stomach and bowels.

### **Abdomen**

- Great distention. Feels too full.
- Pain in the umbilical region, with passage of sticky, yellow stool.
- While riding in a buggy aching in, or pain on, left side of the umbilicus. Aggravated by drinking water. Ameliorated by passing flatus downward.
- Soreness of the abdomen. Bowels so sore she can hardly breathe. Bowels so sore she cannot bear any weight or pressure over right side.
- Sides: Bubbling or gurgling sensation in left hypochondrium, extending back to the left side of the spine; felt only when lying on the left side.

- Very severe pain in the right side; knife-like pains going through the back; worse from every motion, from coughing, talking, or taking a long breath; better from lying on the affected side; groaning with every breath.

### **Stool, anus, etc.**

- Two soft, sticky stools, eight to nine A. M.
- On passing flatus per anus a portion of stool passed involuntarily.
- Stool very much constipated, large and difficult; required great effort; first part of stool composed of balls, last part natural; on stool there were streaks of blood, leaving a soreness in anus.
- *Constipation*, hard, dry, accumulated feces.
- Vomiting and purging; stool profuse and watery; no pain.
- *Stool horribly offensive*, a carrion-like odor.
- Tenesmus with strong desire to defecate without ability, reflected from the bladder. (See under Urine.)

### **Urine**

- Bright's disease of the kidneys.
- Urine less frequent than usual; only twice in twenty-four hours.
- Urine very yellow after being made, scant; do not desire to urinate half as often as in health; urine after standing gets very cloudy with a substance that looks like orange peel; a red line was deposited on the side of the vessel which was hard to remove.
- Urine yellow. Urine scant.
- Red sediment at the bottom of the vessel looking like red pepper.
- Got up three times to urinate at night.
- Urine loaded with albumen, casts frequent, but never numerous.
- *Urine horribly offensive, carrion-like.*
- As soon as the fever came on he commenced to urinate; could tell when the fever was coming on from the frequent calls to urinate. This urine was as clear as spring water.
- Intolerable tenesmus of the bladder, it was more of a spasmodic contraction than anything else; at the same time this condition would be reflected to the rectum with a strong desire to defecate without ability to do so; involving also the ovaries and the broad ligaments.
- The following case will be of interest in this connection. On a former occasion I had given *Catarrh-vesica dmm* (Swan), which acted promptly and removed the distressing symptoms, but they returned in time. I concluded to test the remedy under consideration, with the following result:

June 4th, 1893. - A lady of thirty-nine years, blonde. Severe tenesmus of the bladder, involving the vagina and rectum, with soreness of the muscles of the abdomen. "The rectum would draw together so tightly she could not introduce her finger." She would have urging desire to pass water every few minutes, passing but very little foul urine at a time, with severe straining to pass more water. After each evacuation of urine a continual burning and pressure in the parts. Some relief, or rather endurance, by sitting over the urinal, which allowed the passage of the water at all times. There was a comfortable feeling in sitting: over hot water. The woman suffered continual agony.

At 9.30 a. m. I prescribed *Pyrogen cm* (Swan), a small powder in eight spoons of water, a spoonful every hour till better. In a very few moments after taking the first spoonful she commenced to gasp, and in less than one-half hour she went to sleep and slept for two and one-half hours. A little after noon she got up, feeling much better, and prepared dinner for the

family. This work slightly aggravated the symptoms, upon which she took the second spoonful of medicated water and again slept for a couple of hours to awake feeling very much better, and by six P. M. perfectly relieved in every way except a slight hurting in the forehead and small of back; next day was still feeling better, but had a soreness in the region of the kidneys.

June 5th. - Felt quite well all day. Only trouble is a sense of weakness, or a don't-feel-like-doing-anything; in the private parts a sense of fullness, but none of the distressing symptoms of yesterday. When quiet she can feel her "pulse" beat all over the body; when sitting she feels it in her "bottom." No medicine.

June 6th. - "Feels very good this morning, yet feels that she has not entirely gotten rid of the trouble." Slept all night soundly; a good night's rest. Still feels the pulsation, but not so strongly. From too much exercise during the day she began to feel badly in the afternoon, with some strong indications of the trouble returning. She had to "hold up" in the privates and rectum; rectum felt drawn up or contracted, some headache.

*Pyrogen dmm* (Swan), one dose dry on the tongue on going to bed.

June 7th. - Feels better than at any time yet. No headache; the "holding up" and contraction in private parts and rectum all gone. Her abdomen feels sore still, and she is weakly but much encouraged. Remains better all day, but still "feels it to be there yet, but much better." No medicine.

June 8th. - Still improving. Feels the trouble only when passing water, and then only a very little. Feels "lots better in every way," but does not gain strength so rapidly as she would like. No medicine.

June 9th. - Felt some worse last night, which must have been from too much exercise and standing. Feels better this morning. Does not feel the trouble at all. No medicine.

June 10th. - Doing well. No medicine.

June 11th. - From a ride in a poor, shaky cart, which jarred her very much, last night the burning pressure and tenesmus returned so as to be distressing. A single dose of *Pyrogen dmm* (Swan), at once relieved and produced sleep during the night. Next morning quite well, and no more medicine.

June 14th. - Has been doing finely and without a return of the trouble. Has taken no more of the medicine. To-day, after assisting in a large washing, her menses came on entirely free from pain and of a bright red blood, and feeling unusually well. Other periods have been not to say painful, but disagreeable, with *very dark offensive blood, which could hardly be washed from the napkin.*

June 20th. - Has had on a couple occasions slight indications of a return of the trouble during the evening, but it passed off without any more medicines.

July 11th. - Remains well and feels better than for many months. This is her condition in spite of very much work. (W. A. Y.)

### **Male Sexual Organs**

- Testicles hang down relaxed; the scrotum feels thin and it looks that way.

### **Female Sexual Organs**

- Puerperal peritonitis with extreme fetor; a rotten odor.

- Bright's disease.

- *Menses horribly offensive, carrion-like.*

- Menses last but one day, and then a sanguineous leucorrhoea of the *horrible odor.*

- Hemorrhage of bright red blood with dark clots.

- Septicaemia following abortion.
  - Has cured prolapsus uteri, with bearing down, relieved by holding the breath and straining, as in the act of labor.
  - Pains start in the uterine region and passing upward to the umbilicus. It was the reverse [in direction] (a corkscrew pain); this was momentarily relieved by holding the breath and bearing down, as in labor; momentarily relieved by pressing the hands against the vulva; then she said she would have to turn loose, as it made her worse.
- Pain starting in the umbilicus or a little above and passing down toward the uterus, but at midway of the distance to the uterus it would be intercepted by the same kind of a pain starting in the uterus and passing upward till they would meet midway between the umbilicus and uterus, then gradually die out, till another would come as before; ameliorated momentarily by drawing her knees up to her chin and grasping her arms around them and holding them tight.
- In a case of abscess of left ovary following oophoritis, the ovary very large, throbbing, acute pain, great distress, with fever and rigors, the administration of *Pyrogen cm* (Swan), produced a flow, as reported by the husband, of a "white, creamy pus the size of a man's arm from the womb," with general amelioration of the condition and rapid decrease of the size of the ovary. The case was cured, but required Lachesis and Calcarea carb. There is no question of the speedy and happy effect of Pyrogen. (W. A. Y.).

### **Breathing**

- Wheezing when expiring.

### **Cough**

- Coughing, spitting up phlegm from the larynx.
- Cough worse from moving, turning over, or the least motion.
- Coughs more in a warm room. Cough better by sitting up; worse when lying down.
- Coughing up rusty colored mucus. Expectoration horribly offensive. Coughing up yellow sputa through the night.
- Burning in the larynx and bronchi on coughing; coughing causes a pain in the back of the head.
- Stitches in small of back on coughing, only noticed in the chair.

### **Lungs**

- Pain in the right lung and shoulder, aggravated from coughing or talking.
- Neglected pneumonia: "Cough, night-sweats, frequent pulse, and to all appearance as if in the last stage of pneumonic-consumption. An abscess had burst that day and was discharging a great amount of pus; tasted like matter." Made a rapid recovery on *Pyrogen cm*, three doses.

### **Heart and Pulse**

- Pain in the region of the left nipple, as if in the heart, as if it was going to ache; increased heart action; pulse 120.
- *Every pulsation felt through the brain.*
- *Heart feels tired as after a long run.*
- Increased heart action from least motion.
- Circulation so active he could hear the blood pass through the ears and sound like escaping steam. Blood throbbed all through fore part of head; could feel it in every part of the body, even in the fingers.

- *Tired feeling about the heart*, feels like taking it out to let it rest; it would be such a relief to stop it and let it lie down and stop throbbing. Pulse, 96; temperature, 98, nine A. M.
- Every pulsation felt in the head and ears; a painless throbbing.
- Sensation as if the heart was enlarged; a distinct consciousness of a heart.
- Pulse, 140, feeble and wiry; temperature, 99. (Pulse, 160.)
- Violent heart action which is very tiresome.
- *Palpitation or increased action of the heart without corresponding increase of temperature.*
- Palpitation worse from motion, better by remaining quiet.
- Heart beats hard, has a laborious action.
- Sensation as if the heart was too full of blood.
- Heart beats very hard; can be heard a foot away from the thorax.
- Always can hear her heart beat.
- Could not sleep from the whizzing and purring of the heart; when she did drop off to sleep she was delirious.

### **Chest**

- "A severe hurting within the lower part of the sternum, sometimes extending to the joints of the ribs, and up to the throat, as if the oesophagus was being cramped; a sensation of contraction, of drawing together."
- Soreness of the chest; purple spots on the chest.

### **Neck and Back**

- Weak feeling: in the back.
- Stitching pain in the back on coughing; pain in small of back.
- Throbbing of the vessels of the neck; the carotids have a distinct wave-like throb. The throbbing is from the clavicle upward.

### **Upper Extremities**

- Abscess in left shoulder joint, in front; seemed to be in the joint extending down the arm for three inches, the pain lasting till I went to bed. (From five P. M.)
- Numbness of the hands and arms.
- Hands cold and clammy.
- Pain in the right lung and shoulder; worse from coughing or talking.

### **Lower Extremities**

- Aching about the left knee as though the bones were broken.
- Aching about the knees, deep in the bones, while sitting by a fire. Better by walking around and motion and by putting the legs on the stretch.
- After going to bed felt a pain about the patella, by flexing the leg.
- Tingling sensation on the right little toe as if frost-bitten.
- Feet and legs seriously swollen. Bright's Disease.
- Legs swollen to utmost extent of skin. Bright's Disease.
- Numbness of the feet.

### **Limbs in General**

- Aching pains in the limbs; aching in the bones; aching all over the body as from a cold; aching with soreness of the flesh; the bed feels hard.
- Cold extremities.

- Numbness of the hands and arms, and of the feet, and the numbness extends over the whole body.
- Child with cerebro-spinal meningitis very sick; there was automatic motion of the right arm and right leg; this kept up till it would turn her around from left to right till her feet would get on the pillow or touch the head-board. When righted in bed the same would be repeated at once.

### **Fever, Chills**

- "In all cases of fever commencing with pains in the limbs." (Swan.)
- *Chilliness*: Chilly all night; the bed feels hard.
- Feverishness.
- Felt chilly, with increased action of the heart.
- After getting into bed felt chilly, teeth chattered. Awoke at ten P. M. in a perspiration. Sweating mostly on upper part of the body.
- Feels hot as if he had a fever, but the temperature was only 99°; feels as if it was 105°.
- *Perspiration horribly offensive*, carrion-like; disgust up to nausea about any effluvia arising from her own body.
- Cold sweat over the body.
- Coldness and chilliness all day that no fire would warm; sits by the fire and breathes the heat from the stove; chilly whenever leaving the fire; at night when the fever came on he had a sensation as if his lungs were on fire, and that he must have fresh air, which soon brought relief.
- Frequent calls to urinate as soon as the fever came on; urine clear as spring water.

### **Sleep**

- Dreams about various things - about business - dreaming all night; "dreaming that three ladies were stopping at the same house; we all had the diarrhoea and were all cured by Aloe."
- After sleeping awhile awoke to roll and tumble in every conceivable position.
- Feels weak in the morning.
- Activity of the brain prevents sleep; was making speeches and writing articles; could not keep my eyes shut. Could not sleep till toward dawn.
- Restlessness relieved after sleep.
- Cries out in her sleep that someone or a weight is lying on her. Could not sleep from the whizzing and purring of the heart.
- Whispers in her sleep.

### **Nerves**

- Great debility in the morning so that he staggered when trying to walk.
- Great nervousness and restlessness.
- Could not lie long in one place without moving. "Thought she would break if she laid too long in one position."
- Great prostration.
- *Great restlessness, better when first commencing to move*; relief is but momentary; must keep up the motion.
- Death-like restlessness or the restlessness of death or those in *articulo mortis*; amelioration from sitting up in a chair and rocking hard.
- Symptoms of paresis; child could not stand nor walk; sat on the edge of the bed rocking the body back and forth - was relieved when in motion.

- Restlessness relieved after sleep.

### **Tissues**

- Septic states.
- Typhoid conditions.
- Bones ache.

### **Generalities**

- *Aching all over; bed feels hard*; can lie but a few moments in one position; aching with soreness of the flesh.
- The rapidity of the pulse, far above the temperature, seems to be a keynote.
- "Knew he was going to have typho-malarial fever, which he had two years previously, after a malarious exposure on a foreign mission field. Had every other day what he called 'dumb ague.' " *Pyrogen* cured.
- Relief from heat. Very fond of the hot bath.
- *Pyrogen*, has cured several cases of *blood poisoning*. It should be thought of in dissecting wounds.
- The hard bed, the hard pillow, and the intense aching that they sometimes compare to lying on a pile of rocks shows the intense soreness of *Pyrogen*; sometimes the patient declares that a train of cars has run over him.
- Aggravation from sitting up in bed; from rising up.
- Amelioration of the death-like restlessness from sitting up in chair and rocking hard.
- Amelioration of cough from sitting up in chair.
- In all fever cases when other remedies do not act, think of *Pyrogen*. (Swan.)
- In septic poisoning from wounds, after abortion, accouchement, etc., etc., think of *Pyrogen*. (J. H. Allen.)

### **Relationship**

- "*Pyrogen*, resembles *Arnica*, *Baptisia*, and *Rhus* in the aching and hard bed. It is more similar to *Rhus*, as the restlessness is better from changing the position, or motion. The restlessness is as great as in *Rhus*, and *Rhus* is an antidote to *Pyrogen*. The cough is more like *Bryonia* as it is worse from motion and in a warm room." (Sherbino.)
- *Pyrogen* resembles *Ipecac* very closely in uterine hemorrhage. If you have an *Ipecac* case of uterine hemorrhage, and that remedy fails you, don't fail to think of *Pyrogen*.

(W. A. Yingling, M.D., Nonchalanta, Kansas, *Pyrogenum* (Pus from septic abscess), *The Homoeopathic Physician* vol. 13 (1893), p. 402-414)

## 1910 - Henry C. Allen

### Characteristics

- For sapremia or septicemia: puerperal or surgical; from ptomaine or sewer gas infection; during course of diphtheria, typhoid or typhus; *when the best selected remedy fails to > or permanently improve.*
- The bed feels hard (Arn.); *parts lain on feet and bruised* (Bapt.); rapid decubitus (Carb-ac.).
- *Great restlessness*; must move constantly to > the soreness of parts (Arn., Bell-p., Eup-per.).
- Tongue: *large, flabby*; clean, smooth as if varnished; fiery red; dry, cracked, articulation difficult (Crot-h., Tereb.).
- Taste: *sweetish; terribly fetid*; pus-like; as from an abscess.
- Vomiting: persistent; brownish; coffee-ground; offensive, stercoraceous; with impacted or obstructed bowels (Op., Plb.).
- Diarrhea: horribly offensive (Psor.); brown or black (Lept.); painless, involuntary; uncertain, when passing flatus (Aloe, Olean.).
- Constipation: with complete inertia (Op., Sanic.); *obstinate from impaction, in fevers*; stool, large, black, carrion-like; *small, black balls*, like olives (Op., Plb.).
- Fetus or secundines retained, decomposed; dead for day, black horribly offensive discharge; "never well since" septic fever, following abortion or confinement. To arouse vital activity of uterus.
- Lochia; thin, acrid, brown, very fetid (Nit-ac.); suppressed followed by chills, fever and profuse fetid perspiration.
- *Distinct consciousness of a heart*; it feels tired; as if enlarged; purring, throbbing, pulsating, constant in ears, preventing sleep; cardiac asthenia from septic conditions.
- *Pulse abnormally rapid, out of all proportion to temperature* (Lil-t.).
- Skin: pale, cold of an ashy hue (Sec.); obstinate, varicose, offensive ulcers of old persons (Psor).
- Chill: *begins on the back*, between scapulae; severe, *general, of bones and extremities*, marking onset of septic fever; temperature 103 to 106; heat sudden, skin dry and burning; pulse rapid, small, wiry, 140 to 170, cold clammy sweat follows.
- In septic fevers, especially puerperal, Pyrogen has demonstrated its great value as a homoeopathic dynamic antiseptic.

