

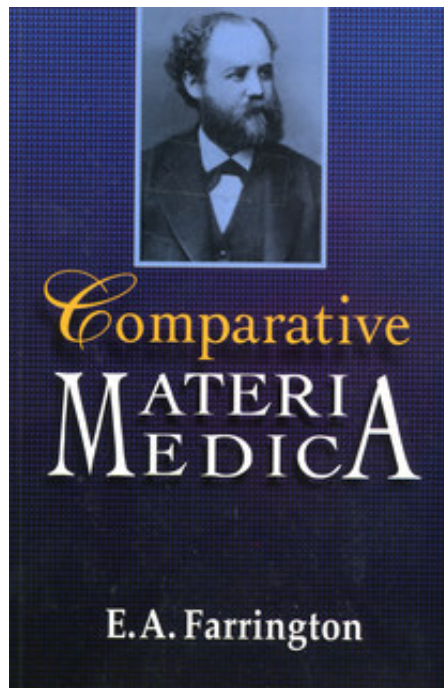
Ernest Albert Farrington Comparative Materia Medica

Leseprobe

[Comparative Materia Medica](#)

von [Ernest Albert Farrington](#)

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Tel. +49 7626 9749 700
Email info@narayana-verlag.de
<https://www.narayana-verlag.de>



Introduction

It is not always, in the present state of our knowledge, that we can give absolute, characteristic contrasts.

It is easy to differentiate where remedies diverge ; but difficult to nicely discriminate where similar remedies converge, until their symptoms are almost identical; and yet, just here individualization is most needed.

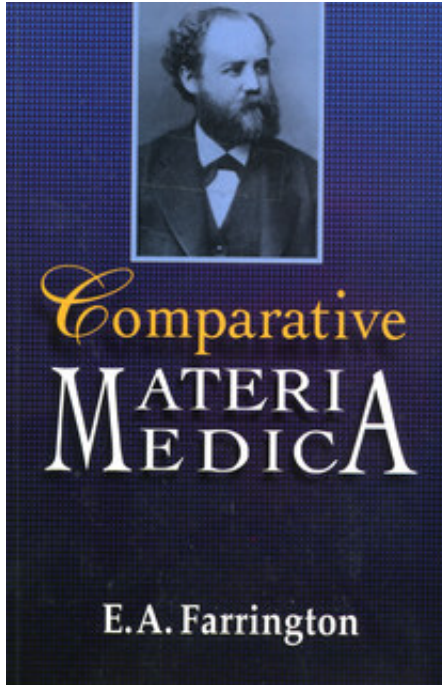
Failures arise first from defective judgment; secondly from imperfect provings , thirdly from imperfect clinical reports ; fourthly from an imperfect comprehension of what symptoms should be compared.

Symptoms of minor import in the study of a drug in an individual may become quite characteristic when employed in comparison. Thus, *Belladonna* causes tonsillitis[^] tending towards suppuration. This is certainly of less moment than the color, side and difficulty in swallowing water. But when compared with a medicine like *Apis*, which seldom causes suppuration of the tonsils, the contrast proves serviceable.

But with all their errors and imperfections, the comparisons have one use to perform—the main purpose for which they were transferred from private papers, intended for personal discipline, into printed papers. This use is to stimulate the study of Comparative Materia Medica.

We must determine which remedies agree, and which disagree; we must know why some remedies, though similar in symptoms, are inimical in relation. We must distinguish between medicines, which are antidotes, and others which are complementary. Then we may be better prepared to systematize Materia Medica; to abridge it without violence and to place it where it belongs, as the crown of science.

E. A. FARRINGTON.



Ernest Albert Farrington

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