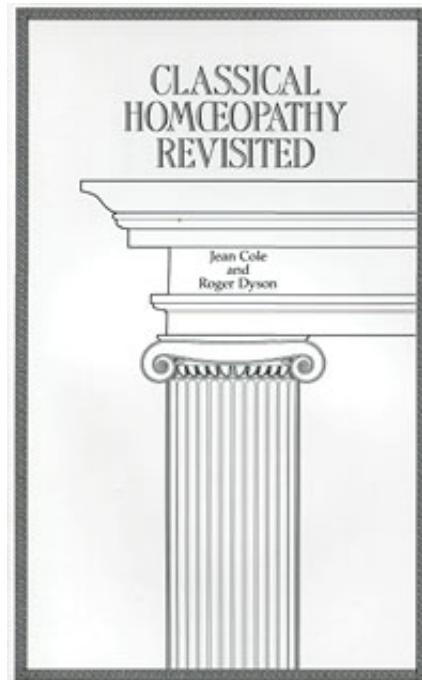


Cole / Dyson Classical Homeopathy Revisited

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CHAPTER ONE

MIASM - FACT OR FANTASY?

It is common for practitioners to pay lip service to the existence of the miasms. The philosophy of them is taught in the various colleges where homoeopaths are trained and yet often little is taught or understood about their practical application in prescribing. Even Dr Herring in his introductory remarks to the third edition of "The Organon" wrote, "What important influence can it exert whether a homoeopath adopt the theoretical opinions of Hahneman or not, so long as he holds the principal tools of the master and the materia medica of our schools? What influence can it have, whether a physician adopt or reject the psoric theory, so long as he always selects the most similar medicine possible?". Allen replies to this in "The Chronic Miasms" that such knowledge is, "the difference between an intelligent warfare and fighting in the dark" as what we can see and hear from our patients is only about some, "small fragment of a deep seated disease". According to Hahnemann we will not get the true similitum without prescribing the nosodes and deep seated miasmatic remedies.

PSORIC MIASM

Hahnemann published six editions of his work on homoeopathic philosophy - "The Organon" - the last edition being around 1834. The three later editions all incorporated considerable advances in thought and these were amplified in his book "Chronic Diseases".

Samuel Hahnemann was concerned that the way he had been previously prescribing was suppressive and too slow in obtaining results and he began to experiment with the frequent repetition and alternation of remedies, with using descending potencies and with the miasms. His use of the LM potencies came later.

Unfortunately his ideas about the miasms (literally meaning a noxious swamp) were not properly understood, so that many of his disciples denounced him and so it came into folk lore that he was getting old, senile and lazy. But as Rima Handley wrote in "A Homoeopathic Love Story", "What was the miasm theory other than an early attempt to explain why some very virulent infections are not annihilated by any drugs or treatments but only change their form or site of expression?".

Why was he thought of as being lazy? Homoeopaths today can spend a long time with a patient working out the first remedy. Sometimes they will send the patient home with a promise to post the medicine on after spending time pouring through books and interrogating the diagnostic computer to compare possible remedies. Hahnemann began to start nearly all his chronic cases with *Sulphur*, emphasising not the differences between them, but rather the common ground.

Hahnemann begins "Chronic Diseases" by saying that it was written after he had gained experience and he then goes on to confess the difficulties which he had experienced up to that time in curing deep seated conditions despite the ever growing number of medicines at his command.

He wrote that numerous circumstances often caused conditions which had been homoeopathically overcome to rear their heads again often with changed symptomatology. The symptoms would be equally or more obstinate and troublesome as before and would take the homoeopath back to his books looking for another medicine. This would be given again and once again the patient would be in a better state for a while. However the

more often this happened - and happen it did with shorter periods of respite - the less effective became the remedies regardless of potency and repetition. In the end they were hardly working as weak palliatives and the disease process continued unabated with the patient getting worse from year to year.

Hahnemann's indictment of what is often considered to be classical prescribing was that from a promising beginning the progress became less favourable and the outcome hopeless. Much time was spent by Hahnemann considering the reasons for this. He concluded that the answer was not as he had written previously that the symptoms of the patient were the only thing needing to be treated, but rather that the symptoms represented a small fragment of a deep seated disease.

