

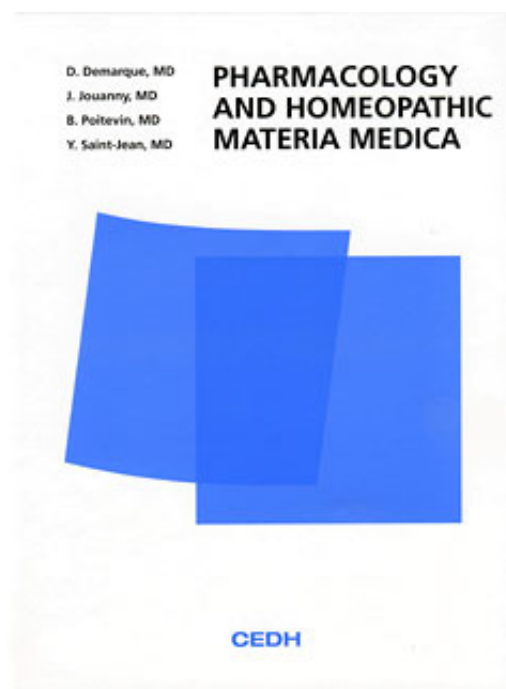
# Demarque / Jouanny / Poitevin / Saint-Jean Pharmacology and Homeopathic Materia Medica

Reading excerpt

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# ALUMINA

Aluminum oxide

$\text{Al}_2\text{O}_3$

## ORIGIN AND DESCRIPTION

*Alumina* is aluminum oxide obtained by purification of the crude ore, bauxite. It occurs as an amorphous white powder that is practically insoluble in water and alcohol. It dissolves in diluted mineral acids and alkaline hydroxide solutions.

## GENERAL ACTION

### • Toxicology

Aluminum is concentrated in the cells of the kidneys, liver, heart, brain, parathyroid glands, bones and bone marrow.

In cases of intoxication, nervous disorders are predominant (encephalopathy); the liver, parathyroid glands (decalcification), heart and hematopoietic system (anemia) are also affected.

Aluminum is also thought to play a role in senile and presenile dementia.

In 1976, Alfrey and associates\* reported the description of what is now known as "dialysis dementia". This is characterized by:

- disturbances of speech and language,
- myoclonia of the limbs and face,
- behavioral disorders: agitation, personality changes with paranoid tendencies, hallucinations, delirium,
- disturbances of memory and cognition (disorientation, state of confusion), reflected in characteristic electroencephalogram modifications, leading to
- total apraxia and non-specific dementia.

This progression may be interspersed with convulsive attacks and leads to death within 3 to 15 months.

This progressive encephalopathy of dialysis patients is of toxic origin and ascribed to the intake of aluminum, either from the use, in the dialysis fluid, of ordinary water from which traces of the metal have not been removed, or from the administration of aluminum gels to these patients as phosphate chelator.

\* Alfrey A.C., Le Gendre G.R., Kaehny W.D., "The dialysis encephalopathy syndrome : possible aluminum intoxication", *New England Journal Med.*, 1976, 294 : pp. 184-188.

These disturbances correspond to those observed in experimentation on animals as well as those found in one case of human occupational encephalopathy.

The mechanism of action would appear to lie in the interaction of the metal with certain enzymes involved in the metabolism of neurotransmitters.

In addition, pulmonary intoxication causes fibrosis. •

#### • Pharmacology

Aluminum is an ingredient of certain dental cements. It is widely used in conventional medicine in gel form, generally as an antacid or a phosphorus chelator in dialysis patients. Aluminum oxide has well-known iatrogenic effects:

- persistent constipation and, with long-term treatment,
- demineralization of the bones from phosphorus deficiency.

It should also be noted that aluminum has been used with success in conventional medicine for the prevention of silicosis.

#### • Experimentation

Following the first pathogenesis *of Alumina* by Hahnemann and published in his treatise on chronic diseases, further pathogenetic experimentation has established a more precise picture of the areas of action of this substance.

