

1986
236

THE HOMOEOPATHY

VOL. V

JANUARY

BOOK 1

NEW YEAR

WITH this issue we enter on the fifth year of our life; and we hope our readers will endorse our opinion when we say that we have tried, and will try, to lead a *useful* life. Ours is a dedicated life to the cause of *Homoeopathy*, and in pursuing our efforts, we have always aimed high, and have done our best to make this journal the foremost in its line in India. We could not have done all this without the active co-operation of all our patrons and subscribers, our constituents and especially of those who have from time to time contributed original articles specially written for us.

With all your co-operation we hope to carry on the good work in the New Year. We have high hopes that Homoeopathy can, and will make a substantial contribution to the health and welfare of our land. Towards this end two things are necessary. We should learn to speak with a single united voice, and we must put it across to the layman and the legislator ~~that~~ Homoeopathy alone, because of its simplicity and comparative cheapness, is best fitted to cure the illnesses of the millions of our village-dwellers. May the New Year help us in our efforts and bless all our patrons!

1986

NATURE IN THE RAW

Known as the granary of South India the Cauvery Delta usually felt the smiles of Nature year after year. Unfortunately, in quick succession recently, Nature has shown its fangs in all its inevitability and cruelty. The resultant loss of lives and property through the havoc of the cyclone and rain and sea-water in the Tanjore and Ramanathapuram Districts is colossal and cannot yet be completely estimated. Meantime, it is heartening that between the government and the various philanthropic bodies, all that is humanly possible is being done to relieve immediate suffering. We too have done and are doing our mite in this noble cause. There is no denying that there is still much scope for philanthropic help. Many of our luckier constituents who have not been hit or who are in areas not affected by the recent disaster, will no doubt like to help the sufferers. Even now donation can be sent either to the Government or to the "Dhinamani" Cyclone Relief Fund. We request those that have not yet contributed their mite towards this noble cause to do so now.

THE LATE MR B. SOMAYYA

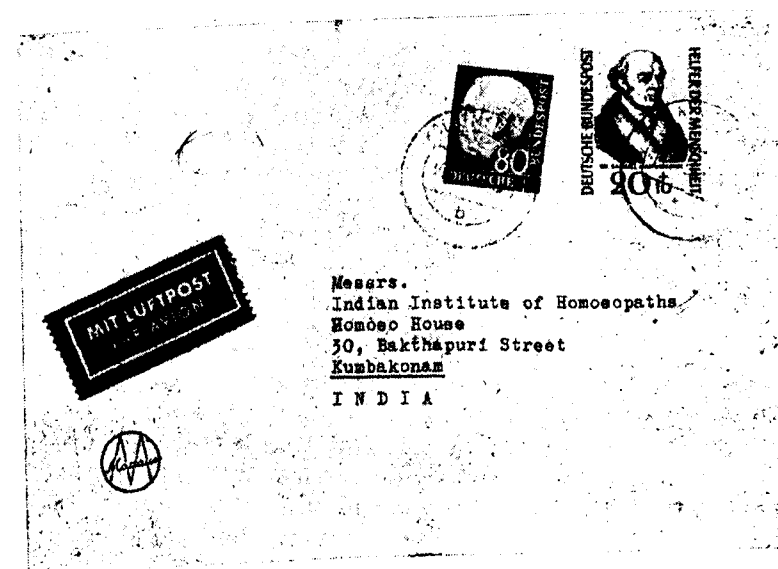
In the recent demise of Mr. B. Somayya, Homoeopathy has lost its dearest friend and patron in South India. Besides being an eminent lawyer and judge, his chief claim to fame rests on the zeal and enthusiasm which he displayed in advancing the cause of Homoeopathy. He even sold his palatial house in Madras to found a Homoeopathic College and was the founder of the Madras Presidency Homoeopathic Association. In 1954, he presided over the provincial conference of Homoeopaths in Madras, and was also Chairman of the Committee appointed by the Andhra State to enquire into the integration of Homoeopathy in the medical services. We extend our condolences to the bereaved family.

HOMOEOPATHY

HOMOEOPATHY IN GERMANY

After what President Rajendra Prasad has said about Homoeopathy, it should not be necessary for us to revert to what Mr. A. B. Shetty, the Madras Health Minister, stated in the Madras Legislative Assembly some time ago. If we do so, it is only to refute a particular point he made, viz, that Homoeopathy has lost favour in the land of its origin, Germany. We reproduce below a facsimile of an envelope received by us affixed with a German postage stamp, which has been issued by the German post office in commemoration of Dr. Samuel Hahnemann Bicentenary.

That doesn't look as if Germany has forgotten the great Doctor!



Facsimile of an Envelope received by the Indian Institute of Homoeopaths from Germany. This envelope bears a commemoration postage stamp on the 200th birth day of Samuel Hahnemann.

JANUARY '56

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THOUGHT GEMS IN HOMOEOPATHY

(Sri K. N. Gopala Pillai M. A. N. S. S. College, Changanacherry.)

1. As scrofula is the full grown tree with all its luxuriant foliage, tuberculosis is the blossom, often the degenerative stage of scrofula.

2. The mental history of psora often makes its appearance about the new moon or at the approach of the menses in women. Weeping often palliates these patients for a time.

3. The psoric patient is a chronic complainer, a chronic grumbler, fault finder, never satisfied with his conditions in life; they are the abused ones, the neglected ones, and yet every one is doing all they can for them.

4. Recollection of recent events is difficult, while things long past are well remembered; this is quite a constant mental symptom of sycois.

5. The miasms are maggots that are born within the brain as Shakespeare says, and those maggots never die until overthrown by similia.

6. Two miasms seldom become active at the same time. If they do, we are liable to have a malignancy in our hands.

7. The ear is often a safety valve in tubercular children; it relieves them of many serious troubles liable to occur during dentition.

8. Psora is the medium that rouses into action all other latent or chronic miasms and becomes that basic principle of the acute as well as the chronic condition.