### Relations

- *Antidote*: Nux vomica for the agg. from overaction of a single dose or for bad effects of repeated doses; Rhus, Eup-per. for the aching, restlessness and bone pains.
- *Compatible*: Arn., Bap., Rhus, Eup-per. in typhoid and other fevers with muscle soreness, bed feels hard.
- Ars., Echi., Lach., Malar. (the vegetable Pyrogen), Ant-t., Bapt., Brom., Lyc., Phos., fan-like motion of *Alae nasi*. Bry., cough aggravated by motion and in warm room.
- Ipec., uterine hemorrhage (if Ipec. fails when apparently well selected).
- Bapt., Psor., offensive diarrhea.
- Lept., Psor., black stools.
- Opium, Plb., Sanic., constipation, hard black balls.
- Nit. ac., Sec., thin, offensive lochia.
- Phos., water is vomited as soon as warm in stomach.
- Bell., Meli., throbbing, bursting headache.
- Carb-v., Echi., Psor., offensive varicose ulcers of old people.

- Hep., Sil., Calc-sulph., tendency to profuse suppuration.
- Sulph., Psor., patient continually relapsing after the apparent similitum.

### **Aggravation**

- Motion, moving the eye; in a warm room; rising from lying or sitting up (cough relieved by sitting up; < by lying down, Clarke).

### **Amelioration**

- Heat, hot bathing or drinking hot water; binding affected part tightly; stretching out limbs; walking, changing position.

### **Mind**

- Loquacious; can think and talk faster than ever before (S).
- Irritable (S).
- Delirious on closing eyes; sees a man at foot of bed.
- Whispers; in sleep.
- Sensation as if she covered the whole bed; knew her head was on pillow, but did not know where the rest of her body was.
- Feels when lying on one side that she is one person, and another person when turning on the other side.
- Sensation as though crowded with arms and legs.
- Hallucination that he is very wealthy; remaining after fever.
- Increased buoyancy of spirits, although he felt ill.
- Great depression.
- Muttering delirium.
- Anxiety, restlessness.
- The muttering delirium sets in early, leading to unconsciousness and death.
- The signs of infection are horror, delirium, stupefaction.
- Brain active during the night, could not sleep, was making speeches and writing articles.

### **Head**

- Staggered as if drunk on rising in morning (S).
- Dizziness on rising up in bed.
- Pains in both mastoids, < right, dull throbbing in mastoid region (S).
- Great throbbing of arteries of temples and head; every pulsation felt in brain and in ears, the throbbing meet on top of brain (S).
- Painless throbbing all through front of head; sounds like escaping steam (S).
- Frightful throbbing headache ameliorated from tight band.
- Excruciating, bursting, throbbing headache with intense restlessness (often accompanied with profuse nose-bleed, nausea, and vomiting).
- Sensation as if a cap were on.
- Rolling of head from side to side.
- Forehead bathed in cold sweat.
- Throbbing of carotids and vessels of the neck; a distinct, wave-like throb from the clavicles upwards.
- Child with cerebro-spinal meningitis was so sick that at one time it seemed as though she could not recover; there was automatic motion of the right arm and right leg; rolling the head from side to side; this kept up until it would turn her around from left to right till her feet

would get on the pillow or touch the head-board; she was brought out of this condition with Pyrogenium.

- Dull headache.
- Cerebral symptoms are not usually severe, but there is often a low form of delirium.
- Dizziness, headache.
- Heavy headache, uncomfortable.
- Morning headache.
- Pulsation felt in head, painless throbbing.

### **Eye**

- Left eyeball sore, < looking up and turning eye outward (S).
- Projecting eyes.
- Lids seem dry and roughened as if filled with sand; mucus collecting in inner canthi; agglutinated and crusty borders on waking in the morning.
- Sticky and inflamed eyes.
- Intense photophobia, lies with fists pressed tight in eyes.
- Phlyctenular keratitis, both eyes < by light.

### **Ear**

- Loud ringing, like a bell, felt ear; ringing and roaring in right ear < at night.
- Ears cold.
- Ears red, as if blood would burst out of them.
- Sound as of escaping steam, a puffing, purring sound.
- Loud ringing in right ear lasting but a few minutes.

### **Nose**

- Nose-bleed; awakened by dreaming of it and found it was so.
- Sneezing: every time he puts hands from under covers; at night.
- Nostrils closing alternately (S).
- Cold nose.
- Fan-like motion of alae nasi.
- Sneezing at night, nostrils closing and alternating from side to side.
- Thick, gluey discharge from nose < right.

### **Face**

- Face: burning; yellow; very red; pale, sunken, and bathed in cold sweat; pale, greenish, or chlorotic.
- Circumscribed redness of cheeks.
- Hectic flush in afternoon and evening, coming on regularly at 3 or 4 P.M. and lasting till midnight; then face covered with large drops of cold perspiration.
- Face assumes a pinched and anxious expression.

### **Mouth**

- Tongue: coated white in front, brown at back; yellowish brown, bad taste in morning (S).
- Tongue: coated yellowish grey, edges and tip very red; large, flabby; yellow brown streak down centre.
- Tongue clean, smooth, and dry; first fiery red, then dark red and intensely dry; smooth and dry; glossy, shiny as if varnished; dry, cracked, articulation difficult.

- Tongue dry and not a particle of moisture on it. Has had no thirst since he has been sick. Bitter taste in the mouth; tongue dry down the centre.
- Taste: took one dose of Pyrogen cm. (Swan) in the afternoon. During the evening a terribly fetid taste, as if mouth and throat were full of pus, which lasted 24 hours; sensation as of a broken abscess in the mouth. A nauseating, offensive taste in morning, for many days during proving.
- Tongue dry and brown.
- Bad taste in the mouth.
- Sticky saliva.
- Pasty, furred tongue.

### **Throat**

- Diphtheria with extreme fetor.
- Relaxed throat.
- Elongated uvula.
- Ulcerated tonsils.

### **Larynx**

- Usually cough.
- Coughing when expiring.
- Cough attended with rusty expectoration.
- Laryngitis.
- Cough every time I move or turn over in bed.
- Coughed up yellow sputa through the night.
- Cough severe after rising.
- Coughing, spitting up large masses of phlegm from larynx.
- Cough < by motion.
- Cough more in a warm room.
- Coughing causes pain in back of head.
- Burning in larynx and bronchi on coughing.
- Cough up yellow sputa through the night.

### **Appetite**

- No appetite or thirst (19th day). Complete loss of appetite.
- Great thirst for small quantities, but the least liquid was instantly rejected.
- Drinking very hot water, ameliorated thirst and vomiting (dog).
- No appetite, yet nourishment is freely taken and digested.
- Poor appetite for breakfast.
- No appetite, as stomach and bowels feel so full.
- No appetite for dinner.
- Unusual appetite for chocolate.

### **Stomach**

- Belching of sour water after breakfast.
- Nausea and vomiting.
- Vomiting: persistent; brownish, coffee-ground; offensive, stercoraceous; with impacted or obstructed bowels.
- Vomiting and purging.

- Vomits water when it becomes warm in stomach; vomiting >.
- Urging to vomit; with cold feet.
- Stomach feels too full; < after eating and > by frequent sour eructations.
- Nausea > by drinking very hot water and by vomiting.
- Vomiting is not infrequent.
- Nausea on first rising.
- Dyspepsia.
- Belching some water after breakfast.
- Stomach and bowels feel too full to eat.

### **Abdomen**

- Full feeling and bloating of abdomen.
- When lying on left side bubbling or gurgling sensation in hypochondria, extending back to left of spine.
- Pain in umbilical region with passage of sticky, yellow, offensive stool.
- While riding in a buggy aching in left of umbilicus; < drinking water; > passing flatus.
- Soreness of abdomen so severe she can breathe with difficulty, and hardly bear any pressure over right side.
- Very severe cutting pains right side going through back, < by every motion, talking, coughing, breathing deep; > lying on right (affected) side; groaning with every breath.
- Great distension of the abdomen, with high temperature - lochial discharge intensely offensive, as if rotten. Peritonitis.
- Irregular action of the bowels.
- Sensation of cold in abdomen.
- Sensation of heaviness in abdomen.
- Ascites (Bright's disease).

### **Stool and Anus**

- Feculent and thin mucus, and finally bloody diarrhea and tenesmus (dog).
- Two soft, sticky stools, 8 to 9 A.M.
- Involuntary escape of stool when passing flatus.
- Profuse watery, painless stools, with vomiting.
- Stool, horribly offensive, carrion-like.
- Stool very much constipated, large, difficult, requires much effort; first part balls, last part natural, with streaks of blood; anus sore after.
- Constipation: hard, dry accumulated feces; stool large, black, carrion-like; small black balls like olives.
- Congestion and capillary stasis of gastro-intestinal mucous membrane, shedding of epithelium, bloody fluid distending intestines (dog).
- (Sweat about anus removed; fistula relieved).
- Usually diarrhea.
- Irregular action of the bowels.
- No stool today, very unusual.
- Sticky yellow stool.
- Passing flatus, sometimes involuntary.

### **Urinary Organs**

- Urine scanty; only passed twice in twenty-four hours.

- Urine: yellow when first voided; after standing, cloudy with substance looking like orange peel; red deposit on vessel hard to remove; deposits sediment like red pepper with reddish cloud on vessel.
- Got up three times in night to urinate.
- (Bright's disease).
- Urine contains albumin and casts; horribly offensive, carrion-like.
- Frequent calls to urinate as fever comes on.
- Intolerable tenesmus of bladder; spasmodic contractions, involuting rectum, ovaries, and broad ligament; [cured in a case of Yingling's with Pyrogen cm. (and higher); patient's next period came on naturally and painlessly, whereas before menses had been painful and extremely offensive].
- Irregular urination.
- Action of the kidneys irregular.
- Aching in region of the kidneys.
- Urinated only twice to-day. Very unusual; usually several times a day, normal in quantity.
- Urine loaded with albumen.
- Red lime inside of vessel, hard to remove.
- Sediment like red pepper that floats at the bottom.

### **Male Sexual Organs**

- Testes hang down relaxed; scrotum looks and feels thin.

### **Female Sexual Organs**

- Puerperal fever, with offensive lochia (cured).
- Puerperal peritonitis with extreme fetor; a rotten odor.
- Parts greatly swollen (Bright's disease).
- Menses horribly offensive; carrion-like.
- Menses last but one day then a bloody acrid leucorrhoea, horribly offensive.
- Hemorrhage of bright red blood dark clots.
- Septicemia following abortion; fetus or secundines retained, decomposed and horribly offensive.
- (Has cured prolapsus uteri, with bearing down > by holding the head and straining as in the act of labor).
- Abscess of left ovary, acute throbbing pain, great distress, with fever and rigors (Pyrogen cm. (Swan) produced an enormous flow of white creamy pus with general >).
- Lochia: thin, acrid, brown, or fetid; suppressed, followed by chills, fever, and profuse fetid perspiration.
- It has cured prolapsus uteri, with bearing down, > by holding the breath and straining, as in the act of labor. Pain starting in the uterine region and passing upward to the umbilicus. It was the reverse (a cork-screw pain); this was momentarily > by holding the breath and bearing down, as, in labor; momentarily > by pressing the hands against the vulva, then she said she would have to turn loose, as it made her worse. Liliun had previously failed in the case. Pain starting in the umbilicus or a little above, and passing down towards the uterus, but at midway of abdomen it would be intercepted by the same kind of a pain starting from the uterus and passing upward till they would meet midway between the umbilicus and uterus, then gradually die out till another would come as before; > momentarily by drawing her knees up to her chin and grasping her arms around them and holding them tight. Intolerable tenesmus of the bladder, it was more of a spasmodic contraction than anything else; at the same time

this condition would be reflected to the rectum and this strong desire to defecate without ability to do so would also involve the ovaries and broad ligaments. Nux vom. and Liliun tig. had no effect whatever.

- Severe chill; dull frontal headache; restless, pale, anxious. Sharp shooting pains through abdomen. Pain in head severe; she clasped it with her hands as if she had received a sudden blow and cried, "Oh! my head", became very restless, said she was going to die, and did not want the baby, of whom she was very fond, near her. Face pallid, with offensive viscid perspiration; abdomen sensitive to pressure; lochia and milk ceased. Thirsty for frequent small drinks. Pulse 140, weak, small; temperature 103. Pyrogen cm. 6 doses in water one half hour apart. She made a good, though slow recovery. Puerperal septicemia.

- Mrs. T. B., pale, slender, delicate, but in good health; primipara; was successfully delivered April 10th, 1901. On the 20th found her with a temperature of 102; lochia scanty, pale, offensive; but she felt well and had no pain. Fever increased in severity gradually for several days, until temperature reached 105 and 106, with a pulse of 120-130; still she insisted she felt well and would not go to bed. Several remedies, Bapt., Bell., Echi., Tar., were given without effect. Finally a severe shaking chill followed in a few hours by another sent her to bed, and the nurse was recalled. Pyrogen was given. Following day temperature 102; lochia reappeared in natural color; the abdominal sensitiveness ceased and in two or three days disappeared entirely. She rapidly recovered.

- Mrs. W. S. C., a slender woman; primipara; delivered June 10th, instrumental. Severe peritoneal laceration, which was repaired. The morning of the third day had shake; cutting spasmodic pain in uterus, which was swollen and sensitive; lochia dark, profuse, clotted; both iliac regions sensitive to pressure < left side. Belladonna gave no relief. Fever continued to rise; lochia darker, more offensive, containing threads and clots. The odor and other symptoms indicating approaching sepsis she received Pyrogen with very gratifying results, and a rapid recovery.

- Carrie, aged 16 years, been sick two or three months under allopathic care. Breath, perspiration, expectoration, menses, urine and feces horribly offensive, carrion-like; disgust up to nausea about an effluvia that arise from her own body; soreness of the chest and abdomen, menses last but one day and a sanguineous leucorrhoea that is of the same odor; pulse 106, with a bad cough, worse coming into a warm room; large, fleshy, pale, greenish or chlorotic face, mother having just died of consumption. Pyrogen cm., one dose, and better in ten hours, and on November 12th cough, odor and soreness nearly all gone, pulse 80, tongue clean. Sac. lac., and she remains well to this writing. - *Wakeman*.

### **Respiratory Organs**

- Wheezing when expiring.

- Cough: expectorating large masses of phlegm from larynx; < by motion; < in warm room; cough, burning in larynx and bronchi; pain in occiput; stitching in small of back, only noticed in the chair; coughs up yellow sputa through night.

- Cough > sitting up, < lying down.

- Expectoration: rusty mucus; horribly offensive; bloody sputa.

### **Chest**

- Pain in right lung and shoulder, < talking or coughing.

- Neglected pneumonia: cough, night-sweats, frequent pulse, abscess had burst discharging much pus of mattery taste (rapid recovery under Pyrogen, three doses).

- Chest sore, purple spots on it.

- Severe contracting pain within lower sternum, sometimes extending to rib-joints and up to throat, as if esophagus were being cramped.
- Ecchymoses on pleura (dog).
- J. A.W., aged 61. An old soldier full of rheumatic aches and pains; complaining much. April 7, 1895. Rode twenty-two miles in a big wind storm, chilling and disagreeable, on the 5th. Taken to bed at once. Hot and cold flashes, < moving about. *Aching and sore all over. Bones ache. Very restless and nervous.* Impatient. *Head feels big*, full and aches all through head and down neck; < coughing. Nasal discharge fluent and thin. *Lungs sore and painful*; < coughing. Coughs considerably, some little expectoration, < at night. Pulse 84. Bowels not moved since the 4th. Urine scant. Chilly when moving. When first taken sick, and when riding in the storm, his *toe nails felt as if they were flying off*, first one, then another. This feeling was very marked and disagreeable. Pyrogen cmm., three doses, two hours apart. Within twelve hours the pains were all gone and he had a good night's rest. Sat up next morning feeling "better and freer from pain than in four months". A very rapid prompt cure. - *Yingling*.
- Respirations are rapid and shallow.
- Pain in the chest, and perhaps orthopnea, from pleuritic affections.
- Pain in the region of the left nipple, as if in the heart which was going to ache.

