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## Spectrum of Homeopathy 2011-3, ACUTE

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# SCOURGE OF HUMANKIND

Phosphorus as the genus epidemicus for the outbreak of cholera in Haiti.

AUTHOR | Edouard Broussalian

**SUMMARY:** The author describes his experience with the homeopathic treatment of cholera at a hospital in Port au Prince. The genus epidemicus proved exceptionally useful: after a dose of Phosphorus 200C, administered with a spray, the condition of most patients improved rapidly and their hospital stay was greatly shortened.

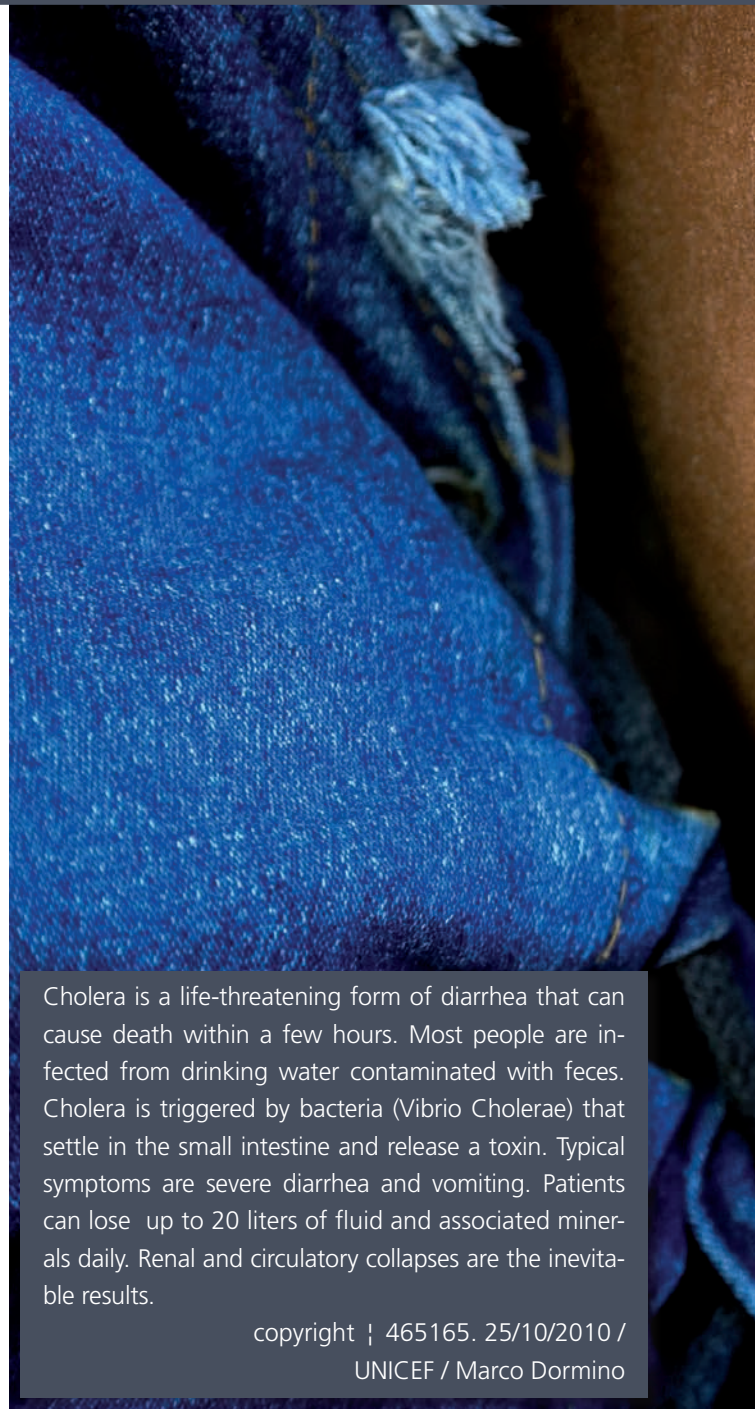
**KEY CONCEPTS:** Cholera, Cuprum, epidemic, genus epidemicus, Phosphorus, key symptoms, Veratrum, *Vibrio cholerae*

Cholera, the archetypal acute epidemic disease, is firmly anchored in humankind's collective consciousness as a truly dreadful scourge. Until the introduction of parenteral rehydration, mortality remained high, hence the French expression "to have the choice between pest and cholera" – in other words, between two equally dreadful alternatives. During the epidemics of the 19<sup>th</sup> century, the conventional medical treatment of the time – frequently based on opium in an attempt to staunch the diarrhea – led to death rates of up to 40%.

