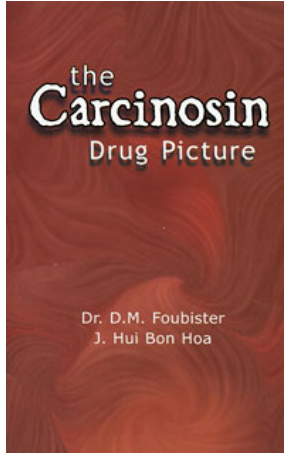


Donald Foubister The Carcinosis Drug Picture

Reading excerpt
[The Carcinosis Drug Picture](#)
of [Donald Foubister](#)
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THE CARCINOSIN DRUG PICTURE

According to homoeopathic philosophy, organic disease is an ultimate, the result of preceding changes in the vitality of the patient which are manifested by functional changes and subjective symptoms. It is generally accepted that organic disease may be foreshadowed by functional changes.¹ It is these symptoms of disordered vitality which have to be matched in selecting a constitutional remedy with the object of correcting the underlying disharmony.

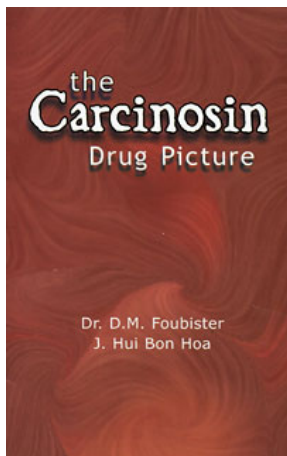
There is perhaps a tendency to regard nosodes representing the ultimates in disease as being comparatively superficial in their action. Yet the well-proved nosodes such as *Tuberculinum*, and *Medorrhinum* are undoubtedly among the most deeply acting and valuable medicines in the materia medica. *It may be that nosodes carry in them in their potentized state something of the nature of the preceding deranged vitality.* After six years' study of *Carcinosin* that is my impression and its profound action may possibly be explained in this way. Kent believed cancer to be the result of suppressed psora and it is of interest to note that in some cases responding to *Carcinosin*, indications for *Psorinum* and other antipsorics not previously evident came to light. In a few cases the symptom of *Psorinum* "feels specially well before an attack" was uncovered only after previous benefit from *Carcinosin*.

which is the real basis of prescribing is built up from provings plus clinical experience.

It has been noted that only a small proportion of provers are sufficiently sensitive to any substance to bring out anything like its full effects, those presumably having an idiosyncrasy to the drug being tested.⁴ In studying the therapeutic effects of a homoeopathic remedy one cannot escape the conclusion that anyone benefiting from a drug in high potency must also have been sensitive to it. A more careful study of therapeutic effects would in my view enrich the materia medica. Disease in fact tends to increase sensitivity to the appropriate remedy even in the physiological use of drugs.⁵

It soon became apparent that children of what we came to regard as the "*Carcinosin* appearance" did not show the kind of family history we had almost expected to find. In many instances there was a strong family history of cancer, but in others there was a strong family history of tuberculosis, of diabetes and pernicious anaemia, or a combination of all these more strongly represented than in the average family; only occasionally there was no such history. It would, of course, require a great deal of research to prove this.

Gradually we gained the impression that in addition to the "*Carcinosin* appearance" and a tendency to insomnia even in young children there was a tendency to have an inflammatory illness, usually a whooping cough or pneumonia, very early in life, and therefore almost severely. For instance, whooping cough at five months fits into the *Carcinosin* picture. If, for the sake of argument, we accept McDonagh's concept that there are two basic diseases, inflammation and tumour formation, also the teaching of Rudolf Steiner, then it might not be too far



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