### **Heart**

- Pain in region of left nipple, as if in the heart; increased action; pulse 120.
- Heart tired as after a long run; increased action < least motion.
- Never free from weary sensation about the heart.
- Every pulsation felt in head and ears; a painless throbbing.
- Sensation as if heart were enlarged; distinct consciousness of a heart.
- Sensation as if heart were too full of blood.
- Sensation as if the heart were pumping cold water.
- Violent, so persistent that it became very tiresome.
- Palpitation or increased action without corresponding increase of temperature.
- Palpitation < by motion; < lying on affected (left) side.
- Loud heart-beats, audible to herself and others.
- Could not sleep for whizzing and purring of heart; when she did sleep was delirious.
- Cardiac asthenia from septic conditions.
- Ecchymoses on heart and pericardium (dog).
- Palpitation < from motion > remaining quiet; pulse 160-170 per minute.
- Tired feeling about the heart, as after a long run, feel as if I would like to take it out and let it rest; it would be such a relief if it would stop its throbbing; temperature not raised.

### **Back and Neck**

- Pains in back in lumbar region.
- Bubbling sensation or gurgling in the left hypochondrium, extending back to the left side of the spine, felt when lying on the left side.
- Pain in small of back.
- Weak feeling in the back.
- Stitching pain in the back on coughing.
- Throbbing of vessels of neck running up in waves from clavicles.

## **Limbs**

- Aching: in bones; all over body as from a severe cold; with soreness of flesh, head feels hard; > motion (S).
- Cold extremities.
- Numbness of hands, arms, and feet, extending over whole body.
- Automatic movements of right arm and right leg, turned the child round from right to left till feet reached the pillow; repeated as often as she was put right (cerebro-spinal meningitis).

## **Upper Limbs**

- Pain in shoulder-joint; in front, passing three inches down arm (S).
- Hands and arms numb.
- Hands cold and clammy.
- Dry eczema of hands.
- Profuse exudation in axillary region.
- Pain in left shoulder-joint, in front, passing down the arm from two to three inches, lasting till going to bed.

## **Lower Limbs**

- Aching about knees, deep in bones, while sitting by a hot fire; > by walking.
- On going to bed aching in patella; > flexing leg.
- Aching above left knee as though bone broken (S).
- Aching above knees in bones, > stretching out limbs.
- Tingling in right little toe as though frost-bitten.
- Feet and legs swollen (Bright's disease). Numbness of feet.
- Aching: in bones; all over body as from a severe cold; with lameness and soreness of muscles; bed feels hard; > motion < from motion.
- Cold extremities; feet bathed in cold sweat.
- Numbness of hands, arms, and feet, extending over whole body.
- Edema of legs, in case of Bright's disease.
- Aching pains in legs, as if in the bones.

## **Skin**

- Mrs. I., aged 35, mother of two children, swelling of calf of leg; vesication formed on top of left foot, followed by a large ulcer, which eventually covered the whole foot. As the diseased process extended up the leg, several abscesses formed in succession, the swelling continuing to spread to the hip. About three inches below the trochanter a large abscess burrowed in the soft tissues, discharging great quantities of pus when opened. Restless, unable to lie in one position; motion caused great pain, but moving gave > ; must be continually moved, every hour or two every night, which a dose of Rhus failed to > . The feet, ankles and abdomen very much swollen; urine scanty, with red sandy sediment; constant sensation of repletion; is very thirsty yet unable to drink; hungry, yet the least food causes repletion; very peevish, whines like a child. Swelling and pain still increasing; face and neck yellow, emaciated and wrinkled; temperature 103, pulse 120. After Ars., Rhus, Lyc. and Nux v. failed to give any > , Pyrogen cmm., one dose, followed by placebo every hour; improvement began and continued for four days, when a copious, painless, watery, offensive diarrhea began; another dose of Pyrogen was given and the patient went on to a rapid recovery.
- Skin and conjunctiva becomes jaundiced.

- Soon after the rigor, sometimes a subcutaneous abscess forms, or discolorations and pustules are seen on the skin. Jaundice appears.
- Bed sores easily form and skin shows a tendency to slough on very slight pressure.
- Patches of superficial gangrene frequently occur, without provocation.
- Erysipelas.
- Skin pale, cold, of earthy ashy hue.
- Obstinate, varicose, offensive ulcers of old people.

### **Nerves**

- Great nervousness and restlessness.
- Could not lie long in one place without moving; yet moving gives no relief.
- Great debility in the morning. He staggered when attempting to walk.
- Nervous weakness attending convalescence from septic fever.

### **Sleep**

- Dreamed he had nosebleed, and on waking the nose had bled all over the pillow.
- Restless sleep, with moaning.
- Unrefreshing sleep.
- Disturbed sleep.
- Slept awhile; woke to roll and tumble in every conceivable position.
- Unable to sleep from brain activity and crowding of ideas.
- Restlessness > after sleep.
- Cries out in sleep that a weight is lying on her.
- Whispers in sleep.
- Kept awake by purring of heart.
- Dreams: of various things; of business; of his patients and the remedy which cured them.
- Dreamed all night of the business of the day.
- Can lie but a few minutes in any position.
- Could not sleep till dawn - brain too active - could not keep my eyes shut.
- Cries out in sleep as if in pain.

### **Fever**

- "In all cases of fever commencing with pains in the limbs" (Swan).
- Shivers and begins to move about restlessly; temperature rises gradually and as gradually subsides (dog).
- Chills running up and down the spine in successive waves; heat gives no relief.
- Temperature rises rapidly to 104° F., and sinks rapidly from heart failure (dog, fatal dose).
- Constant terrible aching all over the body; bed feels hard, must move frequently in search of a soft place.
- Chilly at times and a little aching; a little feverish.
- After dinner, ache all over, chilly at night, bed feels hard.
- After getting into bed, chilly, teeth chatter; woke 10 P.M. in perspiration on upper part of body; > motion (S).
- Feels hot as if had a fever, but temperature was only 99° F., feels like 105°.
- Frequent calls to urinate as soon as fever came on; urine clear as water.
- Every other day dumb ague.
- Perspiration horribly offensive, carrion-like; disgust up to nausea about any effluvia arising from her own body.

- Cold sweat over body.

- Fevers caused by: sewer gas poisoning; surgical infection; dissecting wounds, blood poisoning, or absorption of pus by medicated topical application.

- Delirium when closing the eyes; sees a man at the foot of the bed or in the farther part of the room; hand cold and clammy; abdomen so sore that she can scarcely breathe; bowels so sore cannot bear any pressure over the right side; < from sitting up in bed; vertigo on rising up in bed.

- N.B., child 4 years old, resided in a house in which plumbing was being repaired. A few days after was attacked at 2 A.M. with: Vomiting and purging; stools profuse and watery. Cold extremities, ears and nose; forehead bathed in cold perspiration. Tongue heavily coated, yellowish-gray; edges of tip very red. Great prostration. Great restlessness mental and physical; pulse 140, small and wiry; temperature 99. Great thirst for small quantities, but the smallest quantity was instantly rejected. Later in day stool was horribly offensive, of a carrion-like odor; face pale, sunken, bathed in cold perspiration. Tongue dark red and free from the heavy coating of early morning, intense thirst, but water < both vomiting and purging. After Verat., Ars., Carb-v. and Bapt. had been given, with no improvement, the patient evidently sinking, impossible to count the pulse, thinking perhaps sewer-gas poison may have been the factor, and the clean, fiery red tongue called my attention to Dr. Burnett's cures in the Homoeopathic World with Pyrogen. I gave two doses on the tongue with prompt and permanent relief.

- Miss E.B., aged 14, complained of feeling weary, unable to go to school. Applying thermometer, found temperature 102, pulse 108, and her father sent for me. I found tongue abnormally red, thin, white fur at base. Has a slight epistaxis in the morning which Bryonia >, but failed to affect the fever. As there was absolutely no pain and very few symptoms, she was allowed to wait a few days on placebo. Sewer-gas was now discovered as the cause; Pyrogen, one dose, was given with rapid recovery.

- Inclined to talk all the time at night during the fever; cold sweat over the body; pain in the small of the back; desires to urinate; it is scant; talks to herself; urging to vomit, with cold feet; restlessness > after sleeping; purple spots on the chest; cries out in her sleep that someone or a weight is lying on her; heart beats hard, has a laborious action; sensation as if the heart was too full of blood; it beats very loud, heart sounds can be heard some distance from the thorax, always can hear her heart beat; could not sleep last night for whizzing and purring of heart, when she did fall asleep was delirious. Sensation as if a cap were on her head. When she awakens and finds it there she knows that she is all right, that she is not delirious; > after vomiting; whispers in her sleep; whispers to herself, if you ask her what she said does not answer; sensation as if she covered the whole bed; she knew that her head was on the pillow, but she could not tell where the rest of her body was.

- She feels when lying on one side that she is one person and that when she turns to the other side she is another person; sensation as though the fever would not run in each alike, that is to say, she felt as though she was existing in a second person, or that there were two of her.

- Coldness and chilliness all day that no fire would warm; sits by the fire and breathes the heat from the stove; chilly whenever leaving the fire; at night when the fever came on he had a sensation as if his lungs were on fire and that he must have fresh air, which soon brought relief. Sensation as though he was crowded by his arms and legs; when turning over in bed they were still crowding him; as soon as the fever came on he commenced to urinate; he can tell every time when the fever is coming on because of this urgency to urinate. The urine is clear as spring-water. Very severe pain in the right side; knife-like pains going through to the back; < from every motion, from coughing or talking or taking a long breath; > from lying on

the affected side; groaning with every breath; redness of the face and also of the ears, it looked as if the blood would burst out of them. After the fever leaves he still has the hallucination that he is very wealthy and he has a very large sum of money in the bank, and this was the last to leave him this idea that he had the money.

- I can hardly mention Pyrogen without becoming enthusiastic, on account of the wonderful results that I have had from it in blood poisoning. In any kind of septic infection, either puerperal or traumatic, Pyrogen will do wonders, when the symptoms correspond. It is similar to Anthracinum in some respects.

- An old woman dying with gangrene inoculated one of her nurses; the nurse had chills, high fever and red streaks running up the arm following the course of the lymphatics. Pyrogen rapidly removed the whole process. - *Boger*.

- The palmar surface of the left forearm was torn to the bone by a buzz-saw. It was dressed by adhesive plaster, which was put on so tightly that it had to be removed in 24 hours, replaced by another and a few stitches taken; but the whole hand began to swell, became very painful, gradually grew worse for eighteen days, during which patient had few hours sleep. Whole hand and forearm were enormously swollen, almost black in color and mortification threatened. Amputation was now decided. At this stage a homeopathic physician found in addition to the symptoms above the patient delirious and excited; he could not lie down, for the bed was too hard, nor could he rest the arm on anything, for everything on which it lay also seemed too hard. Pyrogen 50m. In a few hours he was sleeping quietly, temperature reduced and pain lessened. Improvement was rapid and steady to complete recovery.

- Slight elevation of temperature, severe rigor, followed by sweating. The rigors are usually severe, and they occasionally occur with the regularity of ague.

- Pulse becomes weak and rapid.

- Pulse felt in head and ears, painless throbbing.

- Fever of the intermittent type, with the usual accompaniments of loss of appetite, restlessness, thirst.

- Rigors cease after the first few days, but the temperature usually maintains a remittent character.

- Puerperal fevers.

- Typhoid fever.

- Feverishness.

- Pyemia.

- Septicemia.

- Burning in the face.

- Blood was throbbing all through every part of head and body could feel it even in my fingers.

- Chilly all night.

### **Generalities**

- Cannot lie more than few minutes in one position, > change.

- Debility in morning, staggered on trying to walk (S).

- Aching all over, bed feels hard.

- Great muscular debility; rapid recovery in a few hours (dog).

- Restlessness, turning in bed, groaning.

- Pains in limbs and general uneasiness.

- Soon after the initial rigor, pain and swelling of one or more joints occurs.

- Peculiar sweet smell about the patient, as in diabetes.

- A sudden attack of pleurisy occurring in any one with otorrhea. Pyemia may be suspected.
- General lassitude.
- Nervousness.
- Feebleness.
- Malaria, pains in limbs, especially in legs and back, with headache, distress in stomach, like a heavy wad.
- Restlessness, when beginning to move and during motion.
- Restless and moaning, in persons dying, especially from scarlet fever or diphtheria, often enables them to recover.
- Great nervousness and restlessness, wants to be covered or rocked.
- Great aversion to being washed. Cries when washed.
- Will not sleep in bed, but wants to be held in lap and kept in slight motion; wakes when the motion is stopped or on attempting to lay her down.

### **Aggravation**

- Restlessness > when first commencing to move (Rhus < when first commencing to move).

### **Amelioration**

- From hard rocking in a chair.

(Henry C. Allen, The Materia Medica of the Nosodes with Provings of the X-Ray, Philadelphia 1910, Pyrogen, (A Sepsis product), p. 409-427)

# Leitsymptome und Charakteristika / Keynotes and Characteristics

## Übersicht

1899 - Henry C. Allen

1902 - John H. Clarke

1915 - Cyrus M. Boger

## 1899 - Henry C. Allen

*A Product of Sepsis*

*A Nosode*

For sapraemia or septicaemia: puerperal or surgical; from ptomaine or sewer gas infection; during course of diphtheria, typhoid or typhus; *when the best selected remedy fails to > or permanently improve.*

**The bed feels hard** (Arn.); *parts lain on feel sore and bruised* (Bapt.); rapid decubitus (Carb-ac.).

*Great restlessness*; must move constantly the > the soreness of parts (Arn., Eup-per.).

Tongue: *large, flabby*; **clean, smooth as if varnished; fiery red**; dry, cracked, articulation difficult (Crot-h., Tereb.).

Taste: *sweetish; terribly foetid*; **pus-like**; as from an abscess.

Vomiting: persistent; brownish, coffee-ground; offensive, stercoraceous; with impacted or obstructed bowels (Op., Plb.)

Diarrhoea: horribly offensive (Psor.); brown or black (Lept.); painless, involuntary; uncertain, when passing flatus (Aloe, Olnd.).

Constipation: with complete inertia (Op., Sanic.); *obstinate from impaction, in fevers*; **stool large, black, carrion-like**; *small black balls, live olives* (Op., Plb.).

Foetus or secundines retained, decomposed; dead for days, black; horribly offensive discharge; "never well since" septic fever, following abortion or confinement. To arouse vital activity of uterus.

Lochia: thin, acrid, brown, very foetid (Nit-ac.); suppressed, followed by chills, fever and profuse foetid perspiration.

*Distinct consciousness of a heart*; it feels tired; as if enlarged; purring, throbbing, pulsating, constant in ears, preventing sleep; cardiac asthenia from septic conditions.

*Pulse abnormally rapid, out of all proportion to temperature* (Lil-t.).

Skin: pale, cold, of an ashy hue (Sec.); obstinate, varicose, offensive ulcers in old persons (Psor.).

Chill: *begins in the back, between scapulae*; severe, *general, of bones and extremities*; marking onset of septic fever; temperature 103 to 106; heat sudden, skin dry and burning; pulse rapid, small, wiry, 140 to 170; cold clammy sweat follows.

In septic fevers, especially puerperal, Pyrogen has demonstrated its great value as a dynamic antiseptic.

**Relations.** - Compare: Ars., Carb-v., Carb-ac., Op., Psor., Rhus-t., Sec., Verat.

Latent pyrogenic process, patient continually relapsing after apparent simillimum.”

(Henry C. Allen, M.D., Key Notes and Characteristics of some of the Leading Remedies of the Materia Medica. 2. edition, Philadelphia and Chicago 1899, Pyrogen, p. 237-239)

### 1902 - John H. Clarke

**Characteristics.** - “John Drysdale was the first, in 1880, to suggest the use of this substance as a medicament (On Pyrexin or Pyrogen as a Therapeutic Agent, Baillièrè, Tyndale & Cox). Burdon Sanderson has stated (B. M. J., February 13, 1875) that "only liquids which contain bacteria or have a marked proneness to their production" are capable of setting up pyrexia. This remark struck Drysdale, and though, of course, he could not endorse the "only" of the statement - many drugs known to homoeopaths set up fever - he saw that the fact might be turned to account. Sanderson further defines Pyrogen as "a chemical non-living substance formed by living bacteria, but also by living pus-corpuscles, or the living blood- or tissue-protoplasms from which these corpuscles spring." In Sanderson's experiments with Pyrog. the following effects were observed.