It is interesting to note that pathogenetic experimentation confirms this fundamental action *of Alumina on the cerebrospinal nervous system*.

#### Neurological, sensory and behavioral symptoms

These indicate a general paretic tendency:

- unsteady, tottering gait,
- progressive paralysis of the limbs,
- sluggish micturition,
- in particular, **intestinal paresis** leading to **constipation** characterized by **rectal inertia**: the stool, even when soft, is only expelled after prolonged effort (see *Nux moschata*).

They also include:

- sensory disturbances (giddiness, decreased vision),
- mood and behavioral disturbances (nervousness, rushed behavior),
- disturbances of memory and ideation, indecision.

In addition, pathogenetic experimentation and clinical observation both confirm the action of *Alumina on the skin and mucous membranes, causing dryness*.

#### Cutaneous symptoms

- Absence of perspiration.
- Skin surface is dry, rough, wrinkled, sometimes chapped (hands) with pruritus aggravated by bed warmth.

#### Mucosal symptoms

- Absence of lacrimal secretion.
- Chapped lips.
- Dry mouth on waking.
- Dry pharynx, which appears glossy, with sticky, viscous mucus, prompting coughing and clearing of the throat.

Exceptionally, there may be abundant, acidic, irritant, pruritic leukorrhea of the vaginal mucosa.

## CHARACTERISTICS

### • **A - Sensations**

- Intense general weakness with tremor and dizziness.
- **Sensation of general dryness of the mucous membranes** (nasal, pharyngeal, laryngeal, ocular, anal, genital).
- Sensation of a splinter of wood or a fish bone lodged in the throat.
- **Sensation of tight facial skin**, as if covered with dried egg-white or by a spider's web.
- Sensation of a raw wound in the rectum.
- Compressive headache, as if wearing a hat that is too tight.

### • **B - Modalities**

#### Aggravation

- from cold,
- in the morning on rising (mental symptoms).

#### Improvement

- in the open air (but warmly clothed),
- from hot drinks (throat).

### • **C - Concomitant symptoms**

- Disturbances of memory and ideation: mental confusion, "makes mistakes when speaking or writing".
- Rushed but inefficient behavior: "has the impression that time passes too slowly, that nothing happens fast enough".
- Desire for fruit and vegetables.
- Aversion for meat or potatoes.

## SENSITIVE TYPE

This medicine often concerns prematurely-aged individuals who are thin, dry and wrinkled. The appearance of *Alumina* symptoms in young children, with the characteristic dry skin and constipation, could be due, according to certain authors including Foubister, to cooking food in aluminum pans.

They display rushed behavior, which contrasts with a habitual slowness of actual execution, they are confused and indecisive, impressionable, in particular affected by "the sight of blood and sharp instruments". In this phobia reported by certain authors, as with all phobias reported in various manuals of materia medica for other medicines, it is difficult to assert that the symptom is related to the direct pharmacodynamic action of the substance.

## MAIN CLINICAL INDICATIONS AND PRESCRIPTION

### 1 - Gastroenterology

- **Constipation from rectal inertia**, anal fissures of constipated subjects.

Prescribe a low dilution (5C), five pellets once or twice a day.

**Example:** *Alumina 5C*, five pellets morning and evening for two months.

### 2 - Dermatology

- Lichenoid eczema, lichen planus.
- Prevention of local and muscular reactions attributed to vaccines containing aluminum hydroxide.

Prescribe a low (5C), a medium (7 or 9C) or a high (15C) dilution, depending on the degree of similarity, once or twice a day.

**Example:** *Alumina 9C*, five pellets daily for three months

### 3 - Ophthalmology

- Dry eye syndrome, whatever the origin: menopause, prolonged exposure to air conditioning, Sjogren's disease (*Belladonna*, *Bryonia alba*, *Nux moschata*), etc.
- Intolerance to contact lenses due to dryness of the conjunctiva.