Adolph Lippe (1812–1888), in an inspiring lecture titled "Asiatic Cholera" on December 8, 1885 given to the Homeopathic Medical College of Pennsylvania, demonstrated his extensive knowledge on the topics of infection and mentioned the statistics of his time.<sup>1</sup>

He had collected the results from a large number of American physicians, coming to the conclusion that the mortality rate with homeopathic treatment was around 5% – although he himself had not lost a single patient. Precisely due to its tremendous successes in the treatment of epidemics, such as measles, cholera, lung infections, and typhoid fever, homeopathy had right from the start been making a name for itself and was enthusiastically welcomed by large numbers of people.

Cholera in particular had made Hahnemann and homeopathy famous in a similar way to the practical confirmation of Newton's



Cholera is a life-threatening form of diarrhea that can cause death within a few hours. Most people are infected from drinking water contaminated with feces. Cholera is triggered by bacteria (*Vibrio Cholerae*) that settle in the small intestine and release a toxin. Typical symptoms are severe diarrhea and vomiting. Patients can lose up to 20 liters of fluid and associated minerals daily. Renal and circulatory collapses are the inevitable results.

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theory of gravitation when Neptune was discovered by Le Verrier and Adams, solely based on the perturbations of the orbit of Uranus. Without needing to see a single case, just the clinical description of the Asian plague at the gateway to Europe was sufficient for the master to identify Camphora, Cuprum, and Veratrum as the most important indicated remedies. The result was that in France, for example, camphor was soon in short supply. Homeopathy triggered a veritable earthquake and conventional medicine tried everything possible to suppress it. Against this backdrop, we can better understand the reply by the French Prime Minister Guizot to the gentlemen of the academy of medicine, who were demanding that homeopathy be banned: "My dear gentlemen, Dr. Hahnemann is a most learned man of great merit. It does not befit me to obstruct patients from seeking a method of treatment that, should it prove to be of no benefit, will die out of its own accord."

#### THE ACUTE SITUATION IN HAITI

With the weight of this profound tradition on our shoulders, we set off for Haiti in 2011, in an attempt to put our medicine to the test, to at least try to alleviate the suffering in a land where almost everything was in short supply. I had already traveled to Port au Prince in spring of the previous year, immediately after the great earthquake that cost 200,000 lives. With a small team including Catherine Mayer and my old friend Kaviraj, the great master of plant homeopathy, we treated over one hundred people a day, on

Poverty and catastrophic conditions in the flooded area promoted the spread of cholera. Haiti is the poorest land in the Western hemisphere. Of the approximately ten million inhabitants, 80% live on less than 2 US dollars a day. More than two thirds of the working-age population have no regular work and half the population is undernourished.

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the street under the shade of a plane tree. During the first morning, the patients initially waited cautiously with stony faces but then they started coming in large numbers, after word of the first spectacular results had spread.

We often hear the adjective "spectacular" in connection with homeopathy. All of us who take the trouble to follow the path laid out by the founder are fortunate enough to experience a prompt, mild, and enduring cure.

The fact is that a consultation should never last longer than half an hour, including for chronic complaints. The trained eye of the practitioner should be able to rapidly spot the characteristic sign (*Organon* § 153), which then enables him or her to find the similimum from a limited number of remedies. Variants of this so-called "bottom-up" method have been used by all great homeopaths.

## UNICEF REPORT 2011

## Children in Haiti – One Year After – the long road from relief to recovery

“Children in Haiti are still reeling from the lingering impact of the 12 January earthquake.” This is the result of the UNICEF report presented in January 2011 on the first anniversary of the tragic event. One of the biggest emergency operations ever by UNICEF and their partners saw hundreds of thousands of families being provided with the essentials for survival.