(1) From a non-fatal dose: The animal shivers and begins to move about restlessly. The temperature rises from 2° to 3° C., the maximum being reached in three hours. Thirst and vomiting come on, followed by feculent and thin mucous, and finally bloody diarrhoea and tenesmus. In five hours these symptoms begin to subside, and the animal recovers with wonderful rapidity. When death occurs it is from heart failure.

In *non-fatal* cases with gastro-enteric symptoms the temperature gradually rises for four hours, and as gradually subsides: in *fatal* cases it rises rapidly to 104° F., then rapidly declines to below normal.

(2) From a fatal dose: There is intestinal haemorrhage, purging, collapse, and death. After death extravasations of blood are found in heart, pleura, and pericardium; the spleen is enlarged and full of blood. Mucous membrane of stomach and small intestines is intensely injected with detachment of epithelium and exudation of bloody fluid, which distends the gut. The blood is dark, the corpuscles being in clumps instead of rolls, and many being dissolved in the liquor sanguinis. White corpuscles partially disintegrated.

Drysdale prepared a tincture of Pyrog. - which he preferred to call Pyrexin, since it is not a mere fever-producer: others have called it Sepsin; but this is too close to Septicaemin, a name given to a related and perhaps identical nosode: I have chosen to retain the name Pyrogen, by which the remedy is best known in homoeopathy - and put his own suggestion into practice. His success was very encouraging, but as he continued to use the  $\theta$  tincture and lowest attenuations the difficulty of keeping the preparation was not small; and the remedy did not come into extensive use till Burnett published his pamphlet on Pyrogenium in Fevers and Blood-poisoning in 1888. Burnett used chiefly the 6th centesimal dilution, which is perfectly harmless, and which will keep indefinitely. Heath, who made one of the preparations used by Burnett, gave, some of it to Swan, of New York, who ran it up into the high infinitesimals. Much of the American experience is with Swan's attenuations, including a proving by Sherbino (Med. Adv., xxv. 369), whose symptoms I have marked (S) in the Schema. The remainder of the symptoms of the Schema are for the most part clinical.

Yingling (H. P., xiii. 402) collected symptoms from many reported cases, and arranged them with the symptoms of the proving. (Yingling erroneously describes Pyrog. as prepared from

"pus from septic abscess." This is Septicaemia. He refers, however, to Burnett's pamphlet and to cases cured with Pyrog., leaving the actual substance referred to not in doubt. H. C. Allen, who published the proving and most of the cases in *Med. Adv.*, rightly describes Pyrog. as a "Product of Sepsis").

Drysdale's original cases include a number in which threatened typhoid was averted, a case of tabes mesenterica cured, and one of ulceration of the colon greatly benefited. Burnett's were cases of fully developed typhoid all cut short at the height by Pyrog. 6 given every two hours. In his pamphlet is included a successful experience of Dr. Shouldham's with Pyrog. 6 in two cases of diphtheritic sore throat. I have had ample opportunity of observing the power of Pyrog. over typhoid fever, and typhoid and hectic states, including one of discharging abscess connected with Pott's disease of the spine.

T. M. Dillingham reports (*Med. Adv.*, xxvii. 367) the case of a young German Jewess who had been under treatment at various hospitals for Bright's disease, and at the Hahnemann Hospital of New York among others. To this she was readmitted on March 14, 1890, when she first came under Dr. Dillingham's care. The urine showed an enormous amount of albumen and a variety of casts. Feet and legs greatly swollen, face puffy. Throbbing headache, often accompanied by profuse nose-bleed, nausea, and vomiting; < motion and light; abnormally bright eyes, widely dilated pupils. Bell. gave temporary relief; but on May 31st the condition was desperate. Dillingham then learned that the trouble dated from a large abscess resulting from a lanced, badly cared-for felon of the left thumb. She was ill six weeks with this abscess, having, as her doctors said, "blood poisoning." Soon after this her face and feet began to swell. On May 31st the condition was this: Feet, legs, and genitals greatly swollen. Frightful throbbing headache, > by tight band constantly worn. > By heat; very fond of the hot bath. Headaches had terrible aggravations lasting two to four days, during which time she could neither lie in bed nor sit up, but was in constant motion, groaning and crying piteously for help. Pyrog. cmm, Swan, one dose was given, and no other medicine, although the patient on one occasion begged for something to stop the pain. In the course of June she began to mend, and on October 20th was discharged cured.

In Sherbino's proving he was cured incidentally of a consciousness of the heart and its working, and palpitation from least excitement or anxiety, < beginning to move; congestion to head as if apoplexy would ensue. Cactus has done no good.

Sherbino cured:

- (1) a case of puerperal fever with Pyrog., being led to its selection by the very high pulse rate.
- (2) Relapse of typhoid, pulse 140, temperature 102° F., both were normal in twenty-four hours.
- (3) Young lady, 17, fever, aching bones, bed felt very hard. Numb, paralytic feeling. As the fever left the pulse kept mounting up. Pyrog. cmm, Swan, repeated as often as effect ceased, cured.

Pyrog. is one of the germinal remedies of the materia medica. When once the idea of its essential action is grasped an infinity of applications become apparent. As Drysdale put it, "The most summary indication for Pyrog. would be to term it the Aconite of the typhous or typhoid quality of pyrexia," and wherever poisoning by bacterial products (e.g., in the hectic of phthisis) is going on Pyrog. will be likely to do good. Sepsis is the essence of the action of Pyrog.

H. C. Allen gives this indication for its use in septic states: "When the best selected remedies fail to relieve or permanently improve" - analogous to the action of Psor. and Sul. in other conditions. Also: "Latent pyogenic process, patient continually relapsing after apparent simillimum."

As Pyrog. is a product of carrion, the carrion-like odour of bodily emaciations, secretions, and excretions is a keynote for its use.

Other leading indications are: Restlessness; must move constantly to > the soreness of parts.

"Constipation, from impactum of faeces in fevers; stool large, black, carrion-like."

"Chill begins in back, between scapulae."

"Severe general chill of bones and extremities."

"In all cases of fever commencing with pains in the limbs," Swan.

"Pulse abnormally rapid, out of all proportion to temperature."

Pyrog. 5, five drops in water night and morning, assisted in the cure of a case of anal fistula in a case of Burnett's (On Fistula p. 66). Under its action a sweating at the seat which the man had had for many years disappeared; and the skin of his hands, which were subject to dry eczema, assumed a much cleaner aspect.

J. S. Hunt (H. W., xxxi. 54) reports five cases of varicose ulcers, all of which healed quickly under Pyrog.

Bellairs (H. W., xxxiv. 298) gave Pyrog. 200 to an elderly woman who suffered for years with an ulcerated leg, which was riddled with deep, burrowing wounds, extremely painful and discharging freely. Hep., Sil., Ars., Ham., did no good. Under Pyrog. once or twice a day "a large boil" formed on the calf of the leg and discharged its contents, after which the various ulcers healed up directly.

The symptoms are > by heat (drinking hot water; hot bath).

> Tightly binding head.

> Stretching out limbs; walking about; turning over or changing position.

Heart's action and cough < by motion.

Eyeball < moving eye.

Cough < motion and in a warm room.

< Sitting up in bed; rising.

(Cough > sitting up; < lying down).

### **Relations. - Compare:**

Septicaemin (B. Sanderson says bacteria and pus cells produce the same chemical result; Pyrog. and Sept. may therefore be identical, but I think it best to keep them distinct); Malar. (the vegetable Pyrogen); Lach.

In typhoid with soreness, bed feels hard, Bapt., Arn., Rhus-t.

> Motion and stretching limbs, Rhus-t.

Cough < by motion and in warm room, Bry.

Uterine haemorrhage, Ipec. ("if Ipec. fails when indicated give Pyrog.," Yingling).

Offensive diarrhoea, Psor.

Black stools, Lept.

Constipation, Op., Sanic., Pb.

Lochia thin, fetid, Nit. ac.

Vomits water as soon as warm in stomach, Phos.

Throbbing headache, Bell.

Varicose, offensive ulcers of old persons, Psor.  
 Skin ashy, Sec.  
 Suppuration, Hep.

**Causation.** - Blood poisoning. Ptomaine poisoning. Sewer-gas poisoning. Typhoid fever (remote effects of). Dissecting wounds.”

(John Henry Clarke, M.D., A Dictionary of Practical Materia Medica, vol. 2 (1902), Pyrogenium, p. 931-934)

### 1915 - Cyrus M. Boger

<b>REGION</b>	<b>WORSE</b>
BLOOD. <b>Heart.</b>	Cold Damp.
<b>Circulation.</b>	<b>Motion</b> - Constant Change of Position. - Hard Rocking.
Muscles.	<b>BETTER</b> Heat. <b>Hot Bath.</b> Pressure.

**Aching**, BRUISED SORE **and prostrate**; yet restless. Bed seems hard. **Bone pains**. **Foul**, taste, **secretions**, odor of body, etc. **Rosy, red streaks**. Decomposition or sepsis.

Rapid ideation. **Loquacious**. **Excited**. Feels as if he covered the whole bed. Anxious and **sensitive**. Confused. Sense of duality. Hallucinations. Violent, throbbing headache. Pains are > during hot stage. Throbbings, < neck (Bell., Spig.). Sudden pulsation, with fever and intense restlessness. Rolls head side to side. Throbbing headache, > tight band. Sensation as of a cap on the head. Disgust at his own odor. Fiery red, smooth tongue. Sweet taste. Nausea, > very hot drinks. Adhesive urinary sediment. Purring at heart. Feels heart; as if tired, big or full. **PULSE QUICK, OUT OF ALL PROPORTIONS TO TEMPERATURE (Lil-t., Thy.) or the reverse**. **Quickly oscillating temperature**. The nails threaten to fly off. Chilly, wants to breathe heat of fire. **Chills** starts between scapulae; **felt in bones**; with sweat; at night. Fever, at menses. Puerperal sepsis. Slowly advancing hectic. Sweat, without relief; cold. Wants to inhale heat of fire.

Follows: Lach.

Related: Anthracin. Ars. Bapt. Echi.

(Cyrus M. Boger, M.D., A Synoptic Key to the Materia Medica, 1<sup>st</sup> edition, 1915, Pyrogen, p. 285)

## Kommentare / Commentaries

### Übersicht

1892 - G. W. Sherbino

1895 - James T. Kent

1904 - James T. Kent

1908 - Baptisia and Pyrogenium - Cyrus M. Boger

1930 - H. A. Roberts

1946 - Dorothy Shepherd

### 1892 - G. W. Sherbino

"In the two years that I have had since the proving of Pyrogenium I have collected some of the symptoms together, so that my colleagues could receive the benefit of this experience.

The hard bed and the hard pillow and the intense aching that they sometimes compare to lying on a pile of rocks, shows the extreme soreness of Pyrogenium; sometimes the patient declares that a train of cars has run over him.

Pyrogen has *fan-like motion of the alae nasi*, Ant-t., Bapt., Bell., Brom., Hell., Lyc., Phos., Rhus-t. all have it.

I can remember when I knew of no others but Lycopodium, but it is well to have them in mind, as very often it is a great help to know these things.

Great restlessness is better when first commencing to move (Rhus-t., worse when commencing to move).

This is the difference between Rhus and Pyrogenium.

It took me some time to find it out, as the restlessness was so much like that of Rhus-t. that it took very close observation to detect the real difference.

It has that death-like restlessness or the restlessness as of death or those in articulo mortis, amelioration from sitting up in a chair and rocking hard; the amelioration from moving lasts only a few moments, and this necessitates that the patient keep on moving, as the amelioration is but momentary.

Throbbing of the vessels of the neck.

The carotids have a distinct wave-like throb, similar to Bell, and Spig.

The throbbing is from the clavicles upward.

There is numbness of the hands and arms; numbness of the feet, and the numbness extends over the whole body.

Violent heart action, keeping up so that it was very tiresome ; delirious when closing the eyes ; sees a man at the foot of the bed or in the farther part of the room; hands cold and clammy ; bowels so sore that she can hardly breathe ; bowels so sore cannot bear any pressure over the right side; aggravation from sitting up in bed ; dizziness on rising up in bed like Baptisia, Bryonia, and Phytolacca (Rhus-t.).

Tongue coated white ; yellow-brown streak down the centre like Baptisia.

Symptoms of paresis : The child could not walk; was sitting on the edge of the bed and waving her body back and forth - was relieved when in motion.

Vomiting water when it becomes warm in the stomach like Phosphorus - sick stomach better by drinking very hot water.

Vomiting ameliorates the sick stomach.

Antimon-tart., Ipec. go to sleep after vomiting.

Coughing up rusty colored mucus; pain in the right lung and shoulder, aggravated from coughing or talking; circumscribed redness of both cheeks; palpitation of the heart, with abnormal temperature, pulse 160 per minute.

Palpitation worse from motion, better from remaining quiet.

Inclined to talk all the time at night during the fever; cold sweat over the body; pain in the small of the back ; desires to urinate ; it is scant; talks to herself; tries to vomit; urging to vomit, with cold feet; restlessness relieved after sleeping; purple spots on the chest; cries out in her sleep that someone or a weight is lying on her; heart beats hard, has a laborious action; sensation as if the heart was too full of blood; it beats very loud, heart sounds can be heard a foot away from the thorax (always can hear her heart beat); could not sleep last night for heart whizzing and purring so, when she did drop off to sleep she was delirious; sensation as if a cap were on her head.

When she awakens and finds this cap on her head she knows that she is all right, that she is not delirious; better after vomiting; whispers in her sleep; whispers to herself, if you ask her what she said she does not answer ; sensation as if she covered the whole bed; she knew that her head was on the pillow, but she could tell where the rest of her body was.

She feels when lying on one side that she is one person and that when she turns to the other side she is another person; sensation as though the fever would not run in each alike, that is to say, she felt as though she was existing in a second person, or that there were two of her.

This is like Baptisia, the fever wants to run separate.

Tongue dry and not a particle of moisture on it.

Has had no thirst since she has been sick.

Bitter taste in the mouth ; tongue dry down the centre.

Coldness and chilliness all day that no fire would warm; sits by the fire and breathes the heat from the stove ; chilly whenever leaving the fire; at night when the fever came on he had a sensation as if his lungs were on fire and that he must have fresh air, which soon brought relief.

Sensation as though he was crowded with arms and legs; when turning over in bed they were still crowding him ; as soon as the fever came on he commenced to urinate ; he can tell every time when the fever is coming on because of this frequency to urinate.

The urine is as clear as spring-water.

Very severe pain in the right side; knife-like pains going through to the back; worse from every motion, from coughing or talking or taking a long breath; better from lying on the affected side (Bryonia), Baptisia ; groaning with every breath ; redness of the face, and also of the ears, it looked as if the blood would burst out of them.

After the fever leaves he still has the hallucination that he is very wealthy and he has a very large sum of money in the bank, and this was the last to leave him - this idea that he had the

money.

Child with cerebro-spinal meningitis was so sick that at one time it seemed as though she could not recover; there was automatic motion of the right arm and right leg; this kept up until it would turn her around from left to right till her feet would get on the pillow or touch the head-board ; she was brought out of this condition with Pyrogenum.

Rolling the head from side to side.

It has cured prolapsus uteri, with bearing down, relieved by holding the breath and straining, as in the act of labor.

Pain starting in the uterine region and passing upward to the umbilicus (Sepia).

It was the reverse (a cork-screw pain) this was momentarily relieved by holding the breath and bearing down, as in labor; momentarily relieved by pressing the hands against the vulva, then she said she would have to turn loose, as it made her worse.

Lilium had previously failed in this case.

Pain starting in the umbilicus or a little above, and passing down toward the uterus, but at midway of the distance to the uterus it would be intercepted by the same kind of a pain starting from the uterus and passing upward till they would meet midway between the umbilicus and uterus, then gradually die out till another would come as before; ameliorated momentarily by drawing her knees up to her chin and grasping her arms around them and holding them tight.

Intolerable tenesmus of the bladder, it was more of a spasmodic contraction than anything else; at the same time, this condition would be reflected to the rectum and this strong desire to defecate without ability to do so would also involve the ovaries and broad ligaments, Nux-vom. and Lilium-tig. had no affect whatsoever.

This was a Morphine case from beginning to end.