This disease he labelled 'psora'; the disease of suppression, deficiency and malassimilation. He had seen the continual allopathic suppression of external skin complaints with sulphur and mercury, and had seen deterioration in people's health after this had happened. He knew how the body tried to eliminate toxins, how the skin was the largest eliminative organ of the body and how people had tried to suppress itching skin eruptions from earliest times. When talking to patients who had been slow to respond he would often find this "original itch eruption". Nash took this into account when he wrote in his materia medica, "Psorinum is also found useful in the consequences of suppressed eruptions and in such cases should never be forgotten....". ("Leaders" p289). The nutrition diseases and functional disorders together with deficiency diseases were all embraced in this great classification of disease. In this respect a cause of psora is seen as the inability of the body to assimilate the complete range of nutrients required for its preservation of health or the lack of these nutrients in the diet over a long period of time. The inability of the body to assimilate the various nutrients which are so essential to its health is in part due to emotional stresses and strains which in their turn produce the functional disorders which themselves are largely responsible for the non-assimilation of nutrient factors occurring often in such small quantities and yet without which life cannot survive.

Hahnemann wrote that gradually he discovered a better way of treating this condition, and chose to start the majority of

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his cases with *Sulphur* - his leading anti-psoric remedy to deal with this suppression. As a sulphurous volcano will erupt from the inside, so the body will try to eliminate toxins outwards causing a myriad of skin eruptions - all these are covered by the symptomatology of *Sulphur* as a remedy.

Today with the toxicity of our bodies, *Sulphur* can react quite violently in skin conditions especially, and often the remedy *Psorinum*, the nosode from scabies, can be used instead, just as effectively but with a milder action. Scabies was extremely common in Hahnemann's day but it should be noted that scabies was used as an umbrella term for skin diseases in much the same way that leprosy was used in Biblical translations.

Sulphur is not the answer to cure everyone's ills. It does however have what Catherine Coulter describes as the, "tug-boat role" of the nosodes in that it prepares the way for the similia to work more effectively and profoundly. ("Portraits of Homoeopathic Medicines", C. Coulter)

According to Hahnemann the cure of the psoric conditions can never be accomplished with *Sulphur* alone ("Chronic Diseases", p!05), a fact testified to by homoeopaths despite the strong indications for the remedy. It will stimulate vitality and start the healing process. However Hahnemann goes on to say that chronic diseases are seldom cured by a single remedy but require several remedies, "in the worst case the use of quite a number of them - one after the other, for its perfect cure". If we needed several remedies in succession for the worst cases in Hahnemann's day, how much more today when our bodies have to surmount obstacles of pollution in the atmosphere and in our food, the effects of heavy drugging, vaccinations, teeth fillings and radiation in increasing amounts?

SYCOTIC MIASM

We now turn our attention to deal with 'sycosis', which was the word Hahnemann has used to describe the constitutional effects of gonorrhoea. The word sycosis is from the Greek word meaning fig and so sycosis can alternatively be referred to as 'fig wart disease'.

From the outset we must be very clear that sycosis is not gonorrhoea. Gonorrhoea is an acute contagious disease affected by the gonococcus which takes between five and ten days for

incubation. At the end of this time the acute symptoms are manifest which, if completely cured, will never lead to the development of sycosis.

If, however, the acute stage of the disease is badly treated and the symptoms suppressed, it will then become a systemic stigma gradually involving every life cell of the organism and in this stage it can be passed from mother to child with destructive and tragic results.

The first symptoms of sycosis after suppression are often anaemia with general chronic catarrhal conditions and invariably accompanied by inflammation of the joints and muscles and lymphatic glands. Later, such diseases as Bright's, diabetes and even cancerous conditions of the breast and uterus in the female and of the prostate in the male may ensue. Usually the patient will be completely unaware of any acute venereal disease in the family history and yet we can perceive the sycotic taints of over production, excessive discharges and hyper-function.

Samuel Hahnemann was concerned with many health problems which he saw as resulting from the constitutional effects of gonorrhoea. This was a disease which was widespread and led to catarrh, effusions, growths, warts, etc. All such similar states of over function, overproduction and hyperactivity Hahnemann classed as being part of the sycotic miasm.

Some homoeopathic practitioners over the years have made life very difficult for themselves by always trying to find a specific specialised remedy for the patient. However, Hahnemann made our lives relatively simple by saying of psora, sycosis and syphilis that, "homoeopathically specific remedies for each one of these three different miasmata have in great part been discovered." Later in "Chronic Diseases" he elaborates, "The gonorrhoea dependent on the fig wart miasma, as well as the above mentioned excrescences (i.e. the whole sycosis) are cured most surely and most thoroughly through the internal use of *Thuja*, which, in this case, is homoeopathic", (page 84). There is no proviso, "if the symptoms agree". Hahnemann knew that the leaves of the thuja tree could cause and, therefore, cure the inherited symptoms of sycosis.

The story goes that a gardener consulted Hahnemann for treatment, who he wrongly diagnosed at first as having gonorrhoea. Apparently the gardener had the habit of chewing the

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leaves of the Thuja tree while going about his work and was, therefore, producing a proving of its therapeutic effects. As he stopped chewing the plant so his condition improved.