The report details how, at the height of the devastation in 2010, around 680,000 people were provided with daily supplies of clean drinking water, 95,000 children were looked after in 369 special child-friendly spaces, around 5,000 unaccompanied children were registered, and 1,265 of them could be reunited with parents or relatives.

The report points out that the earthquake exposed the dramatic social problems in one of the poorest countries of the world: inadequate state structures, political instability, and the (continuing) cholera epidemic complicated the aid efforts and the task of rebuilding. Over one million homeless people are still living in overfilled temporary centers – including approximately 380,000 children. Haiti is now in a decisive phase. The transition from emergency aid to long-term rebuilding measures needs to be mastered. UNICEF is doing all it can to strengthen the ability of government and local administration and institutions to cope with the tremendous challenges still facing children.

UNICEF on Haiti: [unicef.org/infobycountry/haiti.html](http://unicef.org/infobycountry/haiti.html)  
 Donate to UNICEF for Haiti: [tinyurl.com/donate-unicef-haiti](http://tinyurl.com/donate-unicef-haiti)

Even Kent, with such a comprehensive section on mind symptoms in his repertory, shows in numerous clinical cases in his *Lesser Writings* that he proceeded in a similar way – we would do well to recall that his outpatients clinic in Chicago, separate from his private practice and his teaching practice, treated 20,000 patients a year! Kent gives the example of a patient with

a prolapsed uterus, in which he identifies a very pronounced modality: the complaints improve when the legs are crossed. Then he uses the mind symptoms to make the choice between *Lilium tigrinum* and *Rumex* on the one hand and *Sepia* on the other. This is exactly what we did to quickly track down the genus epidemicus.

## REPERTORIZATION

**HEAT:** aesc., *agar.*, *alum-m.*, *alumn.*, *apis.*, *ars.*, *asaf.*, *aur.*, *bar-c.*, *berb.*, *calc.*, *calc-s.*, *camph.*, *carb-v.*, *carl.*, *cham.*, *chin.*, *coff.*, *con.*, *dig.*, *dulc.*, *gels.*, *glon.*, *hell.*, *helon.*, *hyos.*, *laur.*, *led.*, *lob-s.*, *lyc.*, *med.*, *meny.*, *merc.*, *nat-c.*, *nat-m.*, *ol-an.*, *op.*, *par.*, *ph-ac.*, *phos.*, *pic-ac.*, *plb.*, *rhus-v.*, *sars.*, *sil.*, *sol-n.*, *spig.*, *stann.*, *staph.*, *sulph.*, *sumb.*, *verat.*, *zinc.*

I was thereby able to confirm my initial impression that Phosphorus was clearly the best fit. There was further confirmation when I asked the patient where exactly he felt the heat in his back: he was able to twist round and point to the area between his shoulder blades.

**Dorsal region:** *merc.*, *phos.*, *pic-ac.*  
**Scapulae:** *Chel.*, *Mur-ac.*  
**between:** *Arg-n.*, *LYC.*, *Naja.*, *Phos.*, *Pic-ac.*

The indicated remedy was undoubtedly *Phosphorus*. To be on the safe side, we took a little more time to confirm this choice by searching for more general signs:

“What is the worst time of day for the complaints?” In response to this question, the patient spontaneously replied, “in the evening, as soon as night falls.”

twilight, agg: *am-m.*, *ars.*, *berb.*<sup>3</sup>, *calc.*, *caust.*, *dig.*, *nat-m.*, *Nat-s.*<sup>3</sup>, *phos.*, *plat.*<sup>3</sup>, *plb.*, *puls.*, *rhus-t.*, *staph.*, *sul-ac.*, *valer.*

## THE GENUS EPIDEMICUS FOR CHOLERA IN HAITI

Thanks to Dr. Jean Marie Caidor (director of the Hôpital Saint François de Sales) and Dr. Thomas Hans-Muller, we were allowed to see the cholera cases. The epidemic of February 2011 was already on the wane or rather, thanks to the establishment of a wide network of cholera treatment centers, had begun to stabilize everywhere.