I have now had two years' experience with this grand nosode, and it is one of the grandest monuments to Hahnemann and to Homoeopathy, as it covers a wide range of action, and it fills a place of its own that no other remedy can fill."

(G. W. Sherbino, M. D., Abilene, Texas, Clinical verifications of Pyrogenum, Proceedings of the International Hahnemannian Association 1892, p. 412-425)

### **1895 - James T. Kent**

"Swan had a vial of septic pus procured for him and potentized it. Dr. Kent also potentized the septic pus on the Santee potentizer. Sherbino made a proving of Swan's cmm potency, which is probably about the six or seven hundredth. Swan was not able to see the difference between the oozings from the results of disease and the oozings from the results of miasms, as Syphilinum, Psorinum and Medorrhinum. Swan had thousands of potencies which would require an eternity to prove. He potentized raw beef and gave it for tape-worm. He gave Pyrogen for every septic case that came along and observed the results; this is utterly contrary to Hahnemann. Sherbino's is a real proving.

Pyrogen should not be thought of in septicaemia; but in septicaemia it is a wonderful remedy when it is indicated by the symptoms; when the symptoms call for it, it will work wonders. There are certain general features about it that enable it to fill a place not filled by any other remedy.

There is aching in the bones as if they would break, as if bruised; as if pounded. It has the aching of Eupatorium, the bruised feeling of Arnica and the restlessness of Rhus; no other remedy has all three of these. It will be found useful in typhus, puerperal intermittents and in the last stages of consumption. In intermittent typhus and septic cases it often appears as if Rhus was indicated; but Rhus does not relieve, and then Pyrogen comes in. The nurse keeps changing and fixing pads and pillows to keep the patient comfortable, she is so sore that she must turn and have the pillows changed. A dose of pyrogen will enable this consumptive to discharge the night nurse and sleep comfortably.

There is rattling in the chest as in Tartar emetic. After Tart-emeti has been given and does not act, many times a dose of Pyrogen will enable the patient to clear out the chest and go on for many weeks comfortably.

Pyrogen has the anxiety of Ars., the restlessness of Rhus., the soreness of Arn., the aching of Eupatorium and the rattling of Tartar-emeti.

There is aching with soreness of the flesh, aching while sitting and aching while lying still. The bed feels hard, he must move and is generally ameliorated by motion. This remedy being animal, is deeper acting, longer acting than Rhus. We know its nature is septic, and sepsis, occurs late in phthisis; the patient is fighting sepsis.

All septic cases must have something in common; there is always great prostration; chilliness all night, rigors even of the most violent character. Would you be surprised to know that there was chilliness in septic conditions? When about to go into a septic state there is an excited condition of the mind, the mind is too active; this is followed by stupor. Worse by eating. Look at a case of septic fever - how soon eating sends up the pulse!

The commanding feature is the proving - we get the true light from the proving; that which is below it is toxicological.

What would a septicaemia be without sweat? There is copious sweat, sinking and a fluttering pulse. The temperature is out of proportion to the pulse. Usually with every ten degrees of pulse there is an increase of one degree in the temperature. If this proportion is not present, the case is very serious, as in septicaemia.

Better by motion, and yet cannot move in the exhausted state; the weakness is so great that he cannot move. The prostration and the septic condition are not unlike Bapt. Pyrogen antidotes Rhus. There is an exception to the amel. from motion: the cough is < motion, also < in a warm room. Compare the Bry. cough.

The prover after taking this medicine was in a semi-clairvoyant state. He was in communication with spirits. He struggled day and night to get rid of the idea, but could not. His wife thought that he was going insane. He thought that he was in communication with Kent, Hering, Lippe and Hahnemann, although he knew it was not so. He would sit up at night by himself and fight over this state.

There is an effort to eliminate. The vital force accumulates pus in a cavity and then there is a discharge with relief to the economy. The tendency to localization is a wonderful thing. We see nature establishing an ulcer on the lower extremities when there is difficulty in elimination. There is first a tendency to form an abscess, to localize, in septic diseases, then an ulcer is formed, and as long as that flows, nature seems content. All of these things are efforts on the part of nature to establish order in the economy.

There is a gurgling sensation in the region of the liver. Fever, excitement and a high pulse.

Wheezing when expiring. The urine has a cloudy appearance, the color of orange peel. There is a sensation as if the heart was enlarged, a distinct consciousness of the heart; he would like to take it out and rest it; sensation of oppression at the heart.

After one dose of the 50m: Sensation of having taken a cold in the chest, followed soon after by the expulsion of great quantities of yellow, purulent-looking mucus, having a dreadful taste - the extreme of rottenness. There was much rattling in the chest. The purulent expectoration ceased in two weeks, but all expectoration did not cease for two months.

One patient thought that she would break if she did not turn over. (Clinical). The pulse will sometimes run up so high that you cannot count it, although the temperature may be normal or subnormal."

(J. T. Kent. M. D., Pyrogen, The Medical Advance Bd. 33 (1895), p. 65-68. Notes from lecture at Philadelphia Post Graduate School of Homoeopathics.)

### **1904 - James T. Kent**

The potencies prepared from Heath's 3d of decomposed beef have been used by the author for many years against all forms of septic fever and sequelae, when the symptoms agree. Violent chill intermingled with heat and sweat, or dry heat with marked aching in the limbs; restlessness, > by motion and heat. The sore bruised condition is as marked as in *Arnica* and *Baptisia*; the aching in the bones like *Eupatorium*, the restlessness, > by motion and heat like *Rhus*. Pains all aggravated sitting. Complaints come on from becoming cold, and from cold damp weather.

These features are found in hectic fevers in the last stages of phthisis; as well as septic fevers. It aborts puerperal fever in a few hours when clearly indicated. In cases of typhoid where there is the confusion like that found in *Baptisia* and the heat is too intense for that remedy, Pyrogen should always be considered. When the temperature reaches 106 and there is great soreness and aching this remedy will make great changes in a single day; but if the pains are > by motion and heat it will abort the fever.

When the pulse is extremely high, and the temperature not correspondingly high this remedy will be useful. On the other hand, when the pulse and temperature are out of rhythm either way this remedy should be considered if the case is of septic origin. Great pain when the flow from an open abscess becomes scanty. *Violent burning in an abscess (Ars., Anthr., Tarent. C)*.

Offensiveness prevails extensively; even putrid and cadaveric odors of body, breath, sweat and discharges. Fevers from sewer gas poisoning; erysipelas from infection and surgical fevers. It cures many chronic complaints that date back to septic conditions. She has not been well since a puerperal fever many years ago, is a good reason for thinking of Pyrogen.

A young man of good inheritance suffered from blood poison and made a poor recovery, and for several years was affected with abscess in various parts. He was pale and sickly, rheumatic and stiff; at this time there was an abscess of the calf slowly forming. He took Pyrogen and made a rapid and complete recovery. This time the abscess did not open. He has remained in good health now ten years.

It has cured Bright's disease that could be traced to septic origin. It is a most useful remedy when there is threatening heart failure in septic and zymotic fevers. Septic haemorrhage, when the blood is dark. It will often save life in the most dangerous and rapid septic fevers.

Loquacity; can think and talk faster than ever before, especially during fever.

Irritable. Delirium and confusion of mind about his body and limbs (*Bapt.*)

Sensation as though he covered the whole bed.

Knew her head was on the pillow, but did not know where the rest of the body was.

Feels when lying on one side she is one person, and another when turning on the other side.

Sensation as though crowded with arms and legs.

These symptoms are much like *Baptisia*, but if the temperature runs very high *Baptisia* will not meet the condition so well as Pyrogen.

Violent congestion of the head *with pressing pain* and pulsation, > by pressure. Copious sweat on the head. Pain in occiput on coughing; in the morning on walking.

The eyeballs are sore to touch, on turning them outwards or upwards.

Septic bleeding from nose. Fan-like motion of alae nasi (*Lyc.*).

Face pale, sunken, and covered with cold sweat. Cheeks red and burning hot.

The mouth is foul, and the taste putrid. The tongue is coated, and brown. Brown streak down the center. Sordes on the teeth. Putrid odor from mouth.

Vomiting; of bile, blood; of putrid masses. Vomits water when it becomes warm in the stomach. Stercoraceous vomiting. Coffee ground vomiting. Thirst for cold drinks during chill and heat.

Distension and great sensitiveness of abdomen. Inflammation of peritoneum, intestines and uterus, of septic origin. Rumbling in bowels. Pain on deep breathing. Cutting, colicky pain. Pain in right side going through to the back < on every motion, talking and breathing; > by lying on right side; groaning with every breath.

Copious, liquid, putrid stools. Involuntary stool. Profuse, watery, pain less stool. Stool carrion-like. The difficult constipated stool also like carrion in odor. Constipation with hard dry, black, putrid stools; small black balls like olives. Putrid bloody stools. Soft narrow stool with great straining. Haemorrhage from bowels.

Urine scanty or suppressed. Red deposit, hard to wash off. Albuminous urine containing casts. Putrid urine. Frequent calls to urinate as the fever comes on. Intolerable tenesmus of the bladder; spasmodic contractions, involving rectum, ovaries, and broad ligaments (case cured by *Yingling*). Involuntary urine and stool in septic fevers.

Uterine haemorrhage. *Putrid, scanty lochia. Suppressed lochia. Violent chill; puerperal fever.* Menses lasting one day, then bloody leucorrhoea. *Septic fever following abortion.* Prolapsus of uterus.

Wheezing when expiring. Weak and husky voice, and hoarseness. Cough with large masses of mucus from larynx, < by motion, and in warm room. Cough causes burning in larynx and bronchi. Putrid, thick purulent expectoration. Cough < by lying, > by sitting up. Bloody or rusty expectoration. Cough, with copious, offensive night sweats. It is a great palliative in the last weeks of consumption. Abscesses in lung.

Heart failure in septic fevers, < by least motion. Every pulsation felt in distant parts. Anxiety and sinking sensation in region of heart. Distinct consciousness of the heart. Aching at the bifurcation of the trachea. Oppression of chest and heart. Fulness in region of heart. Feels as if

the heart were pumping cold water (Yingling). Palpitation. Loud heart beats. Sensation of purring of the heart. *Rapid, irregular, fluttering pulse.*

Pulsation in the neck. Weak feeling in the back. Stitching in back on coughing.

Pain in all the limbs with great restlessness. Aching in bones all over the body. Soreness of the muscles and the bed feels hard, > by motion. Cold extremities. Numbness of extremities. Hand and arms numb. Hands cold and clammy. Pain in the thighs during chill and fever. Pain in the knees and leg during chill and fever, ameliorated from walking, and from heat. Aching in legs while sitting, > by walking. Aching above knee as if bone were broken, > by stretching of limbs and motion. Feet and legs dropsical. Numbness of feet.

Skin pale, cold, of ashy hue. Obstinate varicose offensive ulcers of old people. It has cured many old fever sores with putrid, thin, bloody discharges. Carrion-like perspiration. Putrid odors of the body. Must be covered in all stages. Chill ameliorated by warm bed. The chill is quotidian; it comes in the evening, generally at 7 P.M. The periodicity is regular. Cold sweat on the body. Hot sweat with high temperature. The sleep is full of frightful dreams. Persistent thoughts prevent sleep. Suffocation in sleep. Cries out in sleep from oppression of chest. (James T. Kent, M.D., Lectures on Homoeopathic Materia Medica, Calcutta 1904, p. 783-785)

### **1908 - Baptisia and Pyrogenium - Cyrus M. Boger**

“The *Baptisia* patient shows that he is laboring under the influence of an intense and rapidly acting, systemic infection, which exalts and then depresses the sensibilities, ending by disorganizing the blood. The trend of the *Baptisia* sickness is toward a typhoid state. It moves toward malignancy with a rapid pace, and is peculiarly suitable for sicknesses which quickly prostrate the patient: grippe, typhoid fever, fulminating fevers and malignant diphtheria are good examples.

The stage of excitement is ushered in by chills going up and down the back alternating with an intense, burning heat of the whole body, except the feet, which are cold. The heat is so distressing that the victim instinctively seeks a cool place in the bed or goes to the open window for relief; even the air of the room seems hot and oppressive. At the same time a peculiar, general, bruised, muscular soreness comes on and causes restlessness, the softest bed seems too hard, it even extends to the eyeballs, they turn red, feel bruised and pain when moved.

After a while the fever becomes continuous, causing the face to flush a purplish red, and it looks and feels besotted. At first this only amounts to an undefined wild feeling, but very soon passes into a wandering delirium in which the victim laboriously gathers together various imaginary, scattered objects or has illusions that parts of his body are too large or are separated from the rest, and he vainly tries to replace them. Sometimes this sense of duality is uppermost, and he imagines his body or a part thereof to be double. (*Anac.*, *Lach.*, *Phos.*, *Stram.*).

In fully developed cases, the temperature runs high, prostration increases, the delirium passes into stupor, and fetor begins to show itself. Probably the earliest sign of this is the filthy taste of which the patient complains, but bleeding from the nose or gums soon follows, and a little later the mouth is filled with offensive, tenacious mucus, a brown stripe forms down the center of the tongue (*Arn.*, *Phos.*, *Verat. vir.*), and sordes are seen on the teeth.

Great fetor is one of the ear-marks of decomposition as well as a great indicator for *Baptisia*. Not only is there a bad odor from the mouth, but the stool smells putrid, and the whole body emits an unwholesome emanation. It encourages putrid decomposition whatever the disease may be. The menstrual blood is chocolate brown and offensive (*Bry.*).

The purplish hue of the face is part and parcel of what may be seen elsewhere. Under certain circumstances the mucous membrane looks dark, at other times fleeting, livid discolorations are seen in various parts of the skin.

Most of the pains are of an aching, bruised character, and are more intense in the occiput and along the back; on the other hand, perversions of sensation are more marked in the extremities. This is particularly true of the early stages of acute disease; when they become well established *Baptisia* cases are very apt to tend toward insensibility and painlessness (*Opium*) combined with sluggish mental operations or stupor. Painless, blue ulcers (*Opium*).

It has developed pains in the region of the gall bladder very similar to those of *Leptandra* and *Dioscorea*. Other things being equal, we should prefer it to the latter when symptoms of biliary intoxication appear.

In rachialgic pains it should be compared with *Phytolacca* and *Variolinum*.

*Baptisia*, *Aconite* or *Veratrum viride* are sometimes used merely to reduce very high temperatures. This is not strictly homoeopathic, although it may occasionally be useful.

### **Pyrogen.**

The *Pyrogen* in general use in this country was prepared from septic pus by the late Dr. Swan, and proved in the highest potencies by Dr. Sherbino, who, because of having had blood poisoning twenty-seven years before, was evidently highly sensitive to its action.

It cannot be too strongly emphasized that finer drug effects are developed late and as rare symptoms in the ordinary prover or appear with great distinctness in sensitives. Because a number of provers obtain but few or unimportant manifestations simply shows their relative imperviousness.

With *Pyrogen* it is now possible to make direct cures of cases which were formerly cured in a roundabout way with *Eupatorium*, *Arnica* and *Rhus tox.* or *Arsenicum*, by treating first one group of symptoms and then another. Its pathogenetic action greatly resembles that of the combined characteristics of these remedies in that it causes an aching in the bones as if they would break, bruised soreness of the flesh and restlessness; picturing a blood infection in which the pulse soon becomes accelerated out of all proportion to the height of the temperature or the severity of the other symptoms. The heart seems to feel the brunt of the attack, and its action is greatly increased.

Cases of sickness showing such a disproportion in the pulse rate are not necessarily recent, but they are always serious. Acute diseases, in constitutions already enfeebled by some previous blood poisoning process, are apt to present such features. It is then usually necessary to antidote the effects of the older infection with *Lachesis*, *Pyrogen*, etc., before the best progress can be made with a later disease.

The *Pyrogen* patient is sensitive to cold to quite a degree; uncovering or putting the hand from under the cover makes the patient worse or causes sneezing. This distinguishes it from *Lachesis* and compels comparison with *Hepar*, *Nux vomica* and *Rhus tox.*

The resemblance to *Rhus tox.* is often very close, both have an impulse to move because the bed feels too hard, laborious dreams of business and relief in the act of motion, but the *Rhus* case is distinctly worse in the after part of the night, and is very likely to have a history of having been wet.

A few doses of *Pyrogen* in a high potency is a favorite prescription with many practitioners upon seeing the very first signs of puerperal infection, and the results are good. In auto-infection it is among the first remedies to be thought of, unless some other is well indicated. The kidney symptoms are worthy of notice. The urine deposits a red, adherent sediment or one looking like red pepper. It has cured several cases of Bright's disease, at least one of which followed the absorption of pus.

