

## Dorothy Shepherd



Dorothy Shepherd (1885-1952)

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### **1946 - Difficult children**

"Early on Sunday morning the landlady of a superior boarding house in the West End was awakened by the insistent ringing of the house telephone. The voice on the other end of the wire which she recognized as that of one of her most troublesome lady boarders, insisted that Dr. - must be send for at once, as she was feeling very ill. The proprietess not recognizing the name, asked who he was and got the reply: "Don't you remember, he was the doctor I read about in the library book last week? It is urgent, I like the sound of his name, I must have him."

It was pointed out to her that this was a fictitious name, and the doctor did not exist, but this did not avail at all. Contradiction made Miss. B., the boarder, only more and more angry and to pacify her, the telephone book was produced, and a doctor with a somewhat similar name was found. That was the reason why an astonished surgeon got an early summons to attend this lady. When he arrived at the house and knocked at this lady's door, to his surprise he was greeted by his patient brandishing a poker and threatening to do him in. He was a surgeon familiar with people's insides, but not with the crooked workings of a diseased mind. He fled for his life and hastily sprinted into the lady's bedroom and locked the door between them, while the patient continued to rave and break up the furniture and ornaments. He called out of the window to attract the attention of a passer-by - a rarity in a quiet square on Sunday morning. Eventually he managed to get a policeman so that he could be released from his ignominious position, and the poor demented lady was secured and sent off to a private home, where they had all the facilities to deal with people suffering from brain-storms. One heard that this lady, now quite elderly, had been afflicted from early childhood days with similar attacks of rage and temper, which used to come on without any warning. When out of her nurse she would suddenly throw herself down in the street, kick her legs, shout and scream, had to be held down and was frequently carried home by a policeman or in a cab, a fighting, screaming fury. There was no repression on her case, she was allowed to carry on and please herself. Her parents, one presumes, sought medical advice, and all they were told was, she would outgrow it! She certainly never did. As a young lady in late Victorian days, she used to upset the decorous company at luncheon or dinner with her storms and tempers, and she had to be sent in the end to an asylum for restraint! She would have saved her parents, herself and her neighbours much anxiety, if she had been treated as a child by Homoeopathy. This is not an idle or exaggerated statement.

Let me quote similar cases I have come across, who have been successfully dealt with. The second child of superior working-class people was a sullen, bad-tempered mite, even at a year old. Never a smile out of her; she would not play with anybody, she gave vent to terrible storms of temper, kicking and howling, and nobody, not even her father, could control her. She would not do anything she was told - the older she grew, the worse her tempers became. I tried to coax her, and give advice to her parents, but neither soft words, nor harshness made any difference. She remained just a "difficult child," her older brother, a sweet-tempered,

happy boy tried to reason with her; but little Christine would have none of it and continued in her evil ways. This was years ago, and I bethought myself of similar cases I had read of in the *Materia Medica* books, and suggested to her mother, if she was willing, I should cure her girl of her tempers. She was only too glad, and so it came about that little Christine was given *Tuberculinum* 30: several weekly doses. The first dose already made a difference and after a few weeks, the once sulky, bad-tempered child began to smile instead of frowning and turning her head away or even lashing out with her feet. She grew into a good-natured, happy child, and at the slightest return of her temper she would get another dose of *Tuberculinum*. Her mother and father were always extremely grateful, and she used to say with tears in her eyes how wonderful those little powders were which turned her naughty girl into a happy, obedient one. One watched this little girl for several years until her parents left the neighbourhood, and there had been no need for "repetition of the dose" for many moons. The old Adam had been conquered.

Another case: One day at the Clinic, one heard a great commotion going on in the next room, much noisy altercation, at last the door opened and in came a young Englishwoman, trying hard too bring her twin girls in to see me. They were not yet two years of age, but they were as determined as their mother, that they had no wish to come and see the doctor in the white coat. They were Anglo-Chinese girls, with pretty slit almond eyes, and pink cheeks on an olive foundation, and had just returned from Carshalton Hospital after several months' treatment for severe rickets. Children of mixed races, Anglo-Chinese or Anglo-Negroid parentage do not stand our climate very well, even though they are born here, their bones seem very soft and bend easily and the worst rickets I have seen in later years have been in children of a negro, or Chinese father and English mother. At Carshalton, as many such pretty children, they had been very much petted by the nurses and thoroughly spoiled, and now they were quite out of hand. The mother dragged one way with one child in one hand, and the little girls dragged another way, noisily protesting, and the next thing I saw, both children were on the floor with their legs in the air, kicking and screaming, nobody could make themselves heard above this din. It was impossible to do anything that day with these two minxes. I procured some *Tuberculinum* 30, and put it on their tongues, while each child was bellowing loudly. It was somewhat of a feat to get past those furiously kicking legs; the hospital had apparently made the nether extremities string and capable of inflicting damage.

The children were carried out in the end by a hot mother with many apologies and planked into the pram. A week passed, the door opened and in came two tiny mites, hand-in-hand allowing themselves to be examined without a murmur, my little demons of the week before! softened by *Tuberculinum*. They became quite reformed characters, we never had any more such exhibitions, though they were given a course of *Tuberculinum* for several months; they remained imps of mischief, who loved smearing brooms with jam, pulling the tablecloth off again as soon as it was set for dinner, going into the cupboards and mixing the sugar and the soap flakes and salt all together. They were always up to something new, but their tempers were *cured*. This mother was very prolific and produced a child every year. I think we dealt with five or six of her offspring and the interesting point was: that each child at about 18 months developed those terrific tempers, but they were one and all settled with a few doses of *Tuberculinum*. No stick was needed, no prolonged treatment and observation at child guidance clinics; they just calmed down after *Tuberculinum*.

It is sometimes very difficult to get the fond mothers to acknowledge that their children, specially their boys, are suffering from attacks of violent rage; one often has to wait, until one sees a child in an attack. There was a mother I remember, she had a boy after nearly sixteen years interval, he was made much of naturally, and when he was four, he became almost unmanageable; he appeared to be quiet and saint-like, just looking at you quite knowingly, while the mother told of these scenes. He appeared quite rational and she would take him out into

the park, he would play for a while and then suddenly, for no apparent reason, he would go off into one of his tantrums, howl and scream and throw himself on the ground and make an exhibition of her. The neighbours would blame her for being cruel to him, when she had done nothing to him. She would take him to the local welfare centre or hospital, and the same thing would happen there: screams and kicking of feet and hitting the mother, so the mother was reduced to tears in her helplessness and could not take him anywhere with her. He was a thin, undersized child with fair hair, blue sclerotics, red lips, strawberry tongue and profuse growth of hair between the shoulder blades along the spine. She did not know what to do with him, he was a trouble and great anxiety to her. He had the physical characteristics of *Tuberculinum*, as just described, as well as the mental symptoms of uncontrollable rage. I consoled the mother as well as I could, assuring her that her boy could be cured, and needless to say with a few infrequent doses of *Tuberculinum*, along with bi-weekly sittings of ultra-violet rays, we succeeded in turning the boy into a normal tempered, happy individual. The symptoms that first drew attention to this remedy are found in Allen's Materia Medica as follows:

"Does not like to be disturbed by people; trembling of hands."

"Felt positively ugly; personal aversion almost became a mania."

"Trifles produced intense irritation and could not be shaken off."

"Very irritable, wanted to fight, no hesitancy in throwing anything at any one, even without a cause."

There was another boy who used to throw himself under the table, kick hard with his feet and shriek and shriek and many times upset the table with all the crockery on it. *Tuberculinum* rapidly put an end to these brain-storms.

Another symptom that always makes me give *Tuberculinum* to a young child is this: I offer the baby over a year old, an unmedicated tablet of sugar, if the child refuses to take it even though you coax it and say, "Have a sweet," and when you put the sweet on the child's tongues he immediately becomes obstreperous, refuses to swallow it and spits it out; his mother tries him and he clenches his teeth, and if she manages to push the sweet in, he still ejects it violently, one is pretty certain that *Tuberculinum* is the remedy and that after a few doses, the child will become lamblike and lose the tendency to these storms.

In the last ten years one has had many children from one to five years and over, with symptoms like those mentioned, and *Tuberculinum* 30 invariably helped. These fits of anger might come on with the teething, sometimes it might be a little later. A history of tuberculosis in some member of the family could not always be obtained, but one has a shrewd suspicion that there is a tubercular tendency in that family. The poorer classes do not know much about members of their family, of even a generation back; some prefer to lie and will not tell you the truth. But in quite a goodly percentage I have discovered that there has been tuberculosis in the family. These children with sudden brain-storms who react so well to *Tuberculinum* may require other medicines later on; but for a time they will do well on this remedy, and some seem to require nothing but *Tuberculinum* to turn them into strong, healthy children with a normal amount of naughtiness, which is easily controllable.

A girl of 9 or 10 was brought to me two years ago with the history of snoring at night, and the mother wanted to know whether she had enlarged tonsils and adenoids; she had taken her to four different throat clinics, and none of the surgeons had been able to persuade her to open her mouth for examination. I found her a badly-nourished girl; everything went off swimmingly, we were good friends, until I asked her to let me look at her mouth. She was seized with unreasoning terror, would not be quietened, shrieked and yelled, it took four adults to hold her; she subsided on the floor, taking two of the adults with her, tables and chairs flew in every direction, her eyes became glassy, she screamed, "I'll kill you, I'll kill you." I hastily removed myself outside the radius of those thrashing legs and sent for some *Tuberculinum* 30.

