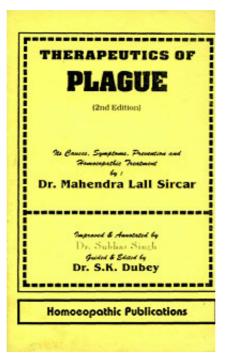
Mahenrda Lall Sircar Therapeutics of Plague

Reading excerpt

Therapeutics of Plague of Mahenrda Lall Sircar

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INTRODUCTION:

Plague is not only a pathological nome but also conveys an aura aiith it of a kind of dead caim, a sickly, putrid sense of degeneration. Plague, the mord itself has become a symbol of horrors of death. UUhen plague strikes death paces calmly and silently in the filthy and deserted streets but the echoes of death can be heard long after the disease has passed over the area. While other disease cause fear it strikes terror. There is no protection from piague. It affects all uuithout any difference to caste and creed, rich or poor. Death does not discriminate. Plague does seldom. Piogue is an individual and community disease. It is a physical, spiritual, social and a political problem.

Plague has always become a cause of widespread panic whenever cases of plague are reported. Greater and faster media of todays communication give wings to the fear, panic and worst of all rumour.

Similar was the effect when Dr. R.G. Viegas¹ a physician and a member of the Bombay Municipal Standing Committee, drew the attention of the house to the cases of Bubonic piague in the Mandvi section of the Port Trust Estate. His announcement on 24th September 1896 was like dropping a bomsheii on the floor of the city hall. Plague had attacked young people mostly and the ensuing fear was so great that many had abandoned their homes. This helped a lot in spreading the disease. UUord- of -mouth -accounts converted into horror stories. In one week only, 10,000 persons Red Bombay. It is estimated that at the time of the greatest alarm, out of the normal, population of 900,000 there were not more than 400,00 people left in the place.

As the disease could not be checked on SOS was sent to Dr. Waldemar Mordecau UJolff Haffkine in Calcutta (where he was working on Cholera) Dr. Haffkine, who was already working on the history of plague bacillus, came immediately to Bombay (he arrived in Bombay on October 7th 1896), when Govt. of India commissioned him to investigate the Bombay epidemic. It was in the Petit Laboratory of the Grant Medical College with a meagre staff of a clerk and three peons that Dr. Haffkine invented piague vaccine and on January 10th 1897 tested the vaccine on himself.

1. Dr. A. G. Viegas, worked tirelessly, day and night during the epidemic of Plague in Bombay. As a gesture of respect, his statue was erected at Dhobi Talao, Bombay and it is still there—a mark of gratitude of a grateful nation.

Soon news of his invention spread to the world and scientists from ail over the world poured in to Bombay to witness the efficacy of Dr. Haffkine's techniques. R German delegation also came and was headed by none other than famous Dr. Robert Koch who was later awarded Nobel Prize in medicine. Dr. Koch was so impressed by Dr. Haffkine's work that he stayed for a year in Bombay, assessing, evaluating and encouraging the yuonger man's work. Though the epidemic was checked at that time but Piague has not vanished from the face of earth unlike Smallpox for example. There has been a gradual increase since 1960 with a recent resurgence (1972-1975) in various continent. UJorld wide there were a total of 2737 cases reported in 1974 (including eight in USH) with 164 deaths, in 1977 there were 18 reported cases in US.

There were a lot of vibrations when the first case of plague was reported in the Seed district of Maharashtra this year. Things were being sorted out but at a leisurely pace. UUhen the news of death in Surat (Gujrat) due to Pneuonic Plague was flashed in newspapers, television and radio bulletiens, people were struck with terror. Panic and anxiety spread like jungle fire. There were much hectic activities in ail comers. Government officials started running from posts to pillars and to post again. Plague as a medical subject had lost its importance in the decades gone by. It was of only on academic matter in medical classes. Current books were opened to find that plague has not been discussed properly. (Even the latest and standard book did not offer much on the subject. In the ensuing fears some physicians and surgeons of Surat pulled down the shutters of their clinics and moved away to safer places. The Epidemic Disease Ret was evoked by Maharashtra Government to make it mandatory for the persons from Plague affected Surat to undergo medical check up while entering Maharashtra and it will be binding on ths medical practitioners to inform the government about the cases of plague treated by them. It was in this atmosphere of confusion that Tetracycline came as a rescue (soon to be proved the worst of iatrogenic curses). Unbelievable amounts of Tetracyciine (which has its own quota of life endangering side effects) were poured in the infected areas. Suffering and terror stricken masses were given large doses of tetracycline for curative as well as prophylactic purpose. People at large, once they knew the name of medicine started gulping

tetracydine religiously with the hope that this will save them from plague. Repeated warnings from the Health Departments about the inefficiency of Tetracycline as a preventive was overlooked and ignored.