On average, patients stayed in hospital for 6 to 8 days before they were able to return home. They were treated with an infusion and were lying on simple plastic mats with a hole in the bottom to allow the excretion of the stool directly into a large bucket, so that they did not have to get up. They were able to vomit into another large container at the head of the bed. Hahnemann writes in the *Organon*:

§ 101. – *It may well be that the physician does not get a perception of the complete image of the epidemic disease with the first case he encounters since each such collective disease only brings the complex of its symptoms to the light of day with the closer observation of several cases. Meanwhile, the carefully investigating physician can often come so close to the true state, even with the first or second patient, that he becomes alive to the characteristic image of the disease, and then finds a fitting, homeopathically commensurate remedy for it.*

An initial inspection of the patients showed large amounts of watery vomit and watery stool. They did not look like the classic “rice-water” of cholera, but there were numerous whitish, flaky, floating particles with unclear borders in the fluid, which immediately made me think of “lumps of fat” – something I could hope to find in the materia medica. Apart from this, since all patients from the start of the illness experienced an intense thirst for water as cold as possible, a first candidate for the epidemic remedy came to mind.

Not allowing myself to be influenced by these preliminary observations, I proceeded to examine the first patient. The patient had just been brought to hospital. Vomiting and diarrhea had started the previous day. While rapidly losing strength, he had great thirst for cold water. It was striking in this case, as in all other cases, that his general condition deteriorated so rapidly, and also that there were no cramps or severe pain. The minimal pain level made it possible to exclude Cuprum and Veratrum in the treatment of this illness.

It is good practice in acute cases to ask whether the patient feels warm or cold. Cholera cases never show fever but this patient spontaneously complained of feeling hot. As always in homeopathy, we need to refine the symptom, characterizing it more precisely in order to make it usable. Location, sensation, modality, accompanying symptoms, the impression made by the patient – these are the key issues we need to pay attention to. In this case, the patient made it clear that he was feeling heat on his back.

“Would you like to be left in peace or do you prefer someone to stay with you?” After a brief pause of astonishment, the patient pointed to his mother and said, “in the evening, especially, I’d like her to be here.”

What more do we need to prescribe *Phosphorus*? On the advice of Kaviraj, who had much experience with “mass treatments” in India, we had prepared several remedies in the form of a water-alcohol spray, so the patients just needed to open their mouths for a quick spray of *Phosphorus 200C*. The remedy was immediately

## IMPORTED EPIDEMIC

In January 2010, a severe earthquake shook the island of Hispaniola. Well over 200,000 people died. Ten months later Haiti was gripped by an outbreak of cholera. The Haitians quickly pointed the finger at the Nepalese soldiers of MINUSTAH, the United Nations Stabilization Mission in Haiti, accusing them of transmitting the infectious agent *Vibrio cholerae* to the local population. The disease had previously not been seen for decades on the Caribbean island. An independent United Nations scientific commission of inquiry confirmed this suspicion in spring 2011.

According to their report, the bacterial strain – unknown till this time – did in fact enter the River Artibonite and its tributaries from the sewage discharged by a UN camp in Mirebalais. Most probably, the bacteria were flushed downstream towards the coast, where the epidemic rapidly took hold, spreading at lightning speed. The River Artibonite plays a central role in the lives of local people. They bathe, wash their clothes, irrigate their fields, and let their children play in it, but above all, the Haitians drink the river water.

Rumors that the sewage from the peacekeeping force in Mirebalais was tipped raw into the river have not been proved. Yet, the waste disposal company, which also transported waste from the troops to Hinche and Terre Rouge, used an insecure cesspit close to Mirebalais, where children play – and from which strong rains wash the sewage into the tributaries of the Artibonite.

Enserink, M. “Cholera Linked to U.N. Forces, But Questions Remain” *Science*, (13 May 2011): 776-777. See [tinyurl.com/cholera-haiti-un](http://tinyurl.com/cholera-haiti-un)

absorbed by the large area of mucous membrane, which clearly increased its effect. In most cases, this was enough for the patient to recover completely.