Prescribe a low (5C), a medium (7 or 9C) or a high (15C) dilution, depending on the degree of similarity, twice a day over long periods.

*Example: Alumina 9C*, five pellets morning and evening for six months.

#### **4 - Behavioral disorders**

The onset of senility manifested by sensory (dizziness) and memory disorders (disorientation, confusion of words and forgetfulness).

Prescribe a high dilution (15 or 30C), five pellets a day.

*Example: Alumina 15C*, five pellets daily for six months.

## **AMBRA GRISEA**

*Physeter macrocephalus* L  
Ambergris (cachalot)  
Cetacea

### **ORIGIN AND DESCRIPTION**

*Ambra grisea* is one of the medicines derived from animal secretions, along with *Sepia officinalis*, *Moschus*, *Lac caninum*, etc.

Ambergris is a concretion from the digestive tract of the sperm whale. After floating in warm seas, these concretions form gray, porous, spherical lumps, of low density, with a pleasant odor when dry.

The mother tincture is prepared from the dried concretions (ambergris).

This product, which may correspond to a biliary secretion, is rich in active principles: •ambrein (25 to 85%),

- epicoprosterol (15 to 40%),
- benzoic acid,
- traces of cholesterol and dihydrocholesterol.

## VIPERA REDI

*Vipera aspis* L.  
(= *Coluber aspis* L)  
Asp  
Viperidae

### ORIGIN AND DESCRIPTION

This viper is 75 cm long and has a very triangular head; it is a common species in southern Europe. The part used is the venom, called *Vipera redi* (or *redii*, after the Italian physician who studied the action of this venom in the 17<sup>th</sup> century).

The main active principles of *Vipera aspis* are:

- mineral substances present in various snake venoms;
- carbohydrates, lipids, amines (serotonin);
- enzymes:
  - phospholipases, which attack cellular membranes,
  - procoagulant enzymes, factor V and X activators,
  - hyaluronidases, phosphodiesterases, oxydoreductases;
- a hemolytic and coagulant toxin.

### GENERAL ACTION

In accordance with data from toxicology and clinical experience, the action of *Vipera redi* principally concerns:

- » **the blood**, where it causes disturbances of hemostasis with ecchymoses and hemorrhages;
- **the veins**, where it causes reactions of **inflammatory edema** and disturbances of coagulation similar to those associated with superficial phlebitis, for which it is the principal homeopathic medicine.

### CHARACTERISTICS

- A - Sensations
  - **Bursting pains in veins** that are dilated and resemble hard rope.
  - Pain in the areas around the veins, with edema.

- B - Modalities

Aggravation

- when letting the legs dangle (*Pulsatilla*),
- when getting up from a lying position.

Improvement

- from keeping the **legs raised**.

- C - Concomitant symptoms

- Ecchymoses, purpura.
- Moderate thermal reaction.
- Lymphangitis and adenopathy.

## MAIN CLINICAL INDICATIONS AND PRESCRIPTION

- Phlebology

- **Phlebitis of the superficial veins** and periphlebitis, after having studied the etiology to eliminate thrombophlebitis or phlebothrombosis.

Prescribe a medium (7 or 9C) or a high (15C) dilution depending on the degree of similarity, five pellets two to six times a day, depending on the acuteness of the case.

*Example: Vipera redi 75C*, five pellets every four hours; gradually increase interval between doses as symptoms become less intense. Treatment for seven days.

This medicine is often combined with *Arnica montana* and *Apis mellifica*.

- Symptoms related to venolymphatic insufficiency: varicose veins, varicosities, **feeling of heaviness in the legs**; venolymphatic insufficiency during pregnancy.
- Purpura, ecchymoses, petechiae.

Prescribe a low (5C) or medium (7C) dilution, five pellets two or three times a day.

*Example: Vipera redi 5C*, five pellets morning and evening for three months.





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