9. The bones of the nose are never destroyed from any other miasm than syphilis.

10. A tubercular child will have a haemorrhage from the nose, from the slightest provocation,—blowing the nose, a slight blow or washing the face even will produce it in some people.

11. Circumscribed red spots on the cheeks is quite a positive tubercular symptom whether found in an infant, child or adult; usually these spots appear in the afternoons or evenings.

12. Red lips are found in a very psoric patient or in extremely marked cases where the blood seems to be ready to ooze out of them, are tubercular.

13. In the tubercular patient, physiologically speaking, the face and head is often seen to be of the shape of a pyramid with the apex at the chin.

14. The taste of blood is a peculiar latent tubercular symptom often to be found in women with a tubercular diathesis.

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KUMBAKONAM

HOMOEOPATHY

6. Use Arnica in injuries of the muscles from a sharp instrument or from a sudden wrench as in case of heavy lifting and in haemorrhage of heavy lifting.

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NASH: 1. For apoplexy as the result of trauma. 2. Prevents suppuration and septicaemia and promotes absorption. 3. For a crop of boils. 4. It is much better to use this remedy in weakened power of accommodation in the eyes than to try and compensate for it with artificial lenses.

HUGHES: 1. Myalgia, the main remedy. 2. Over-exertion of the healthy muscles or normal use of weak muscles, will bring on the pains, Arn. will infallibly relieve them. 3. Specific for those cases of myalgia where the pain comes after taking food. 4. Useful in spurious pleurisy. 5. Arnica is to injury what Aconite is to cold.

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This is a combination of Ptychotis, Spirits Camphor and a few other drugs purified and blended under scientific methods. A proven remedy in all cases of indigestion, flatulence, colic, acidity, eructation, diarrhoea etc.

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BAHR: 1. Occupies first rank as a medicine to accelerate the absorption of apoplectic effusion. 2. Brain concussion. First remedy to be thought of always. 3. May be called for when the pressure of the blood in the brain is sufficient to cause apoplectic symptoms. 4. Occupies a middle rank between Rhus T. and Bry in typhoid fever.

DEWAY: 1. Neuritis selective affinity for relieving pain. 2. Bleeding from teeth extracted—excellent remedy. 3. Very useful in traumatic iritis.

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POTENCY

1. In all recent affections Arnica may be given in small or fractional doses of the mother tincture. But for the remote effects of injury, we must ascend to the region of infinitesimals. [HUGHES]

2. Locally the tincture, but should never be applied at all when abrasions or cuts are present. [WILLIAM BOBRICK]

3. "A high potency of Arnica is most satisfactory in bruises". [KENT]

4. In the lower dilutions, Arnica is tonic and stimulant, and is adapted to depressed state of the system, with apathy, injuries and their consequence, paralysis of the bladder, rheumatism, and rheumatic gout, mania and melancholia. [UNDERWOOD]

ASTHMA

(AN OLD HOMOEOPATH)

Asthma is a disease which commonly attacks people both young and old, rich and poor, and even infants and children are no exception. It is generally considered a hereditary disease, but even healthy people are at times attacked even without any hereditary taint. There are many kinds of asthma such as 'Hay Asthma', Hebdomadad, Miner's Asthma, Millar's Asthma, Cardiac Asthma, etc.

Asthma is the spasmodic affection of respiratory-organs which have difficulty in breathing and coughing. In some cases it passes off mildly but in many cases it is very troublesome. Not one case is similar to another. Some suffer from severe cough, many from hard and difficult breathing, with gasping. Some require hard fanning, others light fanning from a distance. Some are attacked with vomiting of mucus. The cough is generally spasmodic or convulsive with wheezing respiration. With this cough some get relief by bending forward or backward. Generally the patient is made to sit up but peculiarly in some cases he gets relief by lying down (Mong Ace.). Some are affected during autumn and winter, but some suffer during summer. Periodical attacks are common. Asthma may also be caused by suppressed eruptions and suppressed foot-sweats.

In many cases, especially in children, when there is gasping, an alternation of Arsenicum Album and Ipecacuanha every four hours cuts short the disease and the child becomes normal in a day. But when there is profuse perspiration, instead of Ars Alb and Ipec, Sambucus may be given with

confidence. In cases of vomiting with mucus, Ipecac gives relief. Lobelia Inflata also acts very well when there is vomiting.

Before proceeding with various other remedies useful in Asthma, I strongly urge the beginner never to use routine-prescription. It will never do any good but may cause harm. The beginner must always study the patient, note all the objective symptoms which he is able to see and also the subjective symptoms given by the patient and then select the proper remedy suitable to the case.

It has been already stated that Ars. Alb. and Ipec. are good remedies for Asthma. But when you find aggravation after midnight or when he goes to lie down or the patient has a desire to sip small quantities of water at short intervals or complains of a burning sensation in the chest with cold sweat, you can be sure that Ars Alb will do good to the patient. In some cases, when Ars Alb fails to give complete relief, Ipec will do the trick, for Ipec follows Ars well and it is its complementary.

When you see an Asthmatic patient being fanned vigorously by a servant or a relative, you may think of Carbo-Veg. But when the patient wants some one to fan

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MADRAS :: KUMBAKONAM

him gently and at a distance. Carbo-Veg will not be useful but Medorrhinum is the remedy, especially when there is sycotic taint.

Kali Carbonicum and Ammonium Carb are the two other-remedies useful in Asthma. In Kali Carb. the aggravation of cough is found at 3 A.M. and makes the patient bend forward, and rest the head on knees. But in Amm Carb though the cough is at 3 A.M. which is not so severe, there is much-oppression in breathing and also gasping.

Nux Vomica and Natrum Sulph are also useful in Hydrogenoid patient. When there is constant urging for stools especially before attack, Nux Vom. may be given and when there is a history of an injury to the head and Asthma following, Nat. Sulph. will certainly cure the patient. It is also found to be useful in damp weather.