It causes a sensation as if the nails would fly off (*Apis*), and it is probably more than an interesting coincidence that nearly all of the remedies which have falling off of the nails also stand in the front rank in Bright's disease.

In puerperal infections it should be carefully differentiated from *Rhus toxicodendron*, which is best suited to advanced cases when the tongue becomes red and dry at the tip, the restlessness is worse after midnight, and the mind is no longer properly alert to the situation. In such cases a tenacious adherence to *Rhus* will bring the best results.”

(Cyrus M. Boger, M.D., *Baptisia - Pyrogenium*, *The Homoeopathic Recorder* vol. 23 (1908), p. 52-55. Notes of lectures delivered at Pulte Medical College.)

### **1930 - H. A. Roberts**

“Helmuth furnished Swan with septic pus from an abscess, from which *Pyrogen* was prepared, first in a dilution, then potentized. This is preparation that is used by most Hahnemannians. Heath made *Pyrogen* from decomposed lean beef, and this has gone under the name of *Sepsin*. Burnett in his provings used Heaths preparation. Sherbino proved Swans, which was the preparation of septic pus in the potency. Kent used both preparations. The provings of the two are almost identical, so that they have practically all been classed under the head of *Pyrogen*.

This is one of the great nosodes. As you all know, a nosode is a remedy prepared from a pathological produce; but like all the nosodes, *Pyrogen* has a very definite field, and one who uses *Pyrogen* on the pathological findings will meet with disappointment. H. C. Allen says it is often indicated in septic states when the best selected remedies fail to relieve or permanently improve, analogous to the action of *Psorinum* or *Sulphur* in other conditions.

Most remedies have an acute and a chronic field, and *Pyrogen* is no exception to this general rule. *Pyrogen* is the *Aconite* of the typhus and typhoid quality in pyrexia, and wherever poisoning by bacterial products is going on, *Pyrogen* may do good work. This remedy is to be thought of in many of the surgical fevers, in carbuncles and erysipelatous swellings, and often in the poisoning caused by sewer gas. I do not know from my own observation, for I have never had a case of puerperal sepsis in my practice, but it is said to abort puerperal fevers.

The *Pyrogen* patient has a condition ushered in with a violent chill, beginning in the legs, with great heat and profuse perspiration.

The heat at first is dry, with intense aching in the limbs, and restlessness, which is ameliorated by heat and motion. If the patient is a child, this restlessness and nervousness by hard rocking in a chair. The patient will not sleep in bed, but wants to be held in the lap, like *Chamomilla*,

but kept in slight motion; and if the motion stops, or you attempt to lay the child down, he immediately wakens. Like Sulphur, Pyrogen has a great aversion to being washed, and the child cries a great deal when being washed. However, if very hot water is used, it relieves the situation.

The pains of Pyrogen are worse when sitting, and decidedly worse from rest. The aching pains are like those of Eupatorium, or are sore, bruised pains. The intense restlessness can be compared to Rhus, which is relieved by continued motion; but unlike rhus, which is aggravated from first beginning to move, Pyrogen is relieved immediately upon motion. Many of the complaints of Pyrogen are brought on by becoming cold and damp. We find indications for this remedy in many of the hectic fevers of phthisis, when these symptoms are present.

The delirium of Pyrogen simulates that of Baptisia, in that it is a confused delirium, as though the parts of the patient were scattered about. The Pyrogen fever is apt to be very high, often times reaching 106; and with it there is great soreness and aching all over the body, but pains are relieved by motion. A condition peculiar to the Pyrogen fever which stands out as a characteristic symptom is the loss of rhythm between the pulse and the fever. With an intensely high fever, the pulse will be low. There is threatening heart failure in septic and zymotic fevers.

In conditions where there is scanty flow from an open wound, or when the secretions are scanty, together with great pain, this is one of the first remedies to be considered. In abscessed condition there is always intense burning. Here we can compare Pyrogen with Arsenicum, Anthracine, and Tarentula cubensis. The differentiation from Arsenicum is in the thirst and the slow pulse. It is interesting to note the Anthracine is also a pus product. Tarentula cubensis was produced from a Tarentula shipped from Cuba, which has been long delayed on the way. The alcohol had been spilled and the spider had partly decomposed, therefore we get the active septic conditions.

In recurrent abscesses, where they follow a history of sepsis, Pyrogen has done remarkable work. The patient is pale, sickly, rheumatic and stiff, together with these recurrent abscesses, which will date back to a sepsis of some kind. In the chronic states, the complaints practically always date back to a septic condition. The patient says she has never been well since she had puerperal fever years ago. Again, it is to be thought of in cases of Bright's disease where there has been a septic base years before. When we go into the history of the case carefully we are apt to find that some septic condition has been present earlier in life, and Pyrogen will often cure these ulcers when the history of an early sepsis is to be found.

The discharges of Pyrogen are intensely offensive, putrid. There is a cadaverous odor from the body, from the breath, and even the perspiration is very offensive.

Now let us glance at some of the peculiar and characteristic symptoms. The delirium is peculiar. The patient will know that where the rest of his body is. He has a sensation as if he covered the whole bed. He is always irritable, and with this, there is a decided loquacity; he talks all out of proportion to his normal state; he talks rapidly, and changes from one subject to another in quick succession.

There is the fan-like motion of the alae nasi, making us think of Lycopodium and Phosphorus. The tongue may show a brown streak down the center; it may be clean, smooth and dry; but the characteristic tongue is shiny as if varnished. The vomiting of pyrogen, like Phosphorus,

occurs as soon as water becomes warm in the stomach. There is thirst for cold drinks in the chill as well as in the fever.

The patient craves chocolate. Stools are usually involuntary, and exceedingly offensive. The urinary deposits are red and very hard to wash from the vessel, making us think again of Lycopodium. In the heart action there is great palpitation, with a sinking feeling of the heart; a sensation as if the heart were pumping old water; a sensation as if the heart were purring.

It is a remedy of very great importance in the last stages of tuberculosis, where there are the very offensive, copious night sweats and the great tendency to diarrhoea.

There are many more detailed symptoms recorded, but the main characteristics of the remedy stand out clearly, and Pyrogen becomes one of our great curative agents when these peculiar and unusual symptoms are present in fevers or septic conditions.

This great nosode is to be compared with Arsenicum, Baptisia, Sulphur, Phosphorus, and all of the reptile and many of the spider poisons. A careful study of these several poisons in comparison with Pyrogen will yield abundant reward to the careful prescriber. It will do yeoman duty in many so-called surgical conditions, and will turn a hopeless prognosis into one of assurance of complete recovery. When we have a desperate case, and hope is all but abandoned, if these characteristic symptoms are present, Pyrogen will turn defeat into victory.”

(H. A. Roberts, M.D., Derby, Conn., Pyrogen, The Homoeopathic Recorder vol. 45 (1930), p. 703-706)

### **1946 - Dorothy Shepherd**

„The remedies *Pyrogen* and *Septicaemin* are very little known and yet they are of such sovereign value that one can only regret that they do not stand in the front rank of homoeopathic use and wont in the choice of the prescribers who act on the principle of the adjustment of remedy to malady.

Professor Burdon Sanderson was a great orthodox Materia medica man and physiologist. He taught that decomposing organic materials were unique in inducing rise of temperature in the body. He did not go any further than that. Dr. Drysdale, a homoeopath, recognized the value of and began to experiment with this pyrexia-producing fluid on homoeopathic lines as a powerful remedial measure. He called this crude substance used by him, *Pyrogen*, which he prepared by macerating raw beef in cold water, thereafter exposing this infusion for weeks to the rays of the sun. Burnett standardized this preparation and made use of it in fevers and blood-poisoning, the result of which he published in a monograph in 1888. The crude substance from which potencies were prepared in the usual manner was decomposing animal fluid, the retrograde change in its composition occurred outside the body. The American Homoeopaths then began to make use of the septic substance of the morbid fluids of the body and proved then the close parallelism of the symptoms produced by the morbid agent and clinical human pathology.

Dr. Swan, who was the high priest and instigator of the high dilution school, raised the morbid *Pyrogen* containing material from the contents of a septic abscess to the highest level of transcendental potencies, and commenced that series of well-nigh miraculous cures which are only paralleled by the clinical experiences of Hahnemann himself in the post-Napoleon years. These potencies of Swan were made from septic pus; Sherbino later made provings with Swan's potencies: while the earlier British work was done with decomposing beef as the

crude primary agent, but the therapeutic successes were astounding whether made, as in America, with septic pus, or as in England, with septic beef. As time went on, the tendency was to change the potency from 6c., administered night and morning, to 10 *m.* or *cm.*, administered in unit doses.

### CLINICAL EXPERIENCES

Burnett used mainly the 6<sup>th</sup> centesimal dilution two-hourly in acute cases.

Shulldham employed the same potency in two cases of diphtheric sore throat.

Sherbino cured a case of puerperal fever and was led to its selection by the high pulse rate.

Hunt cured with *Pyrogen* 200 an elderly woman suffering for years with an ulcerated leg riddled with deep burrowing ulcers.

And Swan gives as a special indication for *Pyrogen*, pulse abnormally rapid and out of proportion to the temperature.

The principal symptoms are:

Disproportion between pulse and temperature; pulse continually rises.

Restlessness owing to soreness of parts.

Better sitting up in bed and in the act of rising, relieved by stretching out limbs, hands and arms are numb: great benefit from heat and movement.

One of my earliest experiences of the great benefit of *Pyrogen* on the suffering individual was in Dr. Burford's wards. This woman had had an extensive and serious operation. I think it was a fallopian tube abscess followed by peritonitis. She recovered well after various homoeopathic remedies, but there was extensive sloughing of the abdominal wound which would not heal, along with a fistula leading to an opening into the peritoneal cavity. There was pyrexia around about 99° and 100° and pulse rate of 150. Dr. Burford with his clinical acumen suggested to me the making of an auto-vaccine from the patient's own pus, and I was entrusted with the making of this auto-pyrogen according to homoeopathic rules. I chose swelling bottles, macerated a platinum loopful of the pus from the abdominal wound as far down as I could go with the probe - and then took one drop of this macerated pus and mixed it with 99 drops of rectified spirit. This was in 1913 and rectified spirit was cheap and in general use in homoeopathic hospitals. Then I succussed this dilution and labelled it 1c; then I took one drop of this dilution and mixed it with 99 drops of rectified spirit, succussed it well and labelled it 2c., and repeated this process carefully six times in all, until I had the 6c. dilution. Of this 6c. potency the patient had five drops night and morning, and in less than a week the wound had healed up from the bottom and the scar was sound and firm. One remembers how pleased Dr. Burford was with the result; the patient was seen three months later and showed a strong scar with no signs of a threatening hernia. It made a deep impression on one's mind, especially as one recalled a similar case in the wards of Edinburgh Infirmary in a middle-aged man of 55 who had extensive suppuration of the abdominal wound and a sinus leading down to peritoneum after an operation for a ruptured duodenal abscess, and he was round about six months in the wards before this wound healed up. And the patient in the Homoeopathic Hospital treated with *Pyrogen* was out after a month or barely five weeks. An astonishing difference! No wonder that one thought highly of the power of *Pyrogen* in septic cases. As Dr. Burford puts it succinctly: *ubi venenum, ibi remedium* - where the poison is, there is the remedy, the cause may evoke the cure.

Some further examples of the use of *Pyrogen* in dangerous cases may show its extreme value in emergencies.

During the serious influenza epidemic in 1918-19, one's clinical acumen was greatly tried, but again and again one was thankful for the very efficient aid that homoeopathic medicines provided, and over and over again an apparently serious case quickly turned the corner.

Patients used to say, "I only had a very mild case of flu." They never gave the credit of the rapid cure to the almost tasteless watery medicines they used to imbibe. There were no complications, no heart trouble, no broncho-pneumonia, no septic pneumonias, and therefore no fatal incidents in over a hundred cases. A triumph for homoeopathy indeed. Very few cases gave me much anxiety. The only relapse I had was a lady dispenser who knew so much that she wished to almost treat herself, and she had several weeks in bed and was far more pulled down afterwards than any of the other cases, even though she had the same strict starvation diet, copious draughts of barley water, lemon juice, orange juice and grapes as the other patients I looked after. So I proved to myself that a natural diet, a fruitarian diet alone, was not the greatest factor in promoting a rapid cure. It always wanted the indicated - that is the right homoeopathic remedy - for each individual case.

There was another case that caused me some anxiety, as it would not respond to the usual remedies. He was a young man invalided out of the army on account of shrapnel wounds in his ankle. The rest of the family, both parents, several brothers and sisters, responded quickly to the treatment given, temperatures came down within twelve to twenty-four hours. They were kept in bed for several days, after the first day of normal temperature, and kept for two or three days only on a fruit diet which was gradually augmented by ordering vegetable soups and egg dishes. His mother could not understand why her eldest son did not get well as quickly as the rest, and put it down to the effects of the war wounds. She was not far wrong either, as it turned out in the end. After nearly a week of pyrexia I had visited him at all hours of the day and night to get all the symptoms collected together, nurses were at a premium just at that time, and one depended on the relatives, provided there was anybody left to do the nursing, and I carried several door keys in my pocket to let myself into the various houses. Well, eventually I got the following disease picture: very high, steadily rising temperature, going up to 105° at night, the pulse remaining somewhere about 100-110, therefore the pulse and temperature was quite out of proportion. He was extremely restless, never staying long in one position, very confused as regards the number of extremities he owned, there seemed to be so many arms and legs in the bed; he complained of the extreme hardness of the bed, his back was so painful and the bed was so hard as a board. He had received *Rhus tox.* for his restlessness, also *Arnica* for the hardness of the bed and (?) remote effects of war injuries; also *Baptisia*, which seemed to correspond to the confusion of the mind and the sensation of there being more than one person in the bed; nothing would touch the illness, however; the weakness went from bad to worse. There were drenching sweats, an offensive, penetrating odour from his perspiration; he had to change his shirts several times in the twenty-four hours; his mouth and tongue were foul, and yet *Mercury* did not touch him. I did not give up hope, but continued to study the case. In the back of my mind I knew there was something that would act as a key to open the door to this maze, this complicated septic fever. Suddenly it came to me, there was a certain remedy which has this arrhythmia of pulse and temperature, a high temperature with a low pulse or vice versa. This was *Pyrogen*, and in reading up *Pyrogen* in *Materia Medica*, there was the *simillimum*; the extreme restlessness, the bruised feeling of the parts lain on, the relief by movement of feet, by change of position; offensive, disgusting perspiration, great weakness and lassitude; it was all there. So *Pyrogen cm.* - the only potency I had except the *mm.*, both Heath potencies from America - was given two-hourly in a watery solution, and by the morning, a few hours after the late night visit - I found

the patient had slept more restfully and the temperature was down to 100°, that night, within twenty-four hours of starting this new medicine, the temperature was normal, and it kept normal after that. I continued the remedy for a couple of days and then finished off with one dose of *Pyrogen* mm., dry on the tongue. I do not remember now, whether he had a constitutional remedy at the end of “seven days bed,” after the temperature reached the normal level. Anyway, the patient was kept under observation for several years afterwards, and he had no after-effects from his serious attack of “wartime flu,” and on the whole he came off quite lightly, compared with many other victims; he was only in bed for a little over two weeks: eight days’ temperature and seven days’ recuperative rest. In this case normal influenza, if one may be allowed to call any influenza normal - was complicated by previous inoculations of the various typhoid, paratyphoid and cholera bacilli; he had had anti-malarial inoculation, he had been vaccinated, he had anti-streptococcal injections and inoculations against tetanus, and he could not remember what other inoculations he had had to submit to. I came to the conclusion that he was full of septic matter, and his blood stream was a battlefield of all sorts of serums and bacteria, and hence the drenching sweats, the high temperature, the offensive odour and the extreme prostration.

In my own mind I am absolutely convinced that this young man would have been another of the numerous victims of the fatal influenza epidemic, if it had not been for our *Pyrogen*.

A number of years passed by, but the lesson one was taught of the action of *Pyrogen* was never forgotten. One day I heard of a poor woman lying dangerously ill in her own house after her confinement: she had been in hospital antenatally for several weeks with high temperature due to pyelitis, the story went, and was sent out even though the fever, etc., had not abated, under the care of a district nurse with the instruction to call in a local doctor. There was such a call on the hospital beds, she had to be discharged. I heard of her accidentally, she had been at home for nearly a week since her return from hospital: the visitor told me that the temperature would not come down, but stayed round about 103°, the pulse was only about 80 though; she was so weak she could not look after her baby, a kind neighbor was seeing to it. It seemed so tragic, poor Mrs. D., being so ill, as there was a large family of seven or eight children.