It was a terrible struggle to make her take the tablet. The first tablet was ejected with great force and landed on the window sill; the second disappeared and was spat out and disappeared into another corner; the third was firmly placed inside the mouth and the nose and mouth were finally closed, so that eventually she had to swallow it. She was exhausted, and so were we all; and we thankfully saw the back of her.

The next week she returned, she made no murmur at my placing the spatula inside her mouth and let me examine her, and I hardly recognized her as the same spitting fury of a wild cat of the week before. As she had diseased septic tonsils which were foreign bodies and no good to her, she was recommended for operation. One heard later, she did not play up again as she did previous to the dose of *Tuberculinum*: so add this symptom to the list mentioned above:

"Unreasoning terror in a child at a medical examination or with strangers - *Tuberculinum*."

Now another difficult child with slightly different symptoms who was again cured by *Tuberculinum*, though I used a different preparation, namely Koch's *Tuberculinum*. There are different Tuberculins on the market; but they all act on the "tuberculinum" child, and one uses them at random.

This girl, 5 ½ years old, was brought in September, 1936, with the following history: delicate child, "night screaming" as an infant, showed signs of an enlarged gland in the neck early in 1934. Taken to hospital where her gland was operated on and also a culminating mastoid infection required an emergency operation. Since the operation she had developed frequent recurring feverish attacks about every six weeks with vomiting; typical attacks of acidosis; the mastoid wound had never healed up, at the base an area nearly one inch across was still visible with a sinus leading down to the deeper tissue of the ear. The scar over the cervical gland looked unhealthy and showed typical puckering. She was on a rigid diet, non-fat, with skimmed milk, steamed vegetables, brown bread, potato, lettuce, cereal pudding with prune juice; and still the recurrent vomiting attacks persisted.

Family history: the mother had been in Margate as a young woman for six months for early pre-tubercular debility.

Psychologically the child was distinctly difficult, extremely excitable, argumentative, contrary, contradicting the whole time. "A 'no child' " with a vengeance; did always the opposite to what she was asked to do, restless, fidgety. While in my room, she played with the blind until she broke it, even though her mother begged her not to; went to all my drawers, picked things out of them, threw them about, looked at picture books for a minute, threw them aside - refused to be examined, refused to have her clothes off, had to be coaxed and argued with, was extremely obstinate, was said to be affectionate and liked sympathy, jumped about a lot, squeaking and making a noise even while I was talking to her mother. She was a sallow, dark, thin child - always hungry and yet never growing fat; very difficult in hospital, great many scenes while her wounds were being dressed after the operations, very prudish, disliked bathing costumes, impatient, frequent fear of dogs; weight 2 st. 10 lbs. *Tuberculinum* Koch 30 was prescribed, and soon made a great difference.

A month later she had gained a pound in weight, had had no sick headaches, no feverish attacks, *no vomiting on a normal diet*; the mastoid wound had healed over for the first time in 2 ½ years - the night sweats had disappeared; though still hot when excited or running about; heavy odour about her bedroom from her body in the morning after a night's sleep; constipation - an old symptom - much improved.

December 8<sup>th</sup>, 1936. Not so excited, used to eat no breakfast before a journey, but now has a good meal. My secretary remarked how much quieter she was, while sitting in the waiting room; she used to upset and worry and annoy the other people, always in and out of the room,

"an impossible child she was at first", she exclaimed; now the girl would sit and look at books for quite a long time and not disturb anybody.

Gained 6 lbs. in weight since September on a normal diet, no catarrh, no vomiting, no feverish attacks, a strong sound scar over the mastoid; continued *Tuberculinum* Koch 1m.

February 2<sup>nd</sup>, 1937. Gained 9 ½ lbs. since September, 1936, not so excitable, no feverish chills now, even though she had a cold during the middle of December.

March 29<sup>th</sup>, 1937. Very constipated, put on bran and Agar Agar - no offensive perspiration now; very well otherwise, gained in weight, not afraid of the dark or dogs now; much quieter and not so argumentative.

June 18<sup>th</sup>, 1937. Frequent colds during spring, but no pyrexia, no vomiting, no night sweats, feels cold very much, feet sweat, catches colds from being overheated. Still contrary, fearful, bursts into tears for nothing; has not been well since her vaccination. The disease picture is changing from *Tuberculinum* and the complementary remedy *Silica* 30 was now given for footsweat, fearfulness and antidote for vaccination and recurrent colds from over-heating.

September 15<sup>th</sup>, 1937. Gaining weight - is now 3 st. 7 lbs. - a gain of 11 lbs. in a year. Constipation cured, can eat anything now; gets suddenly tired still, and is dark under the eyes, heavy body odour when asleep; a cervical gland enlarged again during the summer, no sick turns, not so excited - mastoid scar sound.

The child still requires treatment, but her mental symptoms have vastly improved, she is now bearable to live with and not such a strain on her parents and relations; more obedient, not fidgety and not so restless. The fits of anger and rage were only mentioned to me on the second visit, when they had practically ceased. She gets on well at school now, and has hardly been absent from school since Easter, 1937. *Tuberculinum* Koch 1m, again prescribed.

Weight on 8<sup>th</sup> December, 1937: 3 st. 10 lbs; another 3 lb. gain.

This child under homoeopathic treatment has done remarkably well; gained extraordinarily weight; is bright and cheerful and well behaved. A great difference from the puny, difficult, temperamental child of a year ago. No convalescence was needed; she remained in the same surroundings, all the difference that was made, was the regular homoeopathic medication.

*Tuberculinum* is a wonderful medicine in difficult children; but there are other types of children and other remedies which act as well, if they are homoeopathically indicated.

Some years ago, a little girl of 3 or 3 ½ years was brought to me for constipation; she was very plump and fair, and extremely difficult to examine, she shrieked, would not be touched, her eyes turned glassy, she screamed "I won't undress. I won't undress, I'll hit you, I'll tell my daddy." It required a great deal of persuasion and even right to the end she still went on shrieking and protesting at the top of her voice. Even though her temper was like the temper of a *Tuberculinum* child, she had not the make-up; for it does not do to prescribe on one symptom only; one has to take many things into consideration. As I said, she was pale and dumpy and round, and nearly as broad as she was long, she felt the heat, she could not take fat and was very affectionate to the people she was fond of. Altogether different from the dainty Dresden china prettiness of *Tuberculinum*. No, *Pulsatilla* was her remedy and *Pulsatilla* continued for a considerable period improved her agitation and her sudden attacks of vile temper which disturbed the neighbours, until now she is a well behaved little madame of seven, who knows how to control herself.

Yes, we always think of *Pulsatilla* as timid and retiring, but once the lid comes off a *Pulsatilla* nature, they can storm and rage with the best of them, and can make the lives of their

parents very unpleasant. They are easily frightened, take unaccountable dislikes to people, are fidgety, changeable, and remarkably irritable.

Another little girl dissolved into violent paroxysms of rage and loud uncontrolled weeping, whenever she had an attack of earache, and would not be touched and have her ear looked at. She threatened the mother, that she would take her bag, pack up and leave her, if she let that nasty doctor examine her. She was only three, and yet this wrestle with her temper had gone on for hours, keeping her mother awake and annoying the neighbours in the first flat near by. And *Pulsatilla 1m* given hourly at first for the acute earache (of middle-ear disease), and then at lengthening intervals cleared up the ear so that no operation was necessary and with it the piercing shrieks and the vile temper, so that by the next morning there was a penitent, well-behaved little girl.

One sees these kicking, screaming, ill-tempered children frequently in the dentist's chair, or even before, while they are waiting to be seen.

Many a child has been cured of its unreasoning fear of dentists by *Tuberculinum* or *Pulsatilla* or occasionally some other remedy, and once it has been treated it bravely faced the ordeal of having the teeth attended to.

Talking of teeth, reminds me of another young girl about fifteen, when I saw her first. Her teeth had turned black as soon as they came through and they were soft and friable, and she suffered a great deal from toothache and spent a lot of time at the dentist which she dreaded. But this was not all. Her parents were very worried about her lack of self-control. She could not be criticized, she was easily irritated about real or imaginary, trifling things, very touchy, cross and ugly. The world was all wrong, she took offence where none was meant, and when she was angry and indignant, she became impulsive and threw things at anybody, friend or stranger who had caused her irritation. No amount of reasoning with her did any good, and she seemed to get worse, the older she got. The mother and father anxiously wondered what would happen to her, what mad thing she might do in one of her impulsive rages. I suggested a trial of Homoeopathy, and they did not sneer at it, even though the father was a chemist, and *Staphisagria 30* altered the make-up and temperament of this unhappy girl very quickly so that two days after the first dose this budding woman spontaneously confided to her mother: "The world is so different; everybody is so kind and nice to me during the last day or two." She did not know she had the medicine for her uncontrollable rages, but thought she was having medicine for her toothache! This improvement was not a flash in the pan, it continued until she became a happy girl, who could take a joke and laugh at the many minor slights and discomforts of this life. One shudders to think what her impulsive rages might have led her into. What she was saved from!