It is no coincidence that *Thuja* is the main remedy in common use for the negative and catarrhal effects of vaccination. Whatever the measure of protection of vaccinations and there are differing views on this, there is little doubt that many cases of catarrh, warts and glue ear in children emanate from the date of a vaccination showing the sycotic connection.

Allopathic medicine has little theory and philosophy of suppression, although it is a master at suppressing the immune system. For instance often a patient will tell us that an eczema suppressed by cortisone will disappear in one area only to break out again in another. Hahnemann tells us that mercury was often used by allopaths for the external destruction of syphilis, "similar excrescences then break out in other parts", (page 84).

If we go back to Hahnemann's paragraph about the use of *Thuja* we see that he says after the administration of *Thuja*, *Nitric acid* in potency should be used and alternated with the *Thuja* (page 84). *Nitric acid* is a mineral based remedy and therefore one which works deeper and continues the action of *Thuja*.

Nash in his "Leaders in Homoeopathic Therapeutics", (page 247), wrote, "*Nitric acid* is one of our most effective antidotes to the effects of allopathic dosing with mercury in syphilis. For the other bad effects of the abuse of mercury other remedies are better, notably *Hepar sulph*, *Calc carb*". *Nitric acid* is, therefore, working more deeply helping to deal with any mercurial discrasia and helping not only with warts and sycotic manifestations which the *Thuja* has left behind, but also dealing with certain destructive syphilitic tendencies which need addressing.

Another remedy which is often used today instead of *Nitric acid* is *Natrum sulph*, the mineral sodium sulphate. This is another remedy complementary to and deeper than *Thuja* in its action. It does not share such deep syphilitic tendencies but has catarrh as one of its pre-eminent features and will often deal with sinus problems left behind by *Thuja*.

The Greek homoeopath, George Vithoulkas, has spoken against using *Thuja* in fibroids in single doses in high potency as the stimulus can cause an enlargement of the fibroids. The

writers have invariably used *Thuja* for fibroids but always in descending potencies over a period of days. This way the body is able to deal gently and gradually with the problem and the symptoms of fibroids and often the growths themselves have been found to diminish.

So when we come across a predominantly sycotic case should we start with *Thuja*? Not according to Hahnemann, as all chronic disease comes from a predominantly psoric base. ("The Organon", para 80) which is the "fundamental cause".

Hahnemann states, "it is necessary first to come to the assistance of the most afflicted part, the psora, with the specific anti-psoric remedies given...., and then to make use of the remedies for sycosis." ("Chronic Diseases", page 85). The exception which we have found, is in acute sycotic conditions where giving *Psorinum* or *Sulphur* at frequent intervals does not always work but *Thuja* will produce results.

Hahnemann had a restricted knowledge of the nosode *Medorrhinum* made from the gonococcus of gonorrhoea and it was left to his followers like Kent to discover the true potential of the remedy. Kent said that, "one of the many uses of this remedy is in the inherited complaints of children".

Here follow some cases as examples of how we have treated a number of patients with sycotic symptoms to the fore. These cases will need to be read in conjunction with Appendix III to understand how we actually administer the remedies.

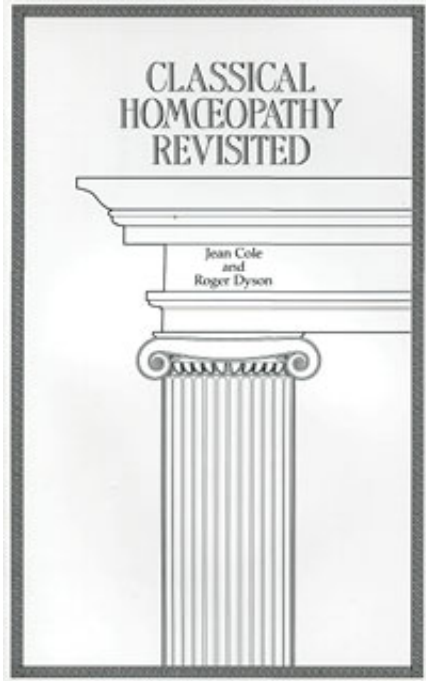
Case1

A typical cure in a case of glue ear, where catarrh and sinus problems are steeped in the family background might, therefore be:-

Week 1:

Day 1 and 2 *Psorinum* in descending potencies. *Thuja* 30
 Days 3 - 7 (am) *Herberts* 30 (pm). *Thuja* precedes
 Tuberculinum well and helps it work better.
 Berberis is used to assist drainage.

Week 2: Nil



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