Across my mind flashed the story of the soldier suffering from septic influenza and his cure by *Pyrogen*; here, once again, was the abnormal pulse-temperature ratio. As there was no doctor in attendance, the woman was too poor to pay for one, and the nurse was so worried, a dozen powders of *Pyrogen* 30 were sent, with the instructions to take on powder at four-hourly intervals, with the result that the evening temperature, the first temperature taken after the powders had been sent, was 99.8°, and the next morning the temperature was normal and stayed normal.

The patient reported herself a couple of weeks later as being very well except for a crop of vesicles on both her wrists and hand, which cleared up with a dose of *Sulphur* 30. Here, once again, was a septic fever, caused by, and following on, some infection of the female generative organs, cured by *Pyrogen*, which eliminated the poison, as often happens after homoeopathic medication, through the skin.

A little while ago I came across this abnormal pulse-temperature ratio in a case of post-operative pyrexia. *Pyrogen* was exhibited and pulse and temperature came down together and the patient reported the curious fact that shortly after taking the powder she could taste pus in her throat and mouth. She was a vegetarian and had never tasted meat in her life, so she said, and was probably hypersensitive. I gave her unmedicated powders to try and prove the

veracity of her statements; and she only complained of the putrid taste after a *Pyrogen* powder. As it was given in the 30<sup>th</sup> potency, it was certainly not a physiological reaction, more in the form of a proving.

*Pyrogen* - which is a product of sepsis - cures septic fevers of all kinds and conditions when the symptoms agree; it was proved on healthy individuals, and produced a distinctive type of pyrexia with definite clear-cut indications. Thus it proves again the great truth of the Homoeopathic Law: *Like cures like*. In my hands it cured septic influenza, puerperal pyelitis, and post-operative pyrexia, and it will continue to cure other septic diseases showing the typical symptoms.

Many cases of blood-poisoning and ptomaine poisoning, peritonitis, and pyaemia could be saved by *Pyrogen*, if the medical practitioners would only study our *Materia Medica* and apply it in cases which show the characteristics I mentioned. *Pyrogen* is closely related to various other remedies, it is very similar to *Rhus. tox.*, to *Baptisia*, to *Arnica*; one has to get together all the distinctive symptoms of each case and then apply the simillimum, the remedy which is most similar. The general medical profession is getting an inkling of the truth, as it is using the serum and vaccines made from individual bacteria or a combination of bacteria, found in different septic cases and injecting them hypodermically, and in certain cases they do get a positive reaction, a good curative result. But their doses are too big, and the results are too uncertain, and until they learn to give minute doses and apply them according to a definite law of cure, their results will never be as good as our remedies applied strictly, following the laws discovered by Hahnemann:

- 1) The single remedy.
- 2) The minute dose.
- 3) Given on the totality of the symptoms found in the individual patient, and corresponding to the symptoms produced by healthy provers.

An interesting confirmation of the value of *Pyrogen* in preventing blood-poisoning comes from a keen homoeopathic layman who worked in Smithfield meat market. He found that *Pyrogen* taken immediately after being scratched, when handling carcasses of meat which were frequently not any too sound, stopped any infection occurring. He used to distribute *Pyrogen* 30 to his friends after septic scratches on arms and hands from handling septic meat, and invariably cured these lesions. He was very enthusiastic about the magic that rested in the minute doses of *Pyrogen*, and here the homoeopathic law proved itself again as being correct. The septic meat produced septic scratches and inflammation ascending up the arm, and *Pyrogen*, septic meat in homoeopathic doses, cured it.

*Magna est Veritas et praevalabit!*

(Dorothy Shepherd, M.D., *Magic of the Minimum Dose*, 2<sup>nd</sup> edition 1946, *Pyrogen* (After Dr. George Burford), p. 165-171)

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[2 klinische Erfahrungen mit Pyrogenium: 1. Typhus abdominalis bei einem 17jährigen Mädchen; 2. Gonorrhöische Metritis und Salpingitis bei einer 20jährigen Frau. In beiden Fällen wirkte pyrog. deutlich, Vf. gab aber noch andere Mittel, z.T. im Wechsel. - „In Fällen von Fleischvergiftung scheint mir das Mittel beachtenswert zu sein. (...) Das klinische Bild der Vergiftung mit faulendem Fleisch ist ja doch ein constantes und deutliches, so dass die Diagnose einer derartigen Vergiftung für gewöhnlich keine Schwierigkeiten macht. Und diese Vergiftung, das ist der Tenor der Sache, hat ausserordentlich viel mit dem Bilde eines Typhus abdominalis gemeinsam. Nach den Erfahrungen, die ich mit diesem Mittel gemacht habe, würden wir uns mit Hinweglassung desselben aus unserem Arzneischatze selbst einer sehr brauchbaren Hilfe berauben.“]  
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## Anhang / Appendix

### Drysdale, On Pyrexin or Pyrogen as a therapeutic agent, 1880

“In studying the experimental evidence bearing on the germ theories of disease, I was greatly struck by a remark made by Dr. Burdon Sanderson in the *British Medical Journal* of 13th February, 1875. It was as follows: "Let me draw your attention to the remarkable fact that no therapeutical agent, no synthetical product of the laboratory, no poison, no drug is known which possesses the property of producing fever. The only liquids which have this endowment are liquids which either contain Bacteria, or have a marked proneness to their production." This last clause is qualified by the statements elsewhere, and from other sources, that the fever-producing agent is a chemical non-living substance formed by living Bacteria, but acting independently of any further influence from them, and formed not only by Bacteria but also by living pus-corpuscles, or the living blood- or tissue-protoplasm from which these corpuscles spring. This substance when produced by Bacteria is the *Sepsin* of Panum and others,

but in view of its origin also from pus, and of its fever-producing power, Dr. B. Sanderson names it *Pyrogen*. If, however, it is to be also used therapeutically, I suggest the more neutral name of *Pyrexin*. I cannot admit without qualification the statement that no drug or poison can produce fever, for undoubtedly *Aconite*, *Belladonna*, *Arsenic*, *Quinine*, *Baptisia*, *Gelseminum*, and a host of other drugs do produce more or less of the febrile state among other effects. But they produce it only after repeated doses and contingently on the predisposition of the subject of experiment, and thus uncertainly as regards any individual case or dose; or they produce it as a part of a variety of complex local and general morbid states, of which it may be a secondary phenomenon. It is therefore practically true that no other known substance induces idiopathic pyrexia certainly, directly, and at will after a given dose. This directness and certainty of action ought to make it a remedy of the highest value if it ever can be used therapeutically; and if the law of similars is applicable here as it is in so many other instances, we ought to find it curative in certain states of pyrexia and certain blood-disorders to which its action corresponds pathologically. In order to put this suggestion to the test practically, let us first shortly sum up the symptoms and pathological changes caused by *Sepsin* or *Pyrogen* freed from all bacterial, self-reproductive, or transmissible cause of disease. In a series of experiments by Dr. B. Sanderson on dogs after a non-fatal dose of *Pyrogen* (i.e. 1 ¼ cubic centimeter of the aqueous solution per kilogram of body weight, or ½ grain of the solid extract for an ordinary sized dog), the animal shivers and begins to move about restlessly; the temperature rises from 2° to 3° C, the maximum being reached at the end of the third hour. There is great muscular debility; thirst and vomiting come on, followed by feculent and thin mucous, and finally sanguinolent, diarrhoea and tenesmus. These symptoms begin to subside in four or

five hours, and the animal recovers its normal appetite and liveliness with wonderful rapidity. I mention this fact as proving that the septic poison has not the slightest tendency to multiply in the organism, and secondly, as rendering it extremely probable that when death occurs it is determined not so much by alvine disorders, which are so prominent, as by the loss of power of the voluntary muscles and of the heart. <sup>(1)</sup> Another proof that death when it occurs is from failure of the circulation is, that in non-fatal cases with well-marked gastro- enteric symptoms, the temperature rises gradually during the first four hours, and as gradually subsides; whereas in fatal cases it rises rapidly to 104° F., and then declines rapidly to below the normal before

death, thus indicating failure of the heart. In fatal cases from larger doses, the above symptoms increase to intestinal hemorrhage, purging, collapse, and death.

(1) *Brit. Med. Journ.*, ii, 1877, p. 913.

*Postmortem.* - There is found extravasation of blood in patches underneath the endocardium of the left ventricle, sometimes on the papillary muscles, sometimes on or in the neighbourhood of the valvular curtains. Similar though less marked appearances are seen in the right ventricle. There are similar points of ecchymosis on the pleura and pericardium. The spleen is enlarged and full of blood. The mucous membrane of the stomach and small intestine is intensely injected with detachment of the epithelium, and exudation of sanguinolent fluid distends the lumen of the gut. These appearances indicate a general tendency to congestion and capillary hemorrhage, as well as locally, congestion and capillary stasis of the gastrointestinal mucous membrane, with shedding of the epithelium, as the nature of the disorder. The state of the blood plays a great part in the morbid process; it is darker in hue, and the corpuscles arrange themselves in clumps instead of rolls; many of the blood-corpuscles are partially dissolved in the *liquor sanguinis*, communicating to it a red colour: a large quantity of the haemoglobin is lost by evacuation of the bowels, and conversion into bilirubin; the partial disintegration of the white corpuscles, by liberating the fibrino-plastic ferment, is supposed to be one cause of the capillary stasis.

The symptomatic and pathological effects are substantially the same in man, and, indeed, the analogy between the symptoms and morbid appearance and state of the blood in septicemia after wounds and the experimental poisoning with *Sepsin* is very close.

Now, granting that the powerful agent producing these remarkable effects may be expected to act therapeutically as an alterative in morbid states which present the pathological simile to them, what are these morbid states, and how are they to be recognized in the complex phenomena of fever in the human subject? To answer this we must enquire what is the cardinal point in the proximate cause of pyrexia with which we have to deal in employing a directly acting remedy? To this question - at least as regards the chief phenomenon which determines the name pyrexia, viz. the increased heat - the critical review of the experiments of Senator, Leyden, and others by B. Sanderson,<sup>(2)</sup> gives a reply.

(2) See Blue Book, 1876, No. 1, Appendix.

The temperature of the body being dependent on the production and discharge of heat, of which the former is a function of living protoplasm, the latter a function of the organs of circulation, respiration, and secretion, the question arises whether pyrexial increase of temperature depends upon the former or the latter. To this Dr. B. Sanderson thus replies (p. 45): - "Two possibilities are open to us. One is, that fever originates in disorder of the nervous centers, that by means of the influence of the nervous system on the systemic functions, the liberation of heat at the surface of the body is controlled or restrained, so that 'by retention' the temperature rises, and, finally, that the increased temperature so produced acts on the living substance of the body, so as to disorder its nutrition. The other alternative is that fever originates in the living tissues, that it is from first to last a disorder of the protoplasm, and that all the systemic disturbances are secondary. The facts and considerations we have had before us are, I think, sufficient to justify the definitive rejection of the first hypothesis in all its forms; for, on the one hand, we have seen that no disorder of the systemic functions, or of the nervous centers which preside over them, is capable of inducing a state which can be

identified with febrile pyrexia; and, on the other, that it is possible for such a state to originate and persist in the organism after the influence of the central nervous system has been withdrawn

from the tissues by the severance of the spinal cord. We are, therefore, at liberty to adopt the tissue-origin of fever as the basis on which we hope eventually to construct an explanation of the process." It is elsewhere concluded that it is in the protoplasm of the blood and the muscles that take place those changes of activity and disintegration on which depend the changes of temperature, and no doubt the Other essential phenomena which characterize fever.

What, therefore, on these data, are we to expect from an agent which shall act directly as curative of the pyrexial state? Not certainly any palpable disturbance of the nervous system which can in health lower temperature by promoting heat discharge as is expected from large doses of *Quinine*, or from the merely physical action of cold baths; nor a general support of the vital powers till the specific disease runs its course, as is expected from alcohol, &c. But, on the contrary, a simple modification of the exalted and perverted protoplasmic action in which the proximate cause of pyrexia consists, which shall be of such a nature as to bring it back to health. Let us assume (without any attempt to prove it, but merely to give an intelligible illustration in explanation) the hypothesis of Beale, that the essence of inflammation and fever consists in a degeneration in the scale of biological development of the bioplasts of the blood and tissues, which involves the production of a more rapidly growing and disintegrating kind of protoplasm; our most complete and perfect conception of a direct remedy would be that of an agent which would act as a specific stimulus to the affected protoplasm, and bring back its germinal development up to the normal plane. This has long been my view of the action of *Aconite* in inflammatory fever, or, at least, that it acted directly on the pyrexically affected protoplasm, and not on the vaso-motor nerves or centers of the heart, or of the spinal marrow;

for reiterated experience has shown that it acts in far too small a dose to exert any directly depressant effect on the heart or its nerves, or, indeed, any perceptible effect on them at all. Now, the living matter or protoplasm is capable of an almost infinite variety of kinds of morbid action according to the predisposing and exciting causes acting on it, and hence pyrexia may vary indefinitely in its character, even independently of the addition of the local lesion proper to the concrete specific fevers; so no directly curative remedy can be applicable to more than a few forms or even to only one, e.g. *Aconite* suits inflammatory fevers, and *Quinine* malarious intermittents, while they would be powerless if interchanged. To what form then should we expect *Pyrexin* or *Pyrogen* to be applicable? The true clue to this is given, I think, by the state of the blood, for that is the most marked and important of the signs of

septicemia; the local congestions and extravasations not being so constant or so grave as respects the issue. If we contrast the characteristic hyperinotic state of the blood in inflammatory fever, displaying its bright colour, buffy coat, firm coagulum, and the adherence of the red corpuscles in rolls, with the septicemic state of blood already described, showing its dark and dissolved state, loose coagulum, the red corpuscles adhering in clumps, and the increase of white corpuscles, we shall see well-marked grounds of distinction. This latter state of the blood is very similar to, if not identical with, that which belongs to typhous or adynamic fevers, and, indeed, in describing fatal cases of septicaemia after wounds the analogy of the symptoms is so great with these fevers that the word "typhous" is generally

used in describing them. Hence the shortest discrimination of the indications for the use of *Pyrexin* or *Pyrogen*

may be stated to be the typhous or typhoid character or quality of pyrexia, using these adjectives in their old-fashioned sense. For although the clinical discrimination of enteric fever from typhus is a great gain, it is unfortunate that the word "typhoid" should have been appropriated to the former, as it either introduces confusion into our nomenclature or deprives us of a hitherto well-understood expression of the character of pyrexia as distinct from the name of a specific disease. We shall find it convenient to go back to the terms of Cullen, viz. synocha, for inflammatory fever, the typhous or typhoid condition for the low adynamic or asthenic character or quality of fever, and synochus for the mixed kind, which is inflammatory at the

beginning and typhous at the end. I do not know that the more accurate discrimination of the typhus, enteric, and relapsing fevers into distinct specific diseases gives any ground for denying the existence of the above distinctions of character in the pyrexia! state in general, and, therefore, we should still keep up the words inflammatory, and typhous or typhoid, as expressive of different qualities or characters of fever, and not of distinct febrile diseases.

As *Aconite* is well known to be the most important of the remedies for the synochal or inflammatory pyrexia, so the most summary indication for *Pyrogen* would be to term it the *Aconite* of the typhous or typhoid quality of pyrexia. This being a condition and not a distinct disease, it is to be looked for as occurring in a variety of diseases such as the typhus and enteric fevers themselves always, and more or less it may occur in intermittents, so-called bilious remittents, in certain varieties or stages of the exanthemata, especially scarlatina, measles, and smallpox, of dysentery, and of epidemic pneumonias, diphtheria, & c. From the gastro-enteric symptoms *Pyrogen* may possibly also apply to some stage of cholera, and to yellow fever. It is, of course, to be distinctly understood that this substance is only recommended at certain stages and phases of these diseases, and entirely as a remedy of a secondary or subordinate character, and not in any sense as a *specific* for the whole disease.