Once recalls another girl whom one has had under one's care since infancy. She must be now 12 or 13. She inherited her mother's Irish temperament, and many difficult scenes one has had with her. Irascible, easily alarmed, frightened of pain, frightened of seeing blood, would not allow her ears to be touched, fought and screamed and scratched, even though her ears were discharging, would not allow me to look at her throat without scenes. I used to dread the visits I paid her during her various childish complaints, whooping cough, and measles and scarlet fever. Each visit was a penalty, it meant tears and fights and arguments; she got beside herself with rage. I can still see her with hot scarlet, flushed cheeks, the dark blue eyes with large black pupils, the thick mops of closely curled fair hair, standing out from her head like a halo which would not be controlled, however much it was brushed, defiantly stamping her feet and trying to run away, "I won't have my ears syringed." It took three grown-ups to get her ears syringed, when she was almost totally deaf from a collection of wax; "a little spitfire," quite beside herself with rage, quite uncontrollable in her tempers. One did not set out to cure her of unnecessary fits of rage, and her alarms about nothing. One set about to cure the child of her

constitutional defects which were of a distinctly tubercular nature. She always had night coughs, took colds easily which flew to her chest at once; "I'm always rattling inside," she quaintly told me once. Her parents were super-careful of her, protecting her against draughts, treating her like a hot-house plant, piled on her woollies; she wore the thickest double-breasted flannels I have ever seen, and yet she was always chesty. I tried to teach them open-air habits, but they all came to naught against the mother's Irish obstinacy. I made her father build an open-air chalet in the garden, where the children were to sleep all through the summer, the first night she and her brother slept out there, the boy felt out of the hammock and laid his scalp open. Naturally the mother blamed me! and they were packed indoors again. When father opened the windows at night, mother shut them again. It was a case of "difficult mother," almost more than "difficult child" in this instance. How often is that not the case? Bring up the parents, and their children will be brought up as they should be. Often I have found that a difficult child became obedient and lamb-like and much more happy, when for some reason or other he or she was separated from the mother. Once an intractable child became positively good-natured and angelic - when her mother died in child-birth, and the girl was taken over and brought up by her aunt. To go back to our Irish colleen; it took years of patience and careful handling of the mother before she could be brought to see - with the tactful help of the father - that the fresh air and hardening of the child were most essential in preventing colds, even more so in one who had a tendency to consumption. The cutaneous skin tests that were done confirmed the diagnosis. She had *Tuberculinum* with very little effect; then she got *Drosera* for her night cough which was worse and always disturbed the father in the latter part of the night, and lo and behold, not only did the cough improve and the rattles disappear; but also her tempers improved out of all knowledge. Later on she had *Kali carb.* for right-sided bronchitis with stitching pains which seemed worse in the early morning; and the difficult, very temperamental child became quite calm and philosophical; and when she developed a discharge from her middle ear, and the parents brought her home from boarding school for me to see it, I found she submitted to probing and examining and treating the ear with very good grace, and only a few silent tears rolled down her cheeks. A wonderful alteration in her temperament. And I learned that *Drosera*, a tubercular remedy - is also good for tempestuous children, provided the rest of the symptoms agree. By-the-by, a few doses of *Silica* in a high potency cleared up the discharge and helped to cure the perforated drum in under a month. No local treatment was used, except gently drying out the ear whenever it started to discharge, this ceased entirely after a few days. *Silica* is a remedy closely related to tubercular conditions and septic infections. It is of great use therefore in discharging ears, provided the discharge is not of too offensive a character, when other remedies may be called for. Even septic conditions need to be studied individually so as to find the right remedy corresponding to all the symptoms present."

(Dorothy Shepherd, M.D., *Magic of the Minimum Dose*, 2<sup>nd</sup> edition 1946, p. 53-64)

### **1946 - First Aid in Practice**

"As the years roll on and with greater experience, I am more convinced than ever of the importance of the prevention of disease, particularly in accidents and injuries. The period of incapacity can be shortened and unnecessary suffering can be avoided by the proper knowledge and application of the homoeopathic remedies, not forgetting the well-tried aseptic herbal lotions, tinctures and ointments.

Some personal experiences will not come amiss here. Do not forget that for many years, although I used homoeopathic medicines internally as well as externally in my private practice, in my capacity of medical officer at a public health institution, I felt that nursing staff would



be too biased to carry out my instructions if I strayed from the orthodox paths. I had learnt early in my professional life that sisters and nurses only carry out the directions of the visiting doctors which coincided with their own ideas, and unless a surgeon or a physician personally saw to it, half the instructions would not be carried out. Then this last war came along, and with it a change of staff. At first my work at the Dispensary was shattered, wiped out by the stroke of a pen.... The youngsters almost over night were removed into so-called safe areas - safe on paper - thus breaking up the sanctity of the home and destroying all family ties, by scattering the various members of a family from the crowded cities, over the unwilling and reluctant countryside. Doctors, lawyers and other professional men found themselves without work at one go. A minimum of sane patients preferred to keep their children with them, defying the instructions of autocratic officialdom, preferring the threats of hypothetical bombs to separation from their loved ones. In due course the air raids materialized, only the German airmen did not have the politeness to enquire at Whitehall first, which were reception areas or safe areas in their opinion and which were danger zones; but scattered their dangerous missiles wherever they chose, on lonely country as well as on closely-populated cities. After a few months of interregnum of closure of schools, the Education authorities were forced to re-open some of them, as well as some of the health clinics, for the sake of the children left behind who were running wild in the streets. The staff at the clinic now consisted of one trained nurse and the caretaker. Both were exceedingly valuable, the sister proved herself a tower of strength, willing and only too anxious to carry out to the letter the orders given. For almost the first time I found willing co-operation. We scrapped the antiseptics; decided for a time to use nothing but herbal tinctures, lotions and ointments and to give homoeopathic remedies a thorough trial. If the herbal lotions did not work better than the orthodox methods, we could always go back to the old ways; but we never had to. In four-and-a-half years we have proved to our satisfaction that the homoeopathic methods work more rapidly, are cleaner, less painful and, in short, more satisfactory than the recognized orthodox ones. I have proved by a vast number of cases that this is so. Different types of cases which used to take weeks to get well under orthodox antiseptic treatment, recovered in just as many days as weeks previously. The staff increased naturally when more children returned to their old haunts; and the work has grown and the success of the homoeopathic remedies has converted a number of nurses trained in orthodox hospitals.

The children on the whole must like our ways, they come regularly and are most disappointed if they do not get their little sweet pills, and they bring whole gangs of their friends and play-mates for treatment. The experiment has been successful, as I thought I would be.

*Arnica* in potency is always given as soon as a child comes in suffering from the effects of an injury, fall, knock, cut, etc., even concussion, sprains, strains, bruising and so on, whether the case is slight or severe. They all get their dose of *Arnica*, which may have to be repeated half-hourly in a severe case, or only one dose is given in 24 hours for a slight injury. It always works astoundingly quickly in reducing the swellings, relieving the pain and shortening the period of shock and unconsciousness. *Arnica*, mother tincture in 1 in 25 - that is the rate of one drop in 25 drops of water, is applied as an external dressing, provided there is no break in the skin, no abrasion, otherwise the *Arnica* will be absorbed and there is danger of *Arnica* poisoning, which resembles erysipelas. Therefore in the cases where the skin is broken, *Calendula* in the same strength as the *Arnica* is used as a routine measure and wonderfully quickly it acts, more rapidly than the hottest fomentation used to. It prevents sepsis, why it does it I do not know yet; the fact remains it does, unless an interfering parent, possessed of a little knowledge of first aid, chooses to remove the dressing applied at the clinic and uses his own favourite antiseptic; then we would find that the wound started to fester. I had to make myself very unpleasant to some of this tribe of "know-alls" in order to stop their game of interfering with our treatment. Let me repeat it, no iodine, no lysol or similar antiseptic, no boracic

fomentations were used any more at the clinic; and, of course, no anti-tetanus injections were given, only plain, usually unboiled water and a few drops of either *Arnica*, *Hypericum* or *Calendula* tincture were used. If the wound or sore was already septic, *Hypericum* tincture in the same strength was ordered.

The district we worked in was heavily bombed, there was much rubble, much debris lying about, dirty bricks and stones and dust were scattered everywhere, hence an excellent breeding ground for septic germs and tetanus one would think. And yet no tetanus, no sepsis followed our revolutionary method which is absolutely opposed to the modern strict antiseptic treatment. These wide open spaces full of mounds of bricks, stones and twisted iron, full of gaping bomb holes, were exciting playgrounds for our young hopefuls, who imitated their fathers and elder brothers by fighting mock battles; only instead of guns, they used bricks and stones; injuries, often serious ones, are the results. And yet no sepsis followed if they came to us at once; and even infected wounds healed quickly under *Hypericum* locally combined with *Hypericum* in potency. Even injuries, of or near the eyes, contusions, etc., healed rapidly in a few days with *Arnica* internally and *Calendula* externally, although the eyes might be completely closed and the conjunctiva bloodshot at first; and so far I have not had any cases of cataract following these injuries. One of my workers who also attended a nearby eye hospital told me that in similar cases treated there, cataract was a frequent complication. I have seen and so have my nurses, enormous swellings disappear within a few hours, as if they had never existed and without leaving a trace, after *Arnica* internally and externally. If that happens where you can see the swelling and feel it on the outer surfaces of the body, is it not feasible that the same happens near an eyeball or inside the eye cavities? Anyway, the fact remains, no cataract has developed in these cases and I have seen the same youngsters and watched the eye for months.