Lobelia Inflata and Ipecac will be of use when there is vomiting along with Asthma. In Ipec. there will be nausea and vomiting of white mucus. But in Lobelia there will be a sensation of weight or pressure in chest, but the patient will feel better by rapid walking.

Now we will consider some drugs noted for their peculiar modalities. When a person finds relief in Asthma by bending his head backward, Hepar Sulph will be useful. But in Rhus Tox, motion, especially walking, gives him great relief and he also finds relief when he lies with body bent backward.

Some other remedies such as Aconitum Napellus, Ambra Grisea, Antimonium Tart, China off., Cuprum metallicum, Hydrocyanic acid, Lachesis, Pulsatilla, Senega, Squilla, Sticta Pul. are also suggested as remedies for Asthma. The

student will do well to study these drugs and use them if he finds the remedies suitable to the case.

In Hay Asthma, Ars., Ipec., Lobelia and Sabadilla may be tried if symptoms agree.

In Humid Asthma, Dulcamara, Ars, Nat. Sulph., Kali Bich. and Senega may be studied and used according to the symptoms.

Miller's and Miner's Asthma are not generally found in this part of the country.

Asthma in sailors on shore-Bromium will be useful.

In Cardiac Asthma, Cactus gr., Digitaline, Laurocerasus, Naja, Spigelia, Spongia, Strophanthus may be tried if symptoms are suitable.

As for the constitutional remedies to prevent a recurrence of the disease, Bacillinum, Tuberculinum, Sulphur, Calcarea Carb, and Iodium may be tried according to the constitution of the patient.

Some people use medicated cigarettes or Himrod's cure to get relief. They contain nothing but dried stromonium leaves mixed with Potassium Nitrate. A few drops of Amyl Nitrite or chloroform sprinkled on a handkerchief and inhaled will give relief. Here Blatta-Orientalis may be used in third or sixth potencies and it may give relief but not a cure.

The asthma patient must be careful in taking baths in cold water and exposure of the body to the draughts during bathing. He is also advised not to use certain vegetables such as cucumbers radish etc. which cause catarrh or cold in the head. Fats and oils are considered by some as unsuitable to the asthma patients. Meat and heavy meals are not good to the patient. Patients with hydrogenoid constitution must avoid fish.

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HOW I BECAME A HOMOEOPATH

(Contributed)

Quite a large number of English-educated intelligentsia have become converts to Homœopathy. On investigation, it will be found that behind each such conversion lies an interesting story. If only such persons would write and tell what made them take up to the study of Homœopathy, I am sure it would be exhilarating reading to Homœopaths in general.

For more than twenty years, I carried a severe intestinal colic. It was at first diagnosed as peptic ulceration, which might develop into ulcers. Severe constipation, acute intestinal flatulence and colic that settled down into a severe, unbearable pain in the pit of the stomach, were the chief symptoms. The pain used to be so severe that I felt as if a dagger had been thrust inside and was being constantly twisted. Mixtures and medicines could not do anything to eradicate this trouble. Macleans Stomach Powder used to give partial relief; but then I had to take it in large doses.

An eminent Ayurved, when consulted, frankly said that the only thing to do was to take weekly, opening doses of castor oil and lemon juice and that there was no other remedy.

There was some amelioration on avoiding rice and gas producing vegetables; and so I put myself entirely on wheat diet.

I joined the army and went overseas and in 1945 when an attack was too severe to be borne, I was admitted in the Military Hospital. X-ray, barium meal. test, blood, urine

and stool test, test for hydrochloric acid contents in the stomach were all made without discovering any abnormality anywhere in the system. Peptic ulcers were ruled out as I was too robust to carry peptic ulcers, but my trouble continued. I was, therefore, put on a full *Emetine* course of treatment for one month (to counteract the after-effects of any dysentery which I might have had) and discharged from hospital. I was feeling a bit better for some time, but after six months, the conditions relapsed into the old story.

As allopathy and ayurved seemed to have given up hope, I turned to homœopathy and studied the subject regularly myself to see if it could help me.

I was now in Kashmir, and after finishing the course started experimenting on myself with my limited knowledge. I tried *Nux-Vomica* and *Carbo Vegetabilis* and *Natrum Mur* with varying and partial success. They all helped the constipation but the acute pain at the pit of the stomach refused to budge.

I was then studying Dr. Hughes' *Therapeutics* where I came across the term "*flatus incarcerated in the intestines*". As all medical tests failed to show anything else wrong, I thought this must be my trouble. I did not have a *Materia Medica* or *Repertory* with me at that time; but in my enthusiasm or overenthusiasm to get rid of the demon literally sitting on my chest, I ordered for *Lycopodium* in graded potencies and started with *Lyco 30*, then on to *Lyco 200*, *Lyco 1,000*, *Lyco 1 lakh*. I did not feel the pain too much at that time, but I did not know when to stop and went on to *Lyco 1 M*, of which I took 3 or 4 doses at two day intervals.

Then trouble started. Aggravation of my colic, no relief under *Macleans* or *Soda-bicarb*, and I was rolling with pain.

Food lay like a leaden weight in my stomach. I was rushed to hospital and it was discovered that there was no hydrochloric acid at all in my gastric juice. I was put on hydrochlor Dil, which improved my condition like lightning. For about two months I carried Hydrochlor Dil with me wherever I went, until one fine morning I found I had no need to take the d-d thing. My system was perfectly alright, I could digest rice or any carbohydrate or protein and the "old man of the sea" that was sitting on my chest for twenty-five years had completely disappeared.

One year after, purely in a mood of devilry, and to test how far I was right in giving credit to Homœopathy under the circumstances, I took more than one dose of *Lyco 1 M* and went through the whole agony over again.

That convinced me about the efficacy of the minute dose that no chemical analysis could discover; it also taught me not to fool about with higher potencies.