Large quantities of fIntiplague vaccine ujere distributed by the Government. It is to be noted that the Haffkine Bio-Pharmaceutical Corporation Limited is the only manufacturer of this vaccine in Inida (This vaccine was first developed in India by Dr. ULJ.M. Haffkine in 1897). Iilhen they could not cope with the demand, a large contigency of fInti-Plague Vaccine aias imported from Russia especially for immunising doctors, health workers, police and army men working in plague affected area. Though the need for development of vaccine based on recent cultures and not one on existing since 1950.

The role of homoeopathy, as a medical science, at this time of national crisis, panic and confusion was not one of demanding respect. Homoeopathy has made its respectable place because of its miraculous curative and preventive action in the previous epidemics of plague, cholera, typhoid and scarlet fever. But the silence of the profession in this emergency was pathetic.

The only noteworthy and authenitic work in this field was done under the guidance of Dr. flrun Bhasme, Principal Sonajirao Kshirsagar Homoeopathic Medical College and Hospital. He conducted a thorough survey of the Beed town, its suburbs and neighbouring villages with the help of his undergraduate and post graduate students. Cases (of confirmed cases of plague) were taken and case histories recorded by three Post graduate students. Dr. Tambe Shausaheb J, Dr. flrindam Dutta and this presnet writer, Dr. Subhas Singh, under the guidance and strict vigilance of Dr. P. LUadgaonkar, Vice Principal and Dr. Rrun Bhasme, Principal of S.J.K. Homoeopathic Medical College, Seed. Later, on the basis of these case-histories. Genus C-pidemicus² was found which was distributed free of cost from the outdoor section of the hospital of the institution, I must say this without fear of being blamed for being biased or self propagating that this was the

2. Anyone having any queries whatsover or interested in the details of the above mentioned work may write to:

Plague Research Committee C/o. Dr. Arun Bhasme, Principal Sonajirao Kshirsagar Homoeopathic Medical College Beed-431 192. (M.S.)

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Excerpt from Mahendra Lall Sircar: Therapeutics of Plague

only practical oriented and on-field work done by homoeopaths in Surot or Seed or any place aihere epidemic of Plague had cast its deathly shadow.

UJe all felt the necessity of a help booh from which to start.

It was during by uuork on Plague that I came across, this piece of uuork done by Dr. Mahendra Lall Sircar. The book though old but invaluable. Initially I intended to have it reprinted as it was. But then I found that at some places informations were somewhat out-dated. So, I had to dare to do some editing and furnish some newer informations on the subject. But, I have printed the original book as it was, keeping in mind its historical importance. UJhatever additions or editions have been done, has been done in the form of **Footnote** and in a separate section of the book included as the **"Addenda"** in the last part of the book.

If this book could be of any little help to the physicians, teachers and students it would then serve its purpose. I only wanted our fraternity to know that homoeopathy had been and what are its uses and successes in epidemics of Plague. This book will surely give us more confident when treating cases of plague or God forbid, another epidemic of plague.

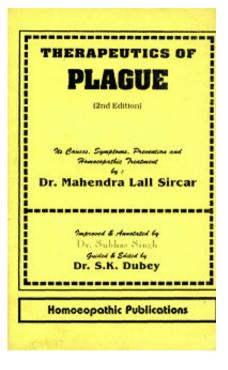
Though no comments or suggestions are expected on the part written by Dr. Sircar but I will sincerely be encouraged to be corrected where ever there is any error. I do anticipate and request suggestions and corrections which will be accommodated in the coming editions of which if worth, I am afraid, may be more than one.

Long live Homoeopathy.

Beed Subhas Singh 18.9.94

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