I regret we have no facilities for treating fractures, as there is no X-ray apparatus which is necessary to confirm the diagnosis. These cases are sent to hospital after a preliminary dose of *Arnica* for relief of pain and shock. In private work after X-ray is taken, *Arnica* is given whenever required, the effusion of serum is reduced by a gentle soap and water massage, then a fixing apparatus, splint and bandage are applied after the fracture has been reduced and with daily light superficial massage and later ultra-violet treatment, passive and active movements of the muscles, the fracture heals rapidly. There is no reactionary rise of temperature or rise in the pulse rate at all, the patient sleeps well, the pain and shock is quickly relieved by repeated doses of *Arnica*. *Symphytum* in potency is prescribed after a few days in order to hasten the knitting together of the bone. In a multiple fracture of the olecranon where this treatment was applied, I got practically a full return of mobility at the injured elbow-joint in four weeks, as confirmed by a surgeon who was called for consultation, and no morphia was needed throughout.

Sprains and dislocations were treated with *Arnica* locally after they were reduced by gentle soap and water massage repeated daily. *Arnica* in potency was given as required, four-hourly at first, and I have seen a moderately severe sprained ankle with lacerated ligaments, recover completely in a week so that the patient was able to walk without any limp or disfiguring thickened ankle joint. Sometimes in milder cases the recovery was more rapid. If the bruising and contusions continued after the first day or two, the *Arnica* was discontinued and *Ledum* in potency, four-hourly, was given, and then the swelling and discoloration disappeared in a few days; 3-5 days were the maximum. A child jumped from a moving train on to the platform and injured one of the small bones of the foot. On X-ray examination three days later, a fracture was found. The parents gave *Arnica* at once and applied *Arnica* externally. The local doctor disapproved strongly and ordered lead lotion instead. I was rung up and ordered *Ledum 6* at four-hourly intervals. When the dressing was taken off two days later by the local G.P., at the X-ray examination, she was surprised to find that there was no swelling and no

discoloration of the foot and hardly any pain. All the comment the doctor made was: "You are lucky to get over it so rapidly."

A young farmer put the prongs of the pitchfork he used while manuring through the soft parts of his eyebrow and almost through his nose, he was badly shocked and almost blinded by the swelling. *Arnica* was given by his relatives at once. Ringing me up, I suggested *Ledum* in potency and *Calendula* lotion externally and ordered him to bed. He was well in 36 hours; the wound healed without any signs of sepsis, no tetanus followed, even though the fork was highly polluted with manure and the lock-jaw germs are usually found in highly manured soil. The old homoeopaths advised *Ledum* as a prophylactic against lock-jaw; most doctors, even homoeopaths, seem to prefer antitetanic serums in order to make double sure. Why? Have faith in your potencies and in your medicines; the germs are not any more potent now than they were 60 or 70 years ago, and the law holds good even against the most dreaded germs of this day.

If there is laceration of the superficial structures, torn skin and deep abrasions, even extending into the subcutaneous tissues, after giving two or three doses of *Arnica* to combat the preliminary shock, give *Hypericum* 1 in 10, later 1 in 25 as an external dressing. Do not remove that dressing, but keep moistening it with the diluted *Hypericum* whenever it appears dry to the touch. You will find very little or no sepsis; the surrounding inflammation will clear up in a few hours and the lacerated part will heal up in a few days. I have seen rapid cure of severe and extensive lacerations under *Hypericum*, while under the recognized methods of orthodox surgical treatment which I used to follow religiously for years, the severe injuries would take weeks to heal.

I am told by a good authority that the Russian surgeons in their campaigns use homoeopathic methods almost exclusively in their advanced dressing stations, and their recovery rate is extraordinarily high, the patients return to the front line in a few days instead of weeks. The homoeopathic treatment is so simple, so painless and the results are so rapid; more rapid than the modern sulphonamide and penicillin methods without any fear of serious constitutional disturbances or side effects coming on later. Some surgeons are already beginning to warn against the exclusive use of Sulphonamide pastes and ointments on septic wounds. And how soon will Penicillin be superseded?

For burns, too, homoeopathic methods work exceedingly well. In burns of the 2<sup>nd</sup> degree, give *Urtica Urens* 12<sup>th</sup> or 30<sup>th</sup> potency for the acute, agonizing pain. I have timed it several times by a watch and found that the pain will be relieved in just about seven minutes without fail, repeat the dose, if it be required, whenever the pain returns, it may be in half an hour, one hour or two to four hours; or less often as required. It always acts rapidly. Locally apply *Urtica Urens* (1 in 20 or 1 in 25 as in all herbal lotions) on gauze dressings covering the whole burnt area; whenever the dressing appears to be dry, moisten the gauze with *Urtica Urens* lotion and cover it up with cotton wool and bandage. The patient, whenever the dressing gets uncomfortable, can usually be trusted to apply the lotion himself. Shock and pain disappear quickly and the healing takes place in a few days, even in extensive burns.

In burns of the 3<sup>rd</sup> degree, I have used *Causticum* 6<sup>th</sup>, 12<sup>th</sup> or 30<sup>th</sup> potency, repeated as before whenever the pain returns. The relief of the pain was rapid, usually within seven to ten minutes. Externally, *Hypericum* lotion (1 in 10) should be applied and the dressing should not be disturbed unnecessarily, but should be moistened whenever it gets dry. The healing takes place in a much shorter time than under the orthodox methods. I saw a boy a year or two ago, who had an extensive 3<sup>rd</sup> degree burn of his right leg and abdomen, the right leg was treated by his parents with tannic acid jelly, before my arrival; the abdominal burn was overlooked. I applied *Hypericum* lotion to it; left the *Tannic Acid* alone until the next day, when it was changed to *Hypericum*. The abdominal burn was almost healed up in 24 hours, the burn on the

thigh took four weeks! *Causticum* 30 relieved the pain and turned a shrieking, yelling child into a quiet one; in under ten minutes he was asleep. But the *Tannic Acid* made an awful mess of that right leg. The simple herbal lotions work much more efficaciously and with less pain and suffering.

In the most severe burns, especially when there is infection of the kidney with dysuria, pain on passing water and passage of blood from the bladder and severe constitutional disturbances, *Cantharis* 6, 12, or 30, will deal with it effectively. It will heal up the local burn in a much shorter time than orthodox treatment can accomplish and the renal and bladder infection will be cured in a short time. You see, *Cantharis* is homoeopathic or similar to this condition, that is, it produces a similar condition, disturbance of the genito-urinary tract with pain and frequently of micturition with passage of blood in the normal healthy prover, and therefore it cures this same condition if it is found in the sick. Try and prove it yourself. I have found it was the truth and nothing but the truth.

Many cases of death after severe and extensive burns with constitutional shock could be saved, if these simple rules were carried out.

A nursing sister burnt her face and eyes severely when a bottle of pure lysol exploded. *Hypericum* dressings were applied locally and *Causticum* 30 given hourly, less often when improvement sets in. She was back at her job in the surgery the next day with hardly any marks showing on her face except a slight redness; the eye showed no ill effects at all.

I recall a similar case seen many years ago, when a colleague of mine burnt her right arm with pure lysol. She was badly shocked, and was off duty for nearly a fortnight, and the arm was badly scarred. Naturally, I was alarmed when I saw the condition of the Sister in the Dispensary staff, as I remembered vividly the other case; my case treated homoeopathically got well in a few hours, even though it affected a much more vital part (eyes and face), while the other case treated by a well-known hospital surgeon, took weeks. Such is the difference between homoeopathy and orthodox methods.

Let me impress upon you that I only teach and preach what I have seen myself; it is not hearsay, nor it is exaggeration, but plain unvarnished truth and clinical proof."

(Dorothy Shepherd, M.D., *Magic of the Minimum Dose*, 2<sup>nd</sup> edition 1946, *First Aid in Practice*, p. 149-155)

## 1946 - Pyrogen

„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.

Shuldham 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 one 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)

### **1946 - Some Introductory Remarks**

“The title *More Magic of the Minimum Dose* was chosen with deliberate intent, not only to allure and attract in this age of advertisement, but to open the door to the inner meaning of the mysteries of the art of true healing. Not magic as standing for wizardry or witchcraft, to which this ancient word has degenerated in our times, but as expounding the higher wisdom of the Magis or Masters of the mystery schools; wisdom as opposed to knowledge, which means something learned, a concrete fact; wisdom is higher knowledge, a step higher and further upwards the abstract and inner knowledge, the esoteric meaning of knowledge, if you like.