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RAYALASEEMA HOMOEOPATHIC ASSOCIATION

Homoeopathy is getting popular in Andhra. Besides the practitioners in this art of healing many lay people of Andhra know this method of treatment and they are all sympathisers towards Homoeopathy.

To serve the cause of Homoeopathy, the practitioners and our public, the Homoeopaths of Rayalaseema have formed an association known as 'Rayalaseema Homoeopathic Association'. This association has been registered under the Societies Registration Act xxi of 1860 and the office is situated at Guntakkal.

The Association conducts meetings and conferences. The members of the Association are doing yeomen service to Homoeopathy. They are also running a monthly journal with numerous articles both in English and Telugu.

Below is the photo of the Managing Committee of the Association.



1st Row (LEFT to RIGHT)

Dr. C. P. S. Rayan, Secretary, Sri K.M. N. Rao, Dr. Y. Hanumesa Rao, Vice President (54-55) Dr. K. V. Govinda Rajulu, L. M. P. President, Dr. K. L. Narasimham, L. I. M. Vice President, (55-56) Dr. K. C. R. Raju, Dr. G. R. Lingam

2nd Row

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HOMOEOPATHY IN BIRTH, LIFE AND DEATH

BY ELEANOR BELVILLE

THE birth of a child is always an event that stirs all but the hardest hearts to wonderment. The exquisite modelling in miniature of the physical form that once more enshrines the Spirit, and the miniature brain cells that will gradually expand as the mind develops and seeks to express truths drawn from the well of experience; these are phenomena that should impress us with the realization that here in our midst is a perfect piece of creative work. We do not seek to destroy or mar the perfection of any other work of art and yet we are sometimes more than a little careless in our treatment of the new born child.

We do not neglect it, starve it, or ill-treat it in the ordinary way; but because we overlook the implication of the new life we are careless in our medical treatment. When the loud voice of popular opinion roars its fear slogans at us, we become imbued with fear and anxiously hasten to obey the suggestions of vaccination, immunization or inoculation against this, that or the other possibility, real or imaginary. So insistent is the fear propaganda, one wonders sometimes whether parents are not entirely robbed of their sense of responsibility to their own child. Their decisions regarding treatment, if treatment in the medical sense should prove necessary, are swept aside by a body of men who appoint themselves judges of health and keepers of the keys of life and death. Here and there a brave mother resists the threats and warnings and preserves her child according to her own conscience, and I have yet to meet the child that has suffered as a consequence. There are the cases of

neglect where suffering results, but these are the exceptions rather than the rule, and experience shows in fact, that suffering results from the very means that proclaim deliverance.

Homœopathy, the art of medicine that respects the miracle of the new-born babe, provides those safe and pure remedies that will ensure the safety and well-being of the developing child. Its medicines in themselves are free from poisonous taints, for they are of—in the words of Hahnemann—"Spiritlike quality". The young child is hardly of this gross world; only as the days slip into months and years, does the knowledge and awareness of the heavenly world fade away. Why then should we expect benefit from gross materiality in one so far removed? Surely it is logical to treat the being who as yet only hovers on the brink of earthly experience, with medicines which are akin, and the experience of Homœopaths in dealing with children confirms again and again that the finest work in medicine is done with the higher attenuations of the Homœopathic remedies. The delicate vibrations of the potentized medicines blend perfectly, when correctly prescribed, with the delicate vibrations of the young child, strengthening that vital force which will ensure the unfoldment in health of the whole organism. Fortunate indeed are those who receive Homœopathy from the day of birth—their foundations are well and truly laid. And even before birth, while still in the seclusion of the mother's womb, the growing foetus can be helped and strengthened by the parent who is wise and seeks the advice of the Homœopathic physician, who attends to the purity of her diet and preserves the beauty of her mind and the peace of her soul. The process of birth is one of co-operation between mother and child. The mother already established in earthly conditions, provides those materials for the earthly vehicle; the soul, still

near to higher worlds, extracts the essence and builds accordingly. Thus the transition from one experience to another is eased or complicated as the co-operative effort is realized and made. Homœopathy is essential to the well-being of the mother and ensures the safe delivery of the completed work. Would that women everywhere knew of its blessings and its value.

When the life is fully developed and the soul firmly enshrined in its temple of flesh the battle begins for so many. The fight against adversity, misunderstanding, sorrow and ultimately suffering. For many it would seem that although they cry aloud for aid there is none to help them. They wander hither and thither seeking assistance for mind, body and soul; they find alleviation for a while and in that time of rest from strife they are at peace. New hope, new energy springs forth and life with all its activities begins anew until the battle starts again, in some other field, some other place. Once more their search begins, the old friends fail and new ones take their place. Some are good and find their mark, but never is the complete assurance gained that all is well, unless they meet with Homœopathy.

Many may wonder why I am so sure that Homœopathy is the answer to life's problems, great or small. It is because I believe that man has never been left without a perfect solution to his difficulties if he will search for it, and also because I believe his difficulties whether of mind, body or soul, spring from a state of discord within his whole being. Not merely a discord of the flesh, or of the mind or of the unquiet spirit, but a dislocation of the three, and a severance from the Universal Power for Good. To heal one part and neglect the other is only to resolve one chord, it does not create that perfect symphony which is the harmonious expression of a man in health. Each

therapy plays its part in helping the divided whole, but in Homœopathy the whole is gathered together and tuned to goodness. The remedies will enter in and clear the mind of doubt and confusion, will calm the troubled soul and give it strength, will ease the pain-racked body and restore its life. Can any other medicine claim as much?