### PHOSPHORUS, PHOSPHORUS, AND PHOSPHORUS AGAIN

The cases quickly become monotonous when the genus epidemicus presents itself with such clarity. But the surprising thing is that each patient develops their own Phosphorus picture, depending on their individual constitution.

#### The common signs that we found in all patients were:

Debilitation, vomiting, diarrhea, thirst for large amounts of very cold water, worse evenings, desire for company.

#### Yet, each case showed new key symptoms of Phosphorus, as shown by the following examples:

Case 1: Heat in the back, like an electric current, rising to the crown of the head

Case 2: Stomach pain extending across abdomen

Case 3: Pronounced restlessness: a young woman casts her clothes off, fully exposing her upper body – an exceptionally rare event in a country where people are very modest

Case 4: Pronounced yellowing of the eyes, yellow tongue, liver

Case 5: Gaunt old woman, speaking unintelligibly

### SUMMARY

Phosphorus healed most cases within 6 to 12 hours, with a repetition of the remedy in some cases. The results were striking, with many patients sitting up in bed shortly after taking the remedy. Only the older patients needed a little longer before they could get up.

Within one hour of taking the remedy, pain and other complaints were reduced, followed by an improvement in the vomiting and diarrhea. The patients asked for food and their general condition improved rapidly. At the end of our stay, we were no longer providing new patients with an infusion, but immediately gave them the Phosphorus spray.

The most astonishing thing of all, however, was the Haitian doctors' reactions. In contrast to their Western colleagues, who often prefer to look the other way despite such clear evidence of efficacy, demanding further "proof," our Haitian colleagues rapidly recognized the value of homeopathy and expressed a strong desire to learn more about it.

Our brief experience in Haiti (which needs to be developed further in a more rigorous way) shows in our estimation the superiority of homeopathy even in severe infectious disease, and demonstrates that it can be very easily and effectively put to use – assuming that Hahnemann's teaching has been truly understood.



EDOUARD BROUSSALIAN

is the heir of a long homeopathic tradition. He studied with his father, who himself was a pupil of Pierre Schmidt. As the translator of Kent's Repertory into French, he began to update and disseminate the work of the great American homeopath in 1991. He has been practicing in Geneva for the last twenty years.

He has worked in many countries as a homeopathic physician to help the poorest of the poor, including Africa, Madagascar, and Haiti.

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<sup>1</sup> Adolph Lippe, far ahead of his time, was of the following opinion:

The popular mind is prone to inquire about the existence of certain things or entities, rather than their quantitative relations; it asks, is there infection in this disease or in that? It does not think to inquire whether there is more or less infecting power; it does not suspect that this is the only difference in many diseases with regard to their power of propagating themselves.

The problem, in regard to the infectiousness of cholera, is of a similar nature, and is to be solved by a reference to precisely the same three conditions, viz., dilution, quantity, and susceptibility.

That which in a more concentrated state was a poison becomes comparatively innocuous by dilution. If we admit the possibility of taking the cholera under these last circumstances; if we say that, even in a well-ventilated room, cholera may, to some persons, prove infectious, the statement is liable to be misunderstood and misapplied. One might then say that cholera is infectious like the smallpox. This would be a gross exaggeration.

The miasm of the smallpox is one that operates in a much more diluted state than that of cholera, and requires no peculiar susceptibility, except that naturally possessed by persons who have not been vaccinated.

The medical mind – perhaps from a deficiency of mathematical training – is extensively infected with this same intellectual vice. Physicians, instead of recognizing degrees of the infecting power, generally found their distinction on modes and media of transmission. ...

To inquire whether Asiatic cholera is infectious is like asking whether diluted alcohol is an intoxicating drink... One part of alcohol diluted with one hundred parts of water is not an intoxicating drink, unless taken in enormous quantities, or by persons highly susceptible; one part of alcohol diluted with two parts of water, if taken in quantity, is an intoxicating drink, the result depending on the susceptibility of the person.



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