Orthodox medicine is based on the study and application of a collection of so-called facts obtained by the irrational method of mass experiments, which are constantly being altered and added unto. There is no continuity, no fixed law, no appeal to pure reason, the structure of the edifice of scientific medicine is based on the quicksands from test tubes in laboratories far removed from the actual contact with the complicated functions of the human body. Just to quote an example of this, Penicillin in the laboratories of the present masters of medicine, kills and destroys certain types of virulent micro-organisms grown in the test-tubes, hence, so the scientific mind argues, it is bound to destroy these virulent organisms in the human body, and cure the diseases caused by their toxins. What happens in actual fact? The living body and certain unknown biological factors in the body, assert themselves and in time a resistance to Penicillin may develop, and though this wonder drug, in theory, should kill the bacteria found in the body, as it conclusively kills them in the test tubes, it is not always so in practice. Penicillin does wonders in many instances I know, but what about the Penicillin resistant cases, they are getting more common. But this does not deter our scientists. They go round and round in circles, looking for the cure with their eyes glued to the microscopes hoping to find it in the test tubes, and neglecting to apply logic and pure reason to their experiments. They never see how worldly-minded their theories are. Their arguments are wrong to start with. So many premises are made, and high hopes are held out, only to be dashed to the ground repeatedly. A premise in logic means: a proposition previously stated or proved for after-reasoning. The public is fooled, and the doctors, blinded by the blinkers of scientific proofs, cannot and will not see the truth, that they have failed and will continue to fail in their object of curing disease, until they go back to the bed-side and learn by observation from the patient direct, what is wrong physiologically and how to cure it.

On the other hand Homoeopathy is purely a bed-side medicine and is based on a firm rock, the unalterable laws of healing, firstly the Law of Similarity, that Like Cures Like - and secondly the Law of Potentization, which means the law of producing power in the drug and thus energizing it. In other words the power of the minimum dose in arresting and curing disease which was proved biologically on the living organisms of healthy volunteers. The energies found in the emanations from radio-active substances have been recognized and have been applied in many different ways: physically and materially speaking such radio-active substances are quantitatively insignificant, but qualitatively their power is immense, in spite of their minuteness.

There are other subsidiary laws which explain and confirm the truth of homoeopathy and why it is vital and necessary for maintaining and upholding the health of mankind.

I do not deny that orthodox medicine does cure in some cases, it does relieve and palliate many conditions, the orthodox doctor in rare cases experiences the great satisfaction of pulling a patient out of the jaws of death. The sulphonamides are the nearest approach to miracle workers, but they are so often applied indiscriminately, there is no law for their application, so frequently they do more harm than good and the bacteria appear to be getting wise and are developing sulphonamide resistance.

Not so long ago I had lengthy discussions with an orthodox doctor of medicine on homoeopathy, and its results. He demanded proofs and comparative experiments, and denied that orthodox medical authorities were not just as keen as homoeopaths in curing people, or that they were unwilling to give homoeopaths the facilities of proving the truth of their statements. He was told that he should study the cases in homoeopathic hospitals, and that if homoeopathic doctors were given equal chances with other doctors as regards beds in general hospitals all over the country, soon the superiority of their methods would have to be acknowledged.

I could only show him one case on the spur of the moment, the rapidity with which Arnica taken internally in an infinitesimal dose had cured a large bruise on the forehead within a few

minutes. All pain and swelling had disappeared in less than 20 minutes. All the answer I got was 'Did you have a control case'. But he did not respond when he was asked to be the control.

It is a pity that Logic is no longer a compulsory subject for medical men, for these worldly-minded scientists have long ago forgotten how to argue, if they ever knew. They are full of fixed ideas and they have forgotten the old saying 'Il n'y a pas des maladies seulement des malades' that is 'there is no sickness, only sick people, no diseases, only diseased people'. Homoeopathy does not cure diseases, only diseased people. There is no cure for pneumonia, influenza or malaria as such; only a cure for individual people, suffering from pneumonia maybe or influenza or malaria or any other disease. Mass experiments based on homoeopathic principles are difficult to carry out, if you have no beds under control - and when medical men as a body are against anything which is not recognized by the governing majority. And yet, in acute cases homoeopathy has a much greater recovery rate, and a much lower death roll, and its advantages could therefore be easily proved.

Speaking for myself, without any desire to blow my own trumpet - I am just stating facts - thanks to homoeopathy and since I took it up and applied it I have never lost any cases suffering from measles, whooping cough or influenza, and none were ever sent to hospital because they were too far gone. One case of alcoholic broncho-pneumonia in an elderly man died, and no other pneumonia case was lost. All the acute infectious cases treated homoeopathically were cured rapidly, without any complications following. Many chronic, supposedly incurable cases were cured satisfactorily. There was a young lad who had suffered for years from bronchiectasis. Within a year of starting the treatment the large cavity in his lungs had completely closed up. He went back to the radiologist who had previously X-rayed him, and when he saw the lung was sound, he was delighted and interested, as he had never seen such a case before in his experience. When he was told this followed on homoeopathic treatment, his interest waned completely.

A case of Meniere's disease, progressive deafness with recurring attacks of giddiness and collapse was cured within a few weeks, the hearing became almost normal, with no return of giddiness and sudden collapses. Yet he had been told that nothing further could be done for him, and that his working days were over. True, he had only been ill for just over twelve months; it was not an advanced case, but the fact remains, homoeopathy cured, where orthodox medicine could not, and held out no hopes for him either.

A case of high blood pressure in a middle-aged woman who had to have monthly blood lettings, so as to prevent the pressure from rising too high, and in spite of this was almost a complete invalid, who could not turn in bed without the greatest discomfort, and could not walk downstairs or stoop, for fear for these ghastly giddy turns, which threatened to engulf her, recovered quickly after having received homoeopathic treatment, and three and a half year later she is so well she can do a full day's work, dig the garden, stoop to her heart's content, and has never been back to the hospital for any further blood-lettings, and the blood pressure has remained normal.

A girl of 26 who had been attending hospital for 15 years for steadily increasing obesity due to glandular deficiency, without receiving any benefit, after 9 months of homoeopathic treatment lost 2 ½ stones in weight from 15 stones - 12 ½ stones, and has lost her migraines, her aches and pains all over the body, her constipation is a thing of the past, and she is full of energy, feels well and looks well, and without any alteration in her diet and without thyroid.

A case of generalized xanthoma, an extremely rare case of multiple tumour formations underneath the skin, resembling pieces of yellow cartilages - who had been a show case at examinations for nearly twenty years, and where the tumours had been slowly spreading all over the body, under homoeopathic treatment these nodules receded and are being dissolved. So that

instead of having yellow tumours on his ear-lobes, his knees, his buttocks and arms, his skin is clearing beautifully, practically all have gone except for a few small lumps near his right elbow where the disease started first, and these nodules are getting steadily smaller and softer every month. These chronic cases require treatment for months and months, sometimes for years; these deep-seated complaints need careful treatment and prolonged supervision, but it is not worth-while?

A case of rheumatoid arthritis with so-called Heberden's nodules over the joints at the base of his fingers, which means according to prolonged observations that such a case is an incurable one, has so far cleared up in a year that these nodules have practically disappeared, the pain has gone, and the swellings and stiffness of the hands are greatly improved. He can now use his hands, he can mow his lawn which he has not been able to do for years, he is able to run up and down stairs, where previously he had to crawl up slowly and cautiously. He has given up the Aspirin long ago, which, though it had helped his pains and made life bearable, had not prevented the disease from spreading.

One cannot say that similar cases in other people will be cured by the same drugs which cured these cases I have just mentioned. Homoeopathy is a medicine for the individual, and the medicines given vary not with the name of the disease, but with the person suffering from the disease. Hence it is difficult to practise homoeopathy, for it is an individualised medicine, not mass-controlled medicine. Whether homoeopathy will survive, I do not know; it is not materialistic enough in this materialistic world of today, where men worship the State with a capital S instead of worshipping God; where spiritual truths are forgotten. The laws in the Kingdom of God are, 'Love thy God first', and then further, 'Love thy neighbour as thyself'. Not until man returns to God and to the divine spirit within himself, will he be free from the bondage of this material world and be able to make the fullest use of the spiritualized medicine, which has been called homoeopathy, the medicine based on the true laws of healing which few people, including doctors, understand or even try to understand."

(Dorothy Shepherd, M.D., *More Magic of the Minimum Dose* (1946), p. 9-14)

### **1946 - The Value of Aconite**

"There are no specifics in Homoeopathy. You do not prescribe for the disease, you prescribe for the individual in question. This is a great stumbling-block to both doctors and lay people. On the one hand we get asked over and over again: 'What do you give for a cold, or for bronchitis, or for rheumatism!' - just to mention a few of the commoner complaints. And one has to answer, 'It depends on the patient.' On the other hand, because we consider the individual and do not prescribe according to the name of the disease, we get the reputation of not making a diagnosis. Diagnosis is necessary, always, though it does not help very much in finding a remedy, at least not in all cases. Let me elucidate.

A friend of mine was telling me that her grandfather was a homoeopathic doctor, and they still followed some of his instructions; such as, they always took *Aconite* in small doses for a cold. This is prescribing for a disease, and therefore not homoeopathy. It is not the small dose which makes a medicine homoeopathic to the disease; the question always should be asked: 'Is the medicine or medicines *similar* to the kind of patient afflicted with this disease?'

*Aconite* sometimes is the simillimum for a certain kind of cold; but there are a number of other medicines which are frequently necessary and indicated for a chill and its effects, and in order to treat them, you have to consider the kind of weather which prevailed when the patient caught his cold, whether wet or dry, cold or not, windy and stormy. It all makes a difference.

I came across a book on homoeopathic treatment, published 100 years ago, which clearly showed that the earlier homoeopaths, at any rate in England, relied largely on *Aconite* for the early treatment for all acute diseases. It did not invariably stop or abort the disease; they had to go on giving other remedies to follow up; the disease seemed to progress, in spite of *Aconite*. The routine treatment seemed to be, whether it was pneumonia, or typhus - just to mention at random two diseases common then - *Aconite* followed by *Bryonia*, or alternating with *Bryonia* or a similar acute remedy. There was no difference as regards the duration of the disease from the ordinary orthodox treatment in this kind of haphazard routine method of prescribing remedies for names of diseases; the death rate was decidedly lower, less harm was done to the patient, it is true, which was an advantage, but it was not and never will be true, or the best homoeopathy.