Life itself is energy and vibration. If that energy is depleted or the vibration disturbed, it must be treated with medicines that are themselves of like character, energy and vibration. Homœopathy is the art of applying energy and vibration in that amount and rate that will harmonize and renew the disordered life of any patient. Thus it becomes of paramount importance that everywhere man should have opportunity to hear of its truth and test its worth. Many will say that they have been healed by faith or diet, or fasting, or herbs but what is their interpretation of healing? If they have been truly synthesized in body, mind and spirit, all is well for them, but many I fear are only healed in part and still are vulnerable to attacks from divers sources—even from within themselves should conditions of outer life make possible the manifestation of the buried discord. Homœopathy works from within outward, dissolving the inner causes until a man is clean and whole. We have survived so long, life has continued without this medicine, some may say, why is it only *now* that we hear of its wonders? Every age has the medicine it needs or deserves, every age has brought the fuller development of the spiritual man in material substance. We live to-day in an age that is dissolving matter, our consciousness is expanded beyond the confines of the flesh, we are aware of forces that cannot be confined in form, therefore we have the medicine that in itself is beyond materiality and partakes of the ethereal worlds

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It is now generally accepted that this medicine is capable of reducing the Blood Pressure, without causing any other after effects.

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Dose: One Tablet per dose, 3 Times a day before or after food.

Packing: In bottle of 90 tablets for a month's use.

Price: Rs. 4-0-0 per bottle.

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Madras Office:

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(A product manufactured under Homoeopathic methods in our own Laboratories)

outside the senses. A spiritualized medicine for a spiritualized people. Those with ears to hear, eyes to see and hearts to understand will know that life in all its fullness can be best treated when the need arises with the medicines of Homœopathy.

The end of life is rarely regarded by man with serenity or joy. For the vast majority death, in spite of religious teachings, remains a mystery and something to be feared, and every effort is made to hold to that which is familiar and known even though the experience is one of pain and misery. When in robust health there is a shrinking from the contemplation of the end of life, and few attempt to penetrate the veil that divides sleeping and waking. It is for so many "the bourne from which no traveller returns".

But, knowing that all things have been provided for the good and well-being of man, we know also that there must be some way in which this fear can be overcome, and the grief and shock which so frequently accompany it allayed. Modern Science has evolved sedatives and pain-killers in plenty, to dull the conscious mind and interrupt the nerve communication with the brain. Thus the traveller into unknown worlds slips quietly away, but who can prove that all is well? Those who mourn may find drugged sleep a blessed escape, but is there comfort or composure on the awakening? The physical body is deadened, relieved of its pain and distress, but is the mind illumined or the spirit strengthened?

It can be said that there is no *proof* for the efficacy of Homœopathy for those who have embarked on the unknown journey, and we may or may not agree. But when the significance of the principles of Homœopathy is fully grasped and the action of the remedies truly appreciated,

it is not so illogical to feel and know with some degree of certainty that harmony prevails. The remedies partaking of "spirit-like quality"—to quote the master, Samuel Hahnemann—soothe and heal the broken heart and quieten the mind distressed by grief. The great grief remedy (*Ignatia*) does not drug the consciousness or give oblivion to the bereaved, instead it strengthens the inner nature thereby enabling it to face the responsibilities and deal calmly with the problems around. The calm serenity which is so often shown by those who have had need to use *Ignatia* is not a drugged insensibility, indifference or hardness of heart, but the functioning of a soul that knows from within that all is well. And for those who near the great experience of entering into a new life, there are remedies that will strengthen the soul and free the mind of its fear and apprehensions, that will bring rest and tranquillity, thereby allowing the transition to be accomplished in peace.

Surely there is need for much gratitude for a therapy that establishes us in childhood, guards us in maturity and guides us through Heaven's Gates. A medicine which cares for every part of our being and ensures the full development and blending of all our powers is one to be cherished. It is also one to be shared with all that lives, for its powers are not limited to the human kingdom—animals, birds, fish and plants can all benefit from birth, through life, to death. It is a therapy the principle of which is Life; its application brings harmony, beauty and goodness to a fuller expression, and indeed makes a man healthy in body wealthy in strength and energy, and wise in his understanding of the problems of the daily life.

The man who is whole knows no fear. He welcomes birth, enjoys life, and departs in peace.

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EXERCISE AND ASANAS

(By Pandit R. S. Navalar, M. D. Homoeo. Thuckalay)

Some kinds of exercises and asanas are supposed to be, to a certain extent, remedies for a few diseases. No doubt, certain exercises cure some diseases such as head-ache, mild cough etc. as *asanas* do. But, we can see that exercises only set the internal organs right and sweep away toxic poisons. Exercises or asanas may rejuvenate the internal organs, provided they are not injured otherwise.

Suppose a man is suffering from rheumatism. Would it be cured by exercise? A majority of our friends have wrongly understood that there is a possibility to cure all diseases by mere exercise. In rheumatism the patient has got short of salt, phosphorus, sulphur, iron etc., and his nervous system is certainly affected thereby. In these circumstances, exercises cannot do much as the nerves have got out of tone. If the particular patient is exposed to heavy exercises he will be worse off and a cure cannot be obtained even through other sources.

Exercises should be taken in a condition when the organs are normal lest our health should be ruined. They should be performed to preserve and retain health. If not, indolence, laziness, giddiness and ill-health will result. Exercises to some extent, aid the circulation of and purify blood; and diseases like scabies are cured by these processes. In illhealth also some exercises can be taken when the organs are not destitute of vital substances. Mild exercise such as walking, necessarily stimulates the nerves, whereas over-exercise strains the internal organs.

When an individual takes heavy exercise the internal organs function overmuch and lose energy extravagantly within a short measure of time, which would otherwise be retained for more useful purposes. This is why most of our athletes, with a few exceptions, lose their precious lives even in middle age. It hence follows that :—

1. Exercises should not be practised when one is suffering from diseases caused by deficiency in organs.
2. Exercises do not replace the vital substances but only improve health in a normal condition.
3. Exercises may be taken in diseases when organs are not badly affected.
4. Over exercise is always harmful.
5. Exercises should correspond to the capability of the constitution.