*Sepsin* or *Pyrogen*, it must be remembered, is only a chemical poison, like *Atropin* or serpent venom, whose action is definite and limited by the dose, and it is incapable of inducing an indefinitely reproducible disease in minimal dose, after the manner of the special poisons of the specific fevers; its sphere, therefore, is by no means commensurate with that of these diseases, and if ever true specifics for them should be discovered it is hardly probable that such would be merely chemical non-living agents. At present there is no question at all of such specifics. The only point is that we should be able to form an intelligible idea of the way in which a margin can be supposed to exist in individual cases, say of enteric fever, smallpox, or yellow

fever, & c, in which a directly acting medicine can do good to the pyrexia without at the same time having any power to check, modify, or shorten the true specific disease. Observation, I think, shows that such a margin exists, for we are all familiar with the immense variety in the degree of severity, especially as regards the pyrexia existing between cases of the same specific fever in different individuals, while at the same time the cardinal symptoms are pronounced sufficiently to leave no doubt of the diagnosis, and the completeness of the specific process is also shown by the protection against subsequent attacks being as complete after the slight cases as after the more severe. In scarlatina and smallpox both these circumstances are

notorious, and the astonishing mildness of the pyrexia in some case of enteric fever, in which the local diseased process runs its full course, is well known.

When we take these facts in connection with the theory of Beale that not all - nay, not even the majority - of the new bioplasts, whose formation and continued multiplication constitutes the essence of fever and inflammation, are, in a specific contagious disease, themselves specific, and capable of conveying the disease, we can easily see that there may be in each specific fever a large margin of non-specific febrile action or protoplasmic change. It may be, and

probably is, this which gives the severity and fatality to certain cases by its excessive amount rather than the greater intensity of the specific process, owing to increased susceptibilities of the patient towards the specific poison, although no doubt that is also a factor of importance in the variations of severity in different individuals. At all events, we easily see from the above considerations the reasonableness of the expectation that any remedy which could moderate and control the concomitant non-specific pyrexia in the specific fevers would thereby palpably diminish the average mortality, even though it could not cut short the specific disease itself. Whether *Pyrogen* be such a remedy remains to be seen; at present we have only to show that a place is open for a possible agent of this kind. Our expectations, also, must not be pitched too high, because, for innumerable reasons, as we all know, a considerable mortality must attend all the severe specific fevers, and the margin wherein positive curative treatment adds to the value of good negative treatment is not large. Besides, from the very character of the symptoms and stage of the disease for which this remedy is indicated, it must often be in the position of a forlorn hope. Therefore, it is only by the statistical comparison of a large number of cases that we can determine how far lives have been saved by it.

The known specific fevers do not by any means exhaust the possible sphere of a remedy for the "typhous" condition of pyrexia; for, although it is no longer the fashion to speak of the synochus of Cullen, yet, as far as my experience goes (and I doubt not other practitioners will agree with me), the list of species or varieties of continued fever in this country is by no means exhausted when we name the inflammatory, rheumatic, typhus, enteric and relapsing. On the contrary, we all meet with cases of fever which cannot be distinctly referred to local lesion, and cannot be fairly brought under any of the above names, and for want of a more definite appellation we have to speak of as catarrhal, gastric, or bilious fever; or describe in some such vague way. Many of these are synochal, and require *Aconite* at the outset, while in the later stages a more adynamic state sets in, supposed to require stimulants, thus corresponding to the synochus of Cullen. In the specific fevers also, there may occur more or less of this primary and secondary quality of the pyrexia requiring *Aconite* at the first stage and (should our anticipation prove correct) *Pyrogen* at the later stages. Doubtless Cullen, his contemporaries, and for long his successors, described and treated as synochus many cases of continued fever, which were, in reality, enteric, or even relapsing, before Henderson separated the latter, or Jenner the former, from the general mass of continued fevers; and, no doubt, we are all doing the same in respect to other species to be discriminated in future. But this is of less consequence as regards medicinal treatment as long as we are guided by indications for a particular quality of pyrexia, and not the concrete disease in which that may occur. If the discrimination of enteric fever as a species may be correctly held to explain away synochus in part, yet can we admit that the supervision of bacterial growth at the later stage will account for all the rest? Certainly, in that case, the sepsin of the Bacteria would produce a state of blood analogous to the "typhous" state, and if itself the cause would of course exclude our remedy. But although a certain growth of micrococci does take place in some cases, and is the cause of complications (e. g. ulcerative endocarditis in smallpox), yet there is certainly no

proof and, I think, very little probability, that such is general and sufficient to account for the phenomena, which in the meantime must, therefore, be referred to a quality of the disease.

In septicaemia, metastatic pyaemia, and puerperal fever, it is more difficult to see any possible opening for a remedy of this kind. As long as not only sepsin, but bacteria, micrococci, and their germs are being poured into the system from the focus of infection we can naturally expect nothing good from it; but after the focus is removed or neutralized by antiseptics it may become a question whether the artificially prepared *Pyrogen* from a different source may not

be curative in the still remaining fever and blood disorder. Likewise, whether it may not be a preventive of traumatic pyaemia and septicaemia if given when the system is verging on that loss of vital resistance which allows the development of these diseases. The above objection applies more particularly to auto-infective puerperal septicaemia, or that form which is apparently spontaneous, i. e. not arising from inoculation of specific infective poison such as that of erysipelas, of scarlatina, or of another case of puerperal fever itself. But in the latter case if, at an early stage, this remedy can control the degree of pyrexia, and thus hinder the loss of vital resistance which allows the development of metastatic pyaemia and septicemia, it may be of vital importance and sensibly diminish the average mortality of that, at present, almost hopeless disease. For, as elsewhere <sup>(3)</sup> said, I look upon the theory which attributes the specific infective poisons to partial bions or portions of diseased protoplasm thrown off by the patient (Beale), to be true rather than that of specific pathogenic bacterial parasites. Disease having thus begun in a subject who may be regarded as having a deep-seated wound, vital resistance is lowered and the ubiquitous putrefactive bacteria grow and multiply locally, pass into the system, and add the fatal complications of pyaemia and septicaemia. xxx 160

(3) *The Germ Theories of Infectious Diseases*, London, Baillière.

The theory of the engraftment of bacterial septicaemia and pyaemia as a subordinate phenomenon upon other dis-eases, without the inoculation of a necessarily specific kind of Bacteria may be shortly stated as follows. The viable germs of a variety of kinds of Bacteria and micrococci existing constantly in all ordinary air and water, and articles of food and drink, even in some after cooking, we are constantly receiving them into the alimentary canal, air passages, and any open wound. But just as constantly in the healthy state does the living matter consume them and prevent their development, such powers being summed up in the term vital resistance. Many states of disease, however, especially traumatic and other states of pyrexia and local stagnation of the circulation, so far lower vital resistance, that the accidental Bacteria germs may grow and multiply, and thus add their characteristic noxious effects to the former disease. Many of the products of bacterial putrefaction, especially those comprised under the term *Sepsin*, have a powerfully poisonous influence in lowering and paralyzing vital resistance, and thus a small quantity of complete putrilage, containing both living Bacteria and septic products, is able to form a focus from which septic growths and products can spread and infect the whole system fatally. But if the same amount of Bacteria alone is carefully washed from adhering *Sepsin*, no evil follows, for the vital resistance at the spot destroys the Bacteria speedily. This was proved by Hiller, who injected into his own arm a whole Pravaz syringeful of fluid swarming with living but carefully-washed Bacteria, and do effect was produced but a transitory redness of the part. If, therefore, *Sepsin* should prove a remedy for any of the forms of pyrexia, especially the traumatic, which lower vital resistance, to that extent

we may expect it to be a *preventive* of those forms of pyaemia, septicemia, and so-called blood poisoning, which depend on the development of accidentally introduced germs of Bacteria and micrococci.

In chronic disease there may also be an opening for a substance like this, acting so powerfully on the blood. Here we may name leucocythaemia, and possibly pernicious anaemia.

It may be said that the analogy is not great between the action of *Pyrogen* and leucocythaemia; but this may be merely that we see usually an early stage of that disease, whereas the final stage may complete the resemblance. I had the opportunity of following to its close a case of leucocythaemia with enlarged spleen, in which the number of the white corpuscles almost equaled that of the red. For many months little alteration of the health was apparent, except muscular debility and liability to digestive derangements. The patient, had, however, bled over much when a tooth was extracted, and also was subject to occasional bleeding of the nose, and once had haematemesis. Then, after cold or a trifling indigestion, there came on vomiting and purging, prostration, fever, delirium, and death, in about a week, - the course of the disease resembling typhus without any diagnostic mark of that disease. A day or two before death there was large extravasation of blood under the skin of a large surface of the trunk, a portion of which, drawn off by the aspirator during life, showed a tarry colour and consistence, and the same large proportion of white corpuscles, but no Bacteria. There was also complete deafness for a week, and nearly complete blindness for the last three days, thus reminding us of the retinal hemorrhage in septicaemia. After death the only appearance of importance was the enlargement of the spleen. In this case, *Phosphorus*, *Arsenic*, and a variety of medicines failed.

A case of leucocythaemia is reported by Dr. Gowers, <sup>(4)</sup> in which retinal haemorrhage is described and figured. Epistaxis is also mentioned as occurring frequently, but the termination is not given. This disease would seem to be analogous to a long drawn out first stage of *Sepsin* poisoning, therefore, since other remedies fail I would be inclined to try the one under consideration.

(4) *Medical Ophthalmoscopy*, p. 312.

Such is an *à priori* outline of the possible sphere of action therapeutically of this powerful pyrogenic agent. It is, however, only an outline, as the characteristic alterations of the blood especially are too meagre and general to enable us to fill up the picture and give exact indications. What the exact state of the blood which characterizes this typhous state is, is not yet made out, and it would appear from the observations of Andral and Gavarret, and more recently of Baxter and Willcocks, that the blood-corpuscles are less affected in number and richness in haemoglobin than might have been expected in many cases of scarlet fever, measles, typhus, and typhoid; while, on the other hand, the decrease of the red corpuscles both in number and richness is most marked and rapid in paludal miasmatic fevers. The indications for pyrexin here given are entirely *à priori*, as the foregoing was all written before a single therapeutic experiment was made. We must, therefore, expect that experience may correct or fill up, or contradict a large part of the above anticipations. In order to put the matter to the test, I prepared some of Panum's *Sepsin* in the following three different ways.

#### *Modes of preparation of Sepsin.*

1<sup>st</sup>. Half a pound of chopped lean beef was put into one pint of water from the tap and set to macerate on the sunny side of a wall in June, 1879. As the weather was unusually cold and

cloudy no pellicle had formed in fourteen days, so it was left a week longer. The maceration fluid was then reddish, thick, and fetid; this was strained through muslin, then filtered. The filtration was slow and difficult. The filtered liquid was then evaporated to dryness in a water-bath at boiling heat. The dry residue formed a brownish caky mass, which was then rubbed up in a glass mortar with two ounces of rectified spirits of wine, and then allowed to digest two hours. This spirituous maceration was then boiled for five minutes, then filtered. The residue on the filter was then thoroughly dried in the warm chamber, and formed a hard brownish mass, weighing fifty-four grains. This was rubbed up with 540 minims of distilled water, allowed to stand an hour and a half, and then filtered. The clear amber-coloured liquid which passed through is the watery extract or solution of *Sepsin*. To this was added double the volume, i.e. 1080 minims, of *Glycerine*, and labelled "*Pyrexin*"  $\theta$ , forming the standard solution of *Sepsin*, of which one minim corresponds to the water extract of 1/30th of a grain of dry *Sepsin*. The solution is amber-coloured, and remains perfectly clear throughout, and without any trace of mould fungi on the surface eight months after preparation. On testing by subcutaneous injection in white mice in quantities from one minim upwards, and with simultaneous control experiments with like quantities of pure *Glycerine* diluted with one third water, it was found that one, two, and three minima produced palpable effects, though not fatal, while four minima were fatal in some cases, and six minima uniformly so, the corresponding control experiments being innocuous.

2<sup>nd</sup> Mode. A similar maceration, after standing fourteen days in July, 1879, was strained through a linen cloth, measured twelve ounces, of a deep and clear solution. This was at once precipitated with twelve ounces of strong spirits of wine (90°), mixed thoroughly by stirring, and set aside to stand all night. The precipitate was buff-coloured, and very bulky, taking up nearly half of the glass beaker. The supernatant alcohol was decanted off and the precipitate drained upon a filter, then washed off into a beaker with boiling spirit, made up to twelve ounces, and boiled over the lamp for five minutes with constant stirring. Filtered and washed with boiling spirits. The precipitate was removed to a clock-glass, and kept *in vacuo* over strong sulphuric acid for thirty-six hours, during which time it shriveled into a small compass, and became blackish. It weighed forty-two grains. Now treated with ten parts of cold water for an hour in a mortar, triturating constantly. Then filtered and washed twice over. The two filtrates and washings were then evaporated in a water-bath to dryness, and weighed 1.5 grain. This was triturated in an agate mortar with 150 minims of a mixture of one part of water and two parts of *Glycerine*. This was marked *Sepsin* or *Pyrexin*, 100 minims = 1 grain. The

solution is not complete, and flocculent particles are visible. Of this three minima are fatal to mice, and it is thus, therefore, more virulent than the former preparation, but from the small quantity of dry precipitate got and the large quantity of *Alcohol* consumed in the process it is not one to be recommended.

3<sup>rd</sup> Mode. A similar maceration of the nineteenth day, in the open air of a cold September. The filtered maceration liquid (11.3 ounces) was mixed at once with two volumes of rectified spirits of wine and precipitated. The precipitate was of a dull brown colour, and the solution containing it was allowed to stand six days, then filtered, drained, and washed with hot spirits of wine. The precipitate was detached from the filter, dried in a warm chamber at 150° for eighteen hours, then ground very fine, and weighed 3.14 grammes = 48  $\frac{3}{4}$  grains. This was macerated six hours over a water-bath with ten parts of water, then twenty parts of *Glycerine* added, and filtered under pressure. The fluid was very pale amber-coloured, and keeps perfectly like the mode No. 1. But seven drops are not uniformly fatal to mice. It is, therefore,

weaker than the first mode, and more *Alcohol* is consumed. The first mode is preferable in yielding a product of sufficient strength and in tolerable quantity, and with moderate expense of *Alcohol*. But it has the drawback that the preliminary evaporation is attended with such a horrible smell.

As above said these preparations were tested on mice, which animal had been found by Dr. R. Koch to react very like the human subject with the septic and anthrax poisons. The symptoms observed were as follows: - The animal became dull and languid, ceased to eat; then appeared restlessness, the eyes dim and sunken, and bleeding from the anus; then a quiet stupor till death. More or less of these symptoms were produced by all the doses, from one dose upwards. Bleeding from the anus was perceived in all the fatal cases, but also in some that recovered.

The blood of the animals thus killed was then tested by subcutaneous injection into healthy mice, which in every instance were unaffected. It was, therefore, not infectious, and we have thus the security that we are dealing with a simple non-reproducible chemical poison, whose effects can be regulated and kept within perfectly safe bounds by simply limiting the dose.

As all doses below six minims were insufficient to kill a mouse, we may take it that from one to five minims would be quite safe for subcutaneous injection for man. How much smaller might be sufficient for the curative reaction can only be determined by experience. As this is an animal poison like snake venom, it may require to be used subcutaneously, as we do not know how far the stomach or the mucous membrane may not impair its activity, as they certainly do with snake poison. This also can only be determined by experiment, and it may turn out to be effective in the much more convenient way of administration by the mouth. As the action of *Sepsin* is speedily exhausted, it would probably be necessary to repeat the dose by subcutaneous injection at least twice a day in acute pyrexia; and from the nature of its possibly curative operation, we would not expect a rapid or palpable lowering of febrile heat soon after each dose, but only a gradual amelioration of the disease.

As *Sepsin* is of the nature, probably, of peptones, and extremely favourable to the growth of accidental Bacteria, whose germs exist in all ordinary water, it should, if given internally, not be prescribed in an aqueous mixture, but dispensed in pure *Glycerine* or in *Glycerine* with one third of distilled water, and the dose dropped into a spoonful of water at the time of administering.

Since the above was written, I have had some experience with Pyrexin as a remedy, both subcutaneously and internally used, but not sufficient for publication. So far, however, the results have been favourable and give good promise. The injection, even of that strong *Glycerine* preparation, excites no local disorder, nor any general septic disturbance in the above doses. The first decimal dilution has been given internally, in three-drop doses frequently repeated, to children with good effect.”

(Dr. Drysdale, On Pyrexin or Pyrogen as a therapeutic agent, The British Journal of Homoeopathy vol. 38 (1880), p. 140-155)