And again very few people can or do understand why we say that a certain medicine can and does cure different kinds of disease. We are considered quacks because we prescribe, say, *Bryonia* for rheumatism, bronchitis, pleurisy, constipation, gastric disturbance, hepatic chill, etc., just to mention one remedy. *Bryonia* may come in for any one of these complaints, but the symptoms necessary for *Bryonia* are what we are look for and the identical symptoms may be found in either rheumatism or pneumonia or bronchitis, etc.

Let us return to *Aconite*. I do not very often prescribe *Aconite* for a chill, not in England anyway; but I have found *Aconite* symptoms in a variety of complaints. One very hot summer *Aconite* was always cropping up. During the spell of almost tropical heat, two cases of intussusception in infants round about five or six months were admitted within a day or two. The histories were similar. Each child had been seized with a sudden attack of screaming, great restlessness, the abdomen was distended, which was soon followed by the child passing blood and clear mucus from the back passage. I felt a lump in the right iliac region, the rectum was distended like a balloon when I examined it digitally, and I definitely felt the invaginated piece of bowel high up, and there was this red jelly-like substance oozing from the rectum. I gave the No. 1 child two doses of *Aconite M* at fifteen minutes' interval, the intussusception disappeared and there was no need for any operation. The child was kept in for observation for several days, but there was no need to repeat the medicine, nor was the surgeon required.

Child No. 2 was seen by the surgeon on admission, as he was on the spot; he made the diagnosis. While we were waiting to get the infant into the theatre, I gave him two doses of *Aconite M*, and when the surgeon re-examined him on the operating table, he could find no sign of any intussusception. The bowel had slipped back in the interval after the *Aconite*, and the surgeon decided not to operate. I told him, then, I had give the *Aconite* as it had cleared up a similar condition two days previously. The temperature outside was very high, tropical in fact. He was astonished how quickly the medicine had acted.

The symptoms indicating *Aconite* in bowel troubles are passage of pure, bright red blood and mucus, with tenesmus, with high fever which comes on suddenly in well-developed, active, healthy children in hot weather. Great restlessness, anguish and much screaming with pain.

I saw another infant about that time. She passed light green motions with much restlessness, her face was red, her eyes were glassy, her temperature was 104°, a typical case of summer diarrhoea. A few doses of *Aconite M* and the diarrhoea disappeared, the temperature dropped to normal, and the storm was over. Within twenty-four hours everything had cleared up.

Bowel troubles like these are apt to come on in hot summer; and are frequently found in tropical countries. Here the disease would be called Dysentery, and bacteriologically you might find the particular *Bacillus Dysenterius* or the 'Sonne' *Bacillus*. But I am quite sure that *Aconite* would have cleared up a certain percentage of the dysentery cases which occurred in Mesopotamia during the 1914-18 War, and it will always cure rapidly a large number of dysentery cases in the tropics, or in any other country during a hot spell.

There is another totally different set of circumstances which call for *Aconite*, and that is intensely cold winds; or cold wind combined with snow. I saw several children this spring suffering from bronchitis which cleared up with a few doses of *Aconite*. One child I remember, I was sent for some years ago; the parents were in a great state about him; he was a fair, chubby child, he had been playing about in an icy cold wind the day before, and in the night he was suddenly seized with a dry barking cough, high fever, somewhere round about 103°. He was restless, frightened, the throat and larynx burned and he asked for cold water and could hardly swallow it. It was an attack of croup or acute laryngitis; but a few doses of *Aconite* soon set him right; he was well in a day and there was no return of the trouble.

This reminds me of another case of croup which always came on after exposure to a cold east wind. He was wakened night after night with a constant dry, barking cough; usually it came on after midnight. The child was five years old, he had been taken to various hospitals and doctors, had swallowed a great many bottles of medicine - with no effect. Whenever there was an east wind, the child developed laryngitis and bronchitis. The mother brought him to me for an overhaul before going to school. I gave him - not *Aconite* this time - *Aconite* has not got this constantly recurring condition: cough coming on night after night, waking him up in the latter part of the night; he was not restless and anguished enough for *Aconite*. No, I gave him *Hepar sulphur.*, one powder high, I think it was the 1,000 potency - and promptly forgot about him. I did not hear anything more of the child until six or seven years later, when the mother turned up with another baby. The first thing she said to me: 'Do you remember, doctor, the powder you gave to Harry for his croup when he was five years old; he has never had another attack of croup since, he can go out in all kinds of weather, wind does not effect him any more. He is perfectly well.' If I had given him *Aconite*, on the diagnosis: croup after exposure to cold wind, I should have failed in this case; it was a *Hepar* case and *Hepar* cured him miraculously and at once.

I had another patient, an old lady this time. It was a cold spring again; she was very sensitive to cold winds, and she got a chill on the bladder quite suddenly; burning pains with hot, scalding urine - which was bright red in colour, and contained blood. She was always sitting on the commode and straining and straining to pass water. Extremely restless and frightened, so frightened, she *knew* she was going to die, so that she sent for the whole family, and they all of them arrived promptly, sons and daughters and grandchildren, to see the old lady pass away. Only it did not come off, for a few doses of *Aconite* had been given her, and the cystitis stopped, the pain and the urging went, and also the fear of death. And the old lady - she was seventy-five years at least - survived for several years.

Death was cheated by a few minute doses of *Aconite*.

Have I made myself clear? *Aconite* is not a panacea for all evils. Homoeopathy is not quackery, we have a scientific law, which says 'Like cures like'. *Aconite* taken in material doses produces these symptoms of anguish, restlessness, fever, heat, thirst, in the healthy person, and if you give *Aconite* when you find these same symptoms in the sick, you will cure cases of diarrhoea, dysentery, intussusception, croup, bronchitis, pneumonia, cystitis and others - instantly. But do not prescribe *Aconite* for every case of chill or cold; it will fail you, unless you know the indications. So it is with every remedy. Treat the patient and not the disease; this is the great principle of Homoeopathy.

Let me recapitulate. *Aconite* is a fine remedy, it does cut short diseases, when it is indicated, but it has no periodicity; it is of no use in a continuous fever, or in an intermittent one. It is short-acting, quick in its action. *Aconite* is not homoeopathic or similar to every rise of temperature or pyrexia as such. How easy homoeopathy would be if we had little pigeon-holes for diseases and their respective remedies."

(Dorothy Shepherd, M.D., *More Magic of the Minimum Dose* (1946), p. 83-87)

## 1946 - Diphtheria and its Nosode

„In the temperate part of the hemisphere winter has been and always will be a period of danger for such diseases as influenza, catarrhal troubles, feverish chills and infectious diseases. The more thoughtful of the population have been considering how to avert and prevent many of these ailments, which are made worse by over-crowding, huddling together in badly ventilated and concreted shelters. Fortunately the croakers who prophesied much illness during the first eighteen months of the war have been proved wrong; maybe this is due largely to people being too busy and getting on with their jobs, and the other important cause of comparatively little illness is due to simpler feeding, the eating of less sugar and sweets, and the compulsory consumption of less meat per person, for sugar, specially beet sugar, increases catarrhal troubles.

I saw in a daily paper in the late autumn an article on the prevention of winter ills written by an orthodox doctor, who was of the opinion that shortly it would be possible to stamp out practically all of the infectious diseases which sweep through towns and country places year after year. And how does he suggest this should be done? He says that the individuals can help themselves to health and thus benefit resistance to the majority of ailments by vaccination and inoculation.

He argues that most people who have had a particular infectious disease, are immune to that disease or in common parlance, are not likely to suffer from that fever again, as one attack causes nature to produce in our bloodstreams certain anti-bodies, which act as powerful defensive agents against a renewed assault by that particular germ.

He also states that in some of the infectious diseases it is not necessary to wait for the attacking enemy to develop the necessary resistance, and that this resistance can be artificially produced by injecting or inoculating a serum or vaccine.

Then he draws up a chart of certain of the infectious diseases, which I shall copy <sup>[1]</sup> and then make a few explanatory remarks so as to refute some of his statements.

[1] here omitted

This doctor is honest in some of his statements; most authorities claim 100 per cent protection against diphtheria and suppress the fact that at least 25 per cent of the inoculated children are attacked by diphtheria. He, however, makes a bad mistake in saying that there is no reaction or only a very slight reaction in a child after inoculation. I have seen the arm swell up from shoulder right down to the wrist, I have seen high temperatures lasting for 4-5 days; and I have seen remote effects lasting for years, until they were antidoted by either *Thuja* or *Pulsatilla*. Such effects as severe anaemia, weakness, tiredness, loss of weight, the child remaining undersized and delicate, not able to stand up to the overcrowding of city life, with some improvement in the country, and immediately slipping back and losing six or seven lb. on return to town life. As soon as one or two doses of *Thuja* were given in the 30<sup>th</sup> or 200<sup>th</sup> potency, everything improved, sometimes it had to be followed up and the results were better with *Pulsatilla* 6 or 12, 2-3 times daily. Even with adults one noted a lack of the joy of life, a disinclination to work, a dragging round slowly and laboriously; with a return of the normal zest of life when *Pulsatilla* or *Thuja* was given. As for saying that the protection would last probably for life, nobody can say that for certain, as immunization is too recent an experiment; or did the doctor mean for life, if life was shortened by an attack of diphtheria?