Here a word about asanas. Asanas perhaps have the same effect as that of exercises as far as diseases are concerned. Asanas cure some diseases caused by deficient circulation, dyspepsia, inactivity of some internal organs, etc. In diseases like Rheumatism and Asthma when even medicines fail what will these asanas do? Can we expect a cure by asanas when the lungs are injured? Certainly not. To have any result by asanas normal condition of organs is indispensable. If asanas are practised when the organs are affected severely they may do evil instead of good. If one practises *pranayama* when his lungs are affected by bacteria he may have a cure as they are killed by *pranayama* provided the lungs are not injured. When the lungs are affected by disease – not by bacteria but by disease itself – the *pranayama* will not

be a remedy. Though asanas and exercises make a cure of some diseases by destroying certain causes, they must not be taken as common remedies for all diseases. Why? A disease may have its own various causes and by allaying one of them or two, we cannot get a complete 'cure. Still, asanas and exercises have their own value if they are performed according to the law of nature which governs us in all our lines of activities.

(We have heard many asthmatic patients say that asanas have improved their health — Ed.)

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FOR HEALTH & LIFE

MARCH 1956

THE MAHAMAKHAM

1657 —

1-56 CORONARY THROMBOSIS

A CASE OF METRITIS

JOURNAL OF THE INDIAN INSTITUTE OF HOMOEOPATHS

The "HOMOEOPATHY"

Management Notice

The "HOMOEOPATHY" is the official organ of the Indian Institute of Homoeopaths. (Kumbakonam and Madras) and is published on the 5th of every month.

Original contributions and articles of interest connected with Homoeopathy and allied subjects are solicited and will be published, if accepted. Writers of original contributions of extraordinary merit will be suitably rewarded according to the decision of the management. Contributions which are unsuitable for publication will be returned to the parties, if so desired, provided return postage is enclosed with them.

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MARCH

1956

CONTENTS

The Mahamakham	...	3
News and Notes	...	5
Thought Gems in Homoeopathy	...	10
Coronary Thrombosis	...	13
A Case of Metritis	...	20
Recommendations of the Ceylon Homoeopathic		
Inquiry Committee	...	21
Asthma	...	22

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THE HOMOEOPATHY

VOL. V

MARCH

BOOK 3

THE MAHAMAKAM

Kumbakonam has been agog with excitement during the last several months straining every nerve in making preparations for the happy event that comes once in twelve years, the auspicious moment when Sun in Kumbh, (the Pitcher) looks with a benign glance on His own house of Simh (the Leo) where sojourns in the constellation of Makam, the beneficent planet, Jupiter, at a Konam from his own house of Dhanus (hence, Kumbakonam) conjoined by Moon, shining in his full-faced, effulgent glory.

Twenty lakhs of people are computed to have gathered here on the 25th February to bathe in the waters of the Mahamakam tank.

Now that such a concourse of people have foregathered, done their ablutions and dispersed happily with all smiles and admiration for the splendid manner in which the receptionists had arranged for the supply of good water; food, municipal and health services, regulation of traffic, entertainment and religious requirements of this vast sea of humanity, the citizens of Kumbakonam can heave a sigh

of relief and feel happy that the event passed off without any untoward incident. Kumbakonam is already settling down to its normal, humdrum life. We congratulate every citizen, every householder and every official of Kumbakonam, for the hard and unstinting work they have put in to make the Mahamakam a success and it is really nice to feel that, within our knowledge, every visitor has praised lavishly the splendid way in which Kumbakonam had risen to the occasion.

On our part, we had the busiest time of our lives as hundreds of our students and patrons took this opportunity to visit our Institute and were shown round the different sections and the Laboratory by our enterprising Public Relations Officer.

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NEWS AND NOTES

i—Employment Opportunity

WE all know how much worried the Planning Commission is about the dearth of new employment opportunities for the thousands of educated boys who are thrown out year after year from our schools and colleges. At least one Community Development Officer has become wise to the fact that Homoeopathy can afford useful and profitable employment to a large number of people who will at the same time be doing a great service to the folk living in interior villages and who are at the moment entirely bereft of adequate and timely medical attention. We have been asked to extend and expand our postal tuition facilities to cover more villages. But with what heart can we undertake this job when Governmental policy in this respect is all in the melting pot and we do not know whether *amrit* or poison will come out of the pot when the melting and churning is done.

Our own views on the efficacy of, and the need for, postal tuition of Homoeopathy in India is very definite. There is still large scope, and need, for this, especially in the regional languages of each State, and this we have emphasised in our last issue. If Government approves of this policy and makes it clear that they do not intend to interfere with the postal propagation of Homoeopathy for at least another ten years, then this employment opportunity will not be lost to our young men.

MARCH '56

5

ii—"The People"

Until some one points it out, we are apt to miss the real significance of many obvious things just because they are so common and happen right in front of our eyes. Familiarity, whether it breeds contempt or not, definitely blunts our thinking capacities. Many had seen an apple fall, but it required a Newton to discover the law of gravitation from such a common incident.

As we were going to press last month we received a letter from Mr. R. J. Mayam of Madras. We managed to publish it in the February issue, but it was too late then to comment on it.

Mr. Mayam draws pointed attention to the announcement made by the Dave Committee on Indigenous Medicines that they "would be guided by the criterion of what people like and what they want", and yet we do not hear that this Committee, or other Committees of like nature, has cared to find out what the "real people" who use the different systems of medicine think on this subject. In a democracy, and especially in a Welfare State, it should not be enough if Government Committees take evidence from Departmental heads and technical men, but they should be directed to take the evidence of a typical cross section of the populations living in towns and in villages. If the Dave Committee, for example, had taken such evidence, they would have discovered that the town-dwellers would have complained bitterly of the costliness, ineffectiveness and chicanery of most of the "modern" medical profession, hiding behind the glamorous cures effected in certain percentage of cases by modern surgery and antibiotic drugs. The evidence of the village population, at least in so far as the Tamil districts are concerned, would have shown how

even Ayurvedic and Unani doctors find it useful to know Homoeopathy, that Homoeopathy is the only popular and cheapest system of treatment known to them and that the "modern" system of the townsfolk is far beyond their reach—both geographically and financially.

iii—Medicinal Plants

The Minister for Natural Resources, Mr. K. D. Malaviya told Dr. Satyawadi that the Government of India was examining a proposal for establishing a central medicinal plants organisation for development and research in Indian Medicinal Plants in all aspects.

