

S.R. Wadia

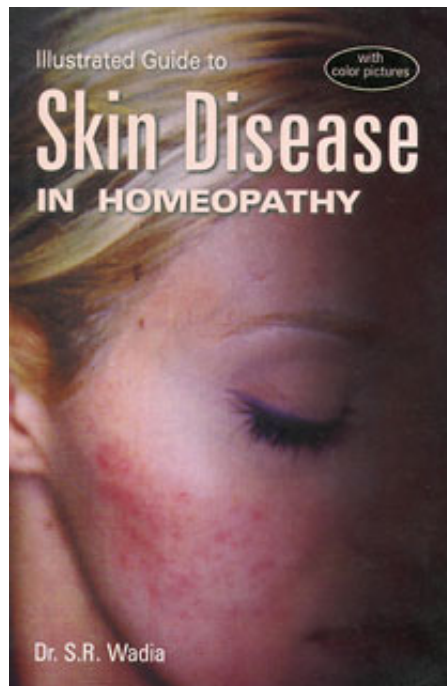
Illustrated Guide to Skin Disease

Reading excerpt

[Illustrated Guide to Skin Disease](#)

of [S.R. Wadia](#)

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relationship between their emotional conflicts and skin lesions.

- (a) The lesions are a direct somatic expression of anxiety since his psychological defences are highly inadequate.
- (b) The lesions are defence against feeling of inadequacy and failure, since they represent a physical handicap.
- (c) The lesions have a value for exhibitionistic purposes yielding some compensatory attention.
- (d) The lesions are an emotion of self-punishment for failure and guilt.

As for neurodermatitis, he states that it is two or more times common among males than females.

Strong conflicts involving the authority figure towards whom the patient feels both hostile and dependent. Often a feeling of being unfairly treated with helplessness to do anything about it may be precipitated by relatively diverse anxiety - arousing stress situations. Frequent family history of skin disease, eczema is most prevalent during childhood and again after 35.

HOW HOMOEOPATHY TREATS SKIN DISEASES

Now I shall make an attempt to explain how homoeopathy works. We shall take an example of the extremely common condition, namely bronchial asthma.

We find that a patient suffers from asthma in winter and skin disease (eczema) in summer. Many doctors must have observed this alternation of disease conditions, but most of them treat these diseases individually one after another or sometimes there is one doctor attending on his asthmatic condition while another, a skin specialist, is attending on the skin. But according to homoeopathy these are one and the same condition and not separate. One is the manifestation of allergy on the skin and the other in the respiratory organs.

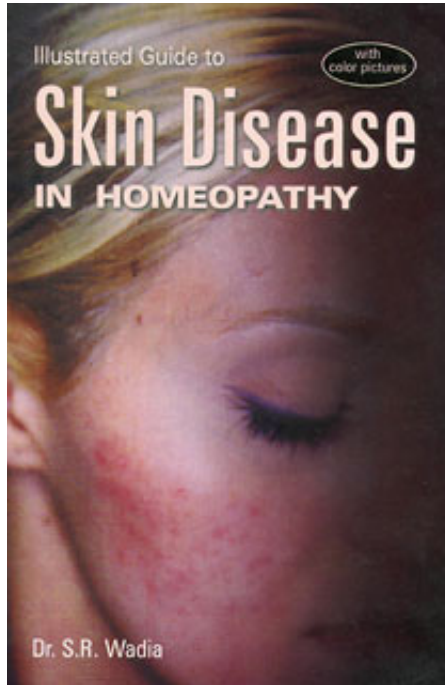
Now where is the starting point? A child has developed measles with a slight rash on the skin or an adult has developed some skin eruptions. The nearest medical man is approached who wants to put these conditions right very quickly. The child's rash disappears with quick-acting modern medicines, and the adult's skin eruptions with ointments. The child after some time develops frequent colds and cough and finally asthma. Same is the case with the adult who in next winter may go in for asthma. He probably approaches the same physician for his asthmatic fits who had put his skin right last summer. Again he receives some latest drugs to relieve him of his difficult breathing. The breathing becomes normal but he again develops skin disease next summer. This keeps on playing hide and seek for years till the patient is crippled or he accepts his lot philosophically. Here a homoeopath steps in and treats both the manifestations in such a manner that both the conditions disappear for ever. But this may take a fairly long time. This is a game of patience, and not hide and seek. The

homoeopath instructs his patients when treating chronic asthma that they should not be panicky when the old skin diseases or a few eruptions reappear during the treatment, and warns them of dangerous results if any skin ointment is used to suppress such eruptions as that will bring on asthma again if not something worse.

Given below are a few illustrative cases which will interest the medical profession as well as lay people:

1. ECZEMA ALTERNATING WITH ASTHMA :

Child aged 4, Baby F.O. was seen by me in December 1966 having asthma for the last 3 years. It was worse in winter, monsoon, by cold drinks, fruits, and in full moon. She vomited during the attack and was better after that. The first small-pox vaccination was given when the child was 2 months old, and then triple vaccine was given every month for the succeeding 3 months. This child was not keeping too well after this, and was having frequent colds and cough. At the 7th month, the child developed eczema on the head, which was suppressed with external applications, and the parents felt happy that the skin disease came to an end. After 4 months, in the monsoon, the child had the first attack of asthma, which kept on alternating with skin eruptions. After about 2 years, the child was revaccinated and skin eruptions appeared all over the body. Again a skin specialist was consulted who prescribed external application, and the eczema disappeared. In the winter of the same year, asthmatic attacks became worse. Now a child specialist was consulted who screened the child



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