

E. W. Sawyer

1895 - The Origin of Morbid Growths

"In they days gone by as well as at the present time pathologists have striven and still strive to point out *the* case of morbid growths, all seeking a material origin, a blood clot for example or a renewed activity in quiescent embryonic structures, anything or everything to which it might be traced with any show of reason.

There stands forth one notable exception, Samuel Hahnemann, who demonstrated instead a miasm psora. Further investigation of this now evident fact has only succeeded in adding to his conclusions that there are other miasms, correlative or underlying, from which such growths may spring, viz., sycosis and chancroid.

We have also learned that certain drugs can produce these manifestations by perverting the life force, especially those from the mineral kingdom, and that this taint is transmissible by heredity and cannot be thrown off by the life force when once acquired, except by the aid of homoeopathic treatment.

The fundamental cause and origin of morbid growths, excluding those produced by drugs, may be stated as one or more of these miasms. In three cases in my own practice I have seen gonorrhoea, sycotic warts, and chancre present at the same time. At first this puzzled me. I did not understand Hahnemann, though I thought I did. I believed I was obliged according to his teachings to attack them all together and give something to cover every symptom even if it required rotation to do it. I almost concluded Hahnemann was wrong until I saw that he plainly knew the true way when he said we must attack the strongest miasm first, and following that principle I have demonstrated to myself the truth of every article of the Organon.

The miasms may lie dormant throughout life if the surrounding conditions of mind and body are hygienic. Everyone afflicted with these miasms does not have a morbid growth, and the absurdity of local treatment will be readily perceived if you consider that it should be used where there is no local development as well as where such is found if you want to be consistent.

I tried the knife, excising inches beyond the formation, but could not effect a *cure*. Seeing that those who used local applications were far more successful than I with my knife, I studied the homoeopathic therapeutics of the drugs they used and found that those which produced beneficial results were invariably antipsorics, antisycotics, or antichancroidal. I have never known the worst form of primary syphilis, when uncombined with other miasms, to be followed by a cancer, but chancroid frequently is.

When these elements are present in the system any irritation may start them into activity, a blow, the cutting of a mole when shaving. If the life-force is depressed by unhygienic conditions, the rapidity of growth is increased, so that we might have a series of phenomena of progressing severity; as an example of which you may take the following sequence: an itching; a scaly epidermis; a scab, which drops off, exposing a raw sore, whose edges become indurated and everted; forming in its last stage a typical carcinoma, a condition which under "scientific" treatment, may lead to sudden dissolution. This was just as surely a cancer when the first irritation was noticed as after it had, under favorable conditions, characteristically developed.

We know that each of these miasms have three stages in their expression, psora showing primarily and characteristically as scabies; secondarily, as erysipelas, and in the third step, a

morbid growth, generally scirrhus. Under proper treatment they disappear, just as our master said, in reverse order of their appearance. Patients may say to you: "That last medicine did the business, doctor; why didn't you give it to me at the start?" You know you can't build a barn by putting up the ridge-pole before you have something to support it. Perfect cures are not made that way.

As to therapeutics. Your remedy must come from those curative to the underlying miasm. Study those which are known to be antipsoric if you have psora, antisycotic, or antichancroidal remedies, if these miasms are present. Select a remedy which combines these qualities if more than one is found. In every case give the similimum, and if you cannot find a single remedy covering all the conditions, be sure you attack the greater miasm first."

(The Origin of Morbid Growths. From a lecture to the Senior Class of Dunham Medical College, by Professor E. W. Sawyer. From Notes taken by Dr. J. E. Fitzsimons. The American Homoeopathist vol. 21 (1896), p. 367)