We suggest that the nucleus of an experimental section should be started in this organization for the Homoeopathic proving of our medicinal plants.

iv—All India Homoeopathic Medical Conference

The twelfth session of the all-India Homoeopathic Medical Conference was held at Rajahmundry on the 21st and 22nd February.

The Hon'ble Shri Jagjivan Ram, Union Minister for Communications, while delivering the inaugural address observed that "in a poor country like ours Homoeopathy is undoubtedly within the reach of every man and it deserves all encouragement", and that he had derived good results from Homoeopathic treatment. He finally advised Homoeopathic practitioners to put their profession on a sound basis.

Dr. N. M. Jaisoorya then delivered his presidential speech. In doing so, he bore eloquent testimony to the efficacy of Homoeopathic treatment in epidemic jaundice and stated that within his knowledge, one single amateur

Homoeopath had put right all the 54 cases referred to him and that the Health Officer of Delhi would bear witness to same.

About 300 delegates from all over India attended.

v—In the Lok Sabha

While the Lok Sabha was discussing the bill for the establishment of the All-India Institute for Medical Sciences, Pandit Thakurdas Bhargava (Congress-Punjab) declared that it would be a national insult if Ayurveda, Unani and Homoeopathy were not regarded as modern Sciences. (Please see article entitled “ ‘Modern’ Medical System” in our February issue.—The Editor).

Dr. Suresh Chandra (Congress-Hyderabad) wanted separate Institutes for Ayurveda and Homoeopathy as they had in Germany.

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Dr. Mohanlal Saxena (Congress-U. P) regretted the exclusion of Ayurveda and Homoeopathy from the scope of the Bill.

When it came to her turn, the Health Minister, Rajkumari Amrit Kaur, rebutted the charge that the Government was apathetic to Ayurveda or Homoeopathy, and went on to say: “I claim that the majority of the people of our country want modern medicine”. Obviously the Rajkumari meant “Allopathic” when she said “modern” and was greeted with cries of “No, No”.

It looks as if the Central Health Minister must very much ‘modernise’ her outlook!

A PHARMACOPOEIA FOR INDIA

The Indian Pharmacopoeia Committee constituted by the Government of India have compiled the first Indian Pharmacopoeia which has been published under the title of ‘Pharmacopoeia of India’. This will be recognised as a standard, so far as India is concerned, under the Drugs Act of 1940. The rules framed under this Act in this respect will become effective from July 1st, 1956.

REPORT OF THE CEYLON COMMITTEE OF INQUIRY ON HOMOEOPATHY

We have just now received the Report of the Ceylon Government Committee of Inquiry on Homoeopathy. As we have not had time to make a detailed study of this report, we shall reserve our comments to a later issue. Meantime, on another page will be found a brief summary of the recommendations of this Committee.

THOUGHT GEMS IN HOMOEOPATHY

(Sri K. N. Gopala Pillai M. A. N. S. S. College, Changanacherry)

1. The psoric patient can walk well, but it kills him to stand still; this is such a positive symptom of psora that it can always be depended upon.

2. The skin is the mirror or reflector of the internal stress, the internal dynamis, the internal workings of the human machine.

3. In skin-diseases as Ichthyosis (Fish-skin) we find all the chronic miasms present and where we find them all present, we usually find an incurable skin-disease, especially if hereditary.

4. The wondrous variations that we find in eczema are in themselves a miasmatic study and often a great problem to decipher as to their miasmatic origin, from the popular eruption of the psora to the pustule of the pseudo-psoric.

5. Not infrequently we have cases where the vitality of the patient is so low that we are unable to assist nature in bringing forth the eruption.

6. Insect-stings from a bug or bee and like causes, affect patients with a tubercular taint very decidedly, even more than they affect those suffering from a simple psoric condition.

7. Pathology is a wrong movement in the life action, hence new growths are the results of false movements or false action, prolonged of course.

8. We do not find false growths or abnormal growths in those patients that have no other miasmatic basis but psora.

9. It is the tubercular diathesis that complicates all our skin-diseases and make them so difficult to remove.

10. When sycosis is suppressed in a pseudo-psoric or tubercular patient, the miasmatic union becomes one very difficult to separate. Sycosis has such a positive bond with the life-force that the latter is unable to disengage itself.

11. Many of the sycotically affected patients, either in the secondary or tertiary stages, have attacks of appendicitis, a disease, I think, largely dependent on the sycotic poison.

12. Almost every case of La Grippe requires an anti-sycotic remedy such as *Rhus Tox* or *Gelsemium* in the first stage of its invasion.

13. Where a tubercular diathesis is present in the patient, Gonorrhoea is slow and difficult to eradicate from the organism.

14. In the transmission of the sycotic virus, the result will depend largely upon the stage in which it is transmitted. The symptoms that follow will correspond in some degree to the stage and age of the primary infection.

15. In tertiary sycosis, one remedy will seldom cure the case, we have to take them back over the way they came, no matter how circuitous the path.

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CORONARY THROMBOSIS

[Dr. Paul Dudley White of Boston, one of the world's greatest authorities on heart disease, was summoned to Denver for consultation after President Eisenhower suffered a coronary thrombosis, recently.]

In the following exclusive interview, Dr. White explains clearly the three most common forms of heart trouble and tells what a person should and should not do if he wants to avoid heart disease.

Is it true that the nearer your weight remains to what it was when you were 23, the better your chances of escaping a heart attack such as that which felled President Eisenhower?