Compulsory diphtheria inoculation was introduced into Germany in the 1920s and yet Germany has the second highest incidence rate of diphtheria in Europe. There were 1,500 deaths from diphtheria in Germany in 1926 and in 1937 the deaths from diphtheria had risen to 5,400. In 1923 France had 11,033 cases of diphtheria; in 1930 after a general propaganda

campaign for immunization there were 23,704 cases notified; while Sweden without immunization had 113 cases of diphtheria without any deaths in 1938.

Is diphtheria really so prevalent and the danger to the general population as great as it is made out to be? A headmaster who managed a boarding school for 300 boys for 27 years states that there never was a single case of diphtheria among all his boys during the whole of that period. I should say, this was due to the excellent sanitation and water supply of that school and to proper feeding and the healthy outdoor life of the boys.

As I have already mentioned, diphtheria can be more safely prevented by the homoeopathic nosode *Diphtherinum*, given in single doses in a high potency. This would not have any serious after effects and would not upset a child's health at all, as immunization so frequently does.

Even if diphtheria broke out, it can be rapidly and easily cured by homoeopathic medication without giving anti-toxin. I am now treading on even more dangerous ground.

In one of the homoeopathic hospitals as soon as diphtheria was diagnosed after a bacteriological examination, the patients were given the appropriate, indicated medicine, whichever worked out, it is not always the same medicine; and then sent to the Fever Hospital, as there is no isolation ward in the homoeopathic hospital. Several times the medical officer rang up the homoeopathic house surgeon to inform him that there was no diphtheria found on further bacteriological examination, that the cases were on the mend, and surely a mistake had been made at the homoeopathic hospital. On being shown the original slides, he had to acknowledge that the diagnosis was correct and he could not make out what happened afterwards.

A friend of mine reminded me of a case I had seen some ten years ago which I had forgotten. A child who was seen at the clinic with definite signs of diphtheria of the throat, confirmed by bacteriological examinations, was given a dose of *Phytolacca* cm. by me, previously to sending her to the Isolation hospital. She was sent home again after four of five days with the report that no diphtheria was found at the hospital. The child was perfectly well.

There are a certain number of homoeopathic physicians who have not sufficient faith in their drugs, but who give doses of injections of anti-toxin, either with or without the homoeopathic medicine. Anti-toxin is absolutely necessary to cure a case of diphtheria they say. I want to know why? If we work according to the law that like cures like, and believe in it, surely diphtheria is not a disease outside and above the law?

There are many remedies which can cure diphtheria and have cured it at the hands of doctors in Switzerland, France, America, England, etc.

One remedy specially has produced certain poisoning effects which are almost identical with diphtheria. This is Cyanide of Mercury, and as Dr. Clarke says: One case of poisoning by Mercury cyanide was actually treated for diphtheria by the attending doctors, before the causal agent was discovered. You get fainting, collapse, trembling with feebleness and nausea and general icy coldness of body with greyish-white membranes inside mouth, cheeks and on tonsils. As this Cyanide of Mercury produces a condition similar to diphtheria, it should cure it, if you get these symptoms in diphtheria. In fact, it is so similar to diphtheria that it should be a prophylactic to this disease, and I believe it has been used as a preventive by some doctors with excellent results, that is in single doses of the 30<sup>th</sup> potency. I have never tried it myself, but if ever I was faced with a diphtheria epidemic, I should give *Mercurius cyanatus* 30 in some cases and *Diphtherinum* 200 or higher in other cases and compare the two results. I guarantee my results would be better than inoculation with the immunizing toxoids that are being advised everywhere.

Dr. Charette in his book, *Practical Materia Medica*, which I am sorry to say has not been translated yet, as far as I know, into English, mentions four cases of severest diphtheria which were cured by Cyanide of Mercury within 2-3 days; the membranes and the high temperature usually disappearing within 40-48 hours. The medicine has to be given dissolved in a tumbler of water and teaspoonful doses taken every quarter hour, until improvement sets in.

Dr. Charette also mentions how one child, after being given a dose of anti-toxin, was extremely ill for three weeks with suppression of urine, violent pains, wasting and extreme weakness, and her brother who was given a prophylactic dose of anti-toxin died within a few minutes of the injection! Moreover, the attending doctor consoled the sorrowing parents by exclaiming "that the serum had killed many patients and would kill many more". And Dr. Charette says that the Cyanide of Mercury has a favourable action on diphtheria without any of the inconveniences of the anti-toxin.

Dr. Nash, of America, found *Apis* as the chief healing agent in some epidemics. It is the simillimum for diphtheria cases where this disease comes on exceedingly rapidly and violently, the whole throat filling up with an oedematous swelling, the uvula hanging down like a transparent sac filled with water. The condition is painless until far advanced and the patient is in danger of suffocation by closure of throat and larynx; or sometimes there may be stinging burning pains like bee stings, which are improved by cold applications, and the breathing of course is extremely difficult and noisy. In these cases allopathically the only thing to do is to perform a tracheotomy to prevent suffocation. And yet Dr. Nash cured this case without an operation with *Apis* and says that during that epidemic not one case who took this remedy died, and yet over 40 cases had died of it in that town at that time before *Apis* was given.

Do you see how different an *Apis* case is from a Cyanide of Mercury case?

Then there is *Kali bichromicum*, *Lycopodium*, *Lachesis*, *Lac caninum* and other Mercury Salts - such as *Mercurius protoiodide* and *Mercurius biniodide*, and last but not least, *Phytolacca*; they each, one and all, have their separate and distinctive symptoms and will, if their particular symptoms are found in a case of diphtheria, cure that case within 40-48 hours without any attendant inconveniences and complications such as post-diphtheric paralysis, heart weakness, muscular rheumatism of the extremities and general enfeeblement - which last is the almost invariable effect of the anti-toxin treatment on top of the original infection, which already has a weakening effect on the heart muscle.

Believe me there is no need for alarmist actions, no need for compulsory inoculation, which will only lead to a deterioration of the health of the victims, which may last for years.

Then there is our nosode, *Diphtherinum*, which I have used only as a prophylactic in a diphtheria contact. I gave *Diph. cm.*, one dose and the disease did not develop; this might have been coincidence, of course. I have used it several times as opportunity offered in post-diphtheric cases.

A little while ago a girl of 13 was troubled with a constant thick catarrh of the nose with crust formation and painful cracks at the entrance of the nose. These cracks bled and wept for weeks. I tried various remedies: *Kali bichromicum*, and *Thuja*. Then I discovered this child had been troubled with this off and on practically all through the years ever since a diphtheria attack some years ago. On this information I gave one dose of *Diphtherinum cm.*: prompt recovery and no return for ten months. I then lost sight of her. Her brother slightly younger, presented the same symptoms, and I gave him *Diph. cm.* with the same happy results.

Some two years ago I saw a mother who had been extremely deaf with internal ear deafness for nearly 20 years ever since an attack of diphtheria, at the age of ten. *Diph. cm.* at intervals of three months, whenever she presented herself, markedly improved her hearing, she could



hear and follow ordinary conversation with comparative ease which she had not been able to do for years.

Several months ago I saw a woman in the middle twenties, who became almost stone deaf after diphtheria at the age of 7, and went to a school for the physically handicapped until she was 16 years old. One had to bawl and shout at her and even then she had to refer to her sister who had discovered some patent way of communication with her. She would not go anywhere without her sister for this reason.

I persuaded her to take a dose of *Diph. cm.*, hoping for the best. Four weeks later she came again, minus her sister this time, with her child, aged 2. I spoke to her in my ordinary tone of voice, not remembering her deafness at first and she understood perfectly well and answered correctly. Suddenly I noticed at the top of the case-paper: mother very deaf. I asked her then, had she noticed how much better she could hear and she smilingly agreed, though, being somewhat slow in the uptake, she had not connected it with my powder. I repeated the dose and found deafness improved still more, indeed it had almost gone three months later.

Something great is achieved when hearing is restored so that you can hear the human voice and are able to listen to music and hear the singing of the birds! A deaf person is more shut off from human intercourse than a blind one, and becomes easily cantankerous and suspicious.

It is worth while to go back to the original cause of the deafness, whatever it may be. Deafness comes on after several of the infectious diseases: after measles and influenza, after smallpox, and after meningitis. Remember the respective nosode, give an occasional dose and more than likely an improvement will set in even after such a long period as 20 years. I have proved it. Remember also suppressed skin diseases; *Mezereum* in a case of total deafness after suppression of eczema of the head in infancy brought out the skin trouble again for a short time and cured the deafness. this was related by the late Dr. Dunham in one of his books.

There is much hidden power in our remedies, not to forget our remedies made from disease products, the so-called nosodes, and such chronic suffering, diseases of long standing, could be cleared up if more use were made of them, in unit doses spaced and only repeated at 2-3- or 4-weekly intervals, or whenever a slipping-back in the patient's condition is noticed."

(Dorothy Shepherd, M.D., *More Magic of the Minimum Dose* (1946), p. 177-184)

## 1946 - Scarlatinum

"During World I, when the women of England obeyed the call to serve their country in the hour of need by leaving their hearths and homes for the benches and the lathes, the grandparents took up their burdens again and cared for the young fledglings who might have perished otherwise. One of these grannies brought her twin grandsons to a Welfare Centre I knew - which was still somewhat of a novelty in 1916 - from three weeks of age onwards and faithfully carried out the instructions given, with great benefit to the weakly, puling infants. The old granny was of paramount interest to me because of an affliction of the eyelids which she had bravely borne without complaining for forty years or more. Her lower eyelids were completely everted, red and rheumy and inflamed like pieces of raw beef, with an excoriated and moist skin all round the eyes. She acknowledged having tried various Eye hospitals for relief of her unsightly complaint, but there was no improvement, she had given up the search for even a temporary cure of her blemish long ago. She willingly and ungrudgingly swallowed the powders and pills I have her: *Sulphur* in various potencies, she was fat and unwieldy, slovenly and dirty. Then she had *Psorinum*, for she carried a strong odour around with her. Later we tried *Pulsatilla* and *Graphites*, but nothing was of any avail. The thing beat me completely. Granny told me it had come on after a severe attack of scarlet fever which should

have been a signpost to me, but I did not have the key to the puzzle then, and the years rolled on. When the twins were seventeen years old, she loomed up once again with another child of her numerous progeny, the eyes still stark red and weeping and horrible to look at, a silent reproach to me for having failed in curing her. She bore me no ill will. She had never expected anything else; but proudly told me of the jobs the now tall twins were holding and how well they were doing.

Nearly another decade has passed since then; another woman came along, almost the spit of the one I have described already; fat and dirty, waddling like a duck as the result of many pregnancies, lower eyelids loose and relaxed, hanging down over her cheeks like brilliant red coxcombs, extremely deaf as well, she had to be bawled at before she could understand a word. She brought an undersized lad of 10 to me with anaemia and severe conjunctivitis. I was still undaunted in spite of past failures, and on her general make-up gave her *Sulphur 30* on March 25<sup>th</sup>, 1941. The next week the eyes were definitely improved, not so inflamed; she had not gone to the Eye hospital, as the almoner of the clinic had urged her to. Another dose of *Sulphur 30*; visited and chivvied during the week by a visitor from the hospital on the report of the officious though well-meaning almoner of the clinic.

Seen again on April 22<sup>nd</sup>, eyes very much worse, had some green paint applied on her eyelids at the hospital which she disliked intensely and thereafter flatly refused to have any further local treatment. I went further into her case and discovered that the eye condition came on after a severe attack of scarlet fever when she was 37 years old, about 10 years ago. She had steadily grown worse and so had the deafness. She was 'up against it' and bore a grudge against everybody because of this blemish. Nobody could help her. It was evidently a chronic condition, the cartilage of the eyelids were much thickened and hardened. 'Since an attack of scarlet fever' now conveyed a lot to me. I was triumphant. I should be able to help her. *Scarlatinum 200*, unit dose, was given on 21<sup>st</sup> April; no local treatment advised. A week later another dose of *Scarlatinum 200*; that was on April 29<sup>th</sup>.

The mother was not seen again until June 17<sup>th</sup>, 1941, as she had slipped down some stairs during an air raid and injured her left shoulder, but the eyes were much improved and there was hardly any deafness. *Scarlatinum 200*. Three weeks later she presented herself again, almost unrecognizable, a completely changed woman, clean and spick and span in the morning, with bright cheeks not owing anything the art - clean with silk blouse, and her eyelids well - they were as normal as anybody else's. They had turned round, all the red flesh had gone, the cartilages in the eyelids were smooth and thin, and the mucous membranes barely pink, no inflammation at all! A miracle had happened in a short six weeks; she had been made new almost over night, after suffering from this disfiguring blight for over ten years. It had not prevented her from catching a second husband though in the interval!

Motherlike, she had nothing to say about her own cure; she was the fierce lioness guarding her own cub who was to be snatched away from her arms by the relentless act of an impersonal civic authority, 'forcibly evacuated as living in unsuitable surroundings in a danger area', was the official language, 'and suffering in health in consequence'. Neither mother nor boy saw it that way; they loved one another and preferred to live and, if necessary, to die together.

Whether she will prevail against authority is doubtful; but the return to normal of her eyes and the loss of an unsightly blemish was completely swamped for her by the threatened loss of her own child.

The power of the infinitesimal over a definite physical lesion in a very short time, leaves one almost breathless. In looking up the orthodox textbooks on treatment of Ectropion, or eversion of the eyelids, as this complaint is called, one finds that not much hope is given of curing it. Local treatment by means of caustics such as silver nitrate, etc., is advised, and if that dose not help, a choice of operations is given as the only ultimate cure; even that is faintly decried.

One has seen a number of these unsightly inflamed everted eyelids, usually in people of the lower order, tramps and folks who reside in unsavoury lodging-houses, evidently people who do not get enough suitable food of the right kind. A deficiency disease perhaps in some instances. And yet how quickly curable, if you know how, if you have the key to unlock the door to the temple of health.

Scarlet fever serum inoculation has been tried recently as a prophylactic, a prevention against scarlet fever, with not always too great a success, judging from some instances I have come across.

Two young lads under ten, sons of a well-known consultant physician, were pupils in a famous expensive boarding school; scarlet fever broke out and the whole school was inoculated against scarlet fever; none of the parents were asked for permission, of course, that goes without saying. Medical tyranny and Hitlerism will have to be fought here in England as well as on the Continent. The result of this inoculation of this doctor's two sons, was unforeseen and somewhat tragic as regards the progress of their schooling and their studies. They both developed high temperatures and a most irritating and disconcerting urticarial eruption all over the arms and the body which kept them awake and scratching day and night. Calamine lotion had to be applied by the pint, and it did not ease a scrap, the temperature kept up for weeks. The lads got thinner and thinner, in spite of best expert advice; they were brought home to their parents and for 16 weeks they were in bed suffering untold agonies. Their mother, who told me, took it all as a matter of course, and she prided herself on being a practical and intelligent woman!

The scarlet fever serum is a powerful agent in producing a long lasting urticaria, therefore it should be remembered as a standby in urticaria which will not yield to other means, provided it is given in a high dilution.

It should and will also act curatively in ailments left after scarlet fever. Kidney diseases, albuminuria, ear diseases following on scarlet fever, and so on, such as the case I described just now, whose deafness of middle-ear origin following on the infection of the eustachian canal from scarlet fever was completely cured by a few doses of *Scarlatinum*, as well as the condition of the eyelids.

Dr. J. H. Clarke recommends *Scarlatinum* or scarlet-fever-nosode, in a high dilution as a preventive of scarlet fever. I have never had occasion to try it. I have always followed Hahnemann's suggestion, who advised *Belladonna* as the best prophylactic against scarlet fever, which I have proved to be correct over and over again.

A young girl of 16 developed scarlet fever in a mild form some twenty years ago. I gave her *Bell. 200* two hourly; the rash and throat disappeared in 48 hours, and she was well in a few days. Several younger brothers and sisters in the house who were contacts were all given *Bell. 30* three times daily and none of the other contacts developed scarlet fever.

Several times during a period of six years or more I was providential in preventing the spread of scarlet fever in a couple of day nurseries which were under my care. *Bell. 30*, night and morning was given as a routine for a week, as soon as a case of scarlet fever was reported as having occurred in the families of any of the children. Result, no scarlet fever developed. And no violent reactions either as the result of taking *Belladonna*.

Is this not a much wiser and more commonsense proceeding than overdosing and crippling the unfortunate children for weeks after huge doses of scarlet fever serum?

I just recall another case of discharging ear in a young child following scarlet fever. She had been 13 weeks or more in a fever hospital with it and her ear was very offensive and running

freely. *Scarlatinum* 200 cleared it up in a fortnight and I have known these cases of ear discharge, dating back to scarlet fever, go on for months and months, and even years.

Another girl of 10 who was suffering from bed-wetting and had a foul smelling discharge from her ears due to scarlet fever, was given weekly doses of *Scarlatinum* 200 and the ear cleared up effectively in a month. It had gone on for a year previously, and the bed-wetting disappeared as well in three or four weeks, though she had suffered from it for more than five years.

A girl of 14 some years ago came up with static albuminuria, after scarlet fever. Albuminuria which came on as soon as she got up from her bed in the morning and stayed with her as long as she was up and about; her legs were swollen to her knees. *Scarlatinum* 200 in weekly doses soon put her right.

These are just some of the cases I can recall, and when I compare the results I have had with this remedy whenever it was indicated, with those I had when I prescribed the orthodox treatment, such as acid tonics or iron mixtures or cod liver oil and malt, with convalescence at the seaside, well - there is no comparison really. With this remedy, *Scarlatinum* in a high potency, you just cured these cases, rapidly, quickly, imperceptibly, almost overnight - and with the orthodox way of 'cure' - well, it was just a parody of the word. They went on feeling seedy and never quite the thing, there was never 'this joy of living' and of being on top of the world, such as a healthy individual should experience.

Nosodes or remedies made from the serum of a particular disease, are wonderful remedial agents and should not be neglected by homoeopaths."

(Dorothy Shepherd, M.D., More Magic of the Minimum Dose, 1946, *Scarlatinum* (Scarlet Fever Serum), p. 220-225)