Is it true that the better your general physical condition, from moderation in eating, in exercise and in the use of various stimulants, the greater the odds that you will not fall victim to coronary thrombosis?

And since you can regulate each of these factors by self-control, can you definitely make it less likely that you will fall victim to the disease which kills more Americans yearly than all other ailments combined?

These are questions being studied by the man who is perhaps the world's greatest authority on diseases of the heart, Dr. Paul Dudley White, the Boston specialist who was summoned to Denver to consult with the President's physicians at the Fitzsimons General Hospital after Mr. Eisenhower's attack.

The answers may prove to be yes, but much careful study of the problem of the relationship of the ways of life to heart disease remains to be made.

For nearly half a century Dr. White has probed, literally, into the human heart. He has studied its weaknesses in America, in Greece, in Italy, in Czechoslovakia and other countries, always seeking the answer to the mystery: what brings about heart disease? In his life-time he has seen the medical profession make great advances in treatment of coronary thrombosis and kindred ills. Today doctors can cure heart afflictions which a few decades ago would have proved certainly fatal.

But how to prevent such attacks from occurring? That remains the problem which, Dr. White believes, will be solved through meticulous research in many lands, research which will eventually narrow the field and point the finger definitely at the factor or factors responsible. Already there are suspected "criminal elements" in our physical way of life. It is to these "suspects that Dr. White points in suggesting some possibilities of lessening the likelihood that some day a physician may pronounce over you the dread diagnosis: "coronary thrombosis".

In the following series of questions and answers, Dr. White sets forth some facts about heart trouble and what you can do to help spare yourself from it:

COMMON CAUSES

Q: What are the commonest causes of heart attacks?

A: The three most prevalent are coronary artery disease, rheumatic fever and high blood pressure. Coronary disease results from a thickening of the walls of the arteries which supply the heart muscles with blood. The process is known as arteriosclerosis,

Q: What makes the walls thicken?

A: The process begins with the laying down of fat in the inner lining of the arterial wall. In the course of time this deposit clogs the artery much as rust clogs a water pipe. This is accomplished by chemical changes within the artery and the development of scar tissue.

Q: What happens when the clogging becomes serious?

A: The heart, which is one of the toughest and strongest muscles in the body, finds itself deprived of the blood flow which nourishes it, and reacts with a pain, which may be mild or severe, depending on the extent of the blockage and the amount of exercise which the heart is being called upon to perform. This pain is known as "angina pectoris."

Q: Is this what is called coronary thrombosis?

A: No, although the condition which causes angina may develop into a coronary attack. In a coronary attack, a blood clot suddenly forms in one of the arteries which supply the heart muscles, cutting off the blood supply entirely. In a case of this kind that portion of the heart which receives no blood is damaged physically (infarcted). The affected cells, receiving no nourishment, die and act somewhat as a sterile abscess. The damaged cells must be carried away and replaced by scar tissue. This occurs when the heart has been able to re-establish circulation through the damaged area by the enlargement of secondary arteries, which take over the job of supplying the isolated section.

Q: This is what happened to the president?

A: Yes, and when proper treatment is given, the chances are good for complete recovery.

THE TREATMENT

Q: What is the treatment?

A: Complete rest during the healing process and the administration of drugs which tend to prevent further clotting in the arteries and veins and inside the heart itself.

Q: Is there any sure fire symptom of heart disease?

A: No. but you can't tell that to amateur experts. The three favourite 'symptoms' of the laity are shortness of breath, pain in the chest and palpitations. A person can have all three at once and the chances still are that his trouble lies elsewhere than in the heart. Silly ideas about heart disease have driven thousands of persons into nervous anguish that has shortened their lives.

Q: What other cause could there be for such symptoms?

A: A pain in the chest may come from indigestion, from irritation of the nerves or chest muscles, from too much smoking, or even coffee, tea or alcohol. Sometimes it is simply overwork. In more than eight out of ten cases of chest discomforts the patient has an entirely different illness, generally not a serious one. Unfounded fears can do more damage to a patient than his real ailment. When a man complains of shortness of breath, for example, it is nine to one that he has asthma or any one of a dozen other ills. Heart specialists treat many people who have about every possible "heart" symptom. Their trouble is almost always "anxiety neurosis". Their hearts are all right.

Q: But a person with these symptoms should not neglect them?

A: Of course, not. Though the odds are against it, these symptoms may be signs of heart trouble. It is foolish not to go to your doctor and find out for sure.

Q: What can a person do to avoid heart disease?

A: We have no certain answers to this as yet, but we think that there are several things he should not do. He should not overeat. He should not get fat. He probably should not overdo anything. High pressure individuals who are always on the go may be asking for trouble.

Q: How about exercise, such as golf?

A: The trouble is that your average go-getter cannot take it easy, even when he is supposed to be relaxing on the golf course. He goes around the course at full steam, the way he works.

Q: You think diet is extremely important?

A: Too much fat in the diet may perhaps initiate certain heart trouble, whether or not it stays in the body. Fats can filter into the blood vessel walls and lead to sclerosis. Overweight has a harmful effect on longevity, but we are not yet sure why. General health can suffer from it too.

Q: Is there too much fat in the American diet?

A: Probably. In one generation the fat content in the average diet has increased from 30 to 42 percent. It may be significant that the great diseases of the heart have increased during the same period. A recent study in Europe showed that in Italy, where many people subsist on a starch diet, the incidence of heart disease is less than in Sweden and the United States where the diet is higher in fat content.

Q: If men and women eat the same foods, why do women get less heart disease than men?

A: We think it may be due to the beneficial effect of the female hormone, which is protective and retards the formation of deposits in the arteries.

Q: What other factors beside diet do you think may influence the incidence of heart disease?

A: There are several which we suspect may have something to do with it. There is heredity, certainly an important consideration. If both of a man's parents die young from heart disease, he should certainly watch himself carefully. The physical make-up of the body seems to have a bearing on susceptibility to coronary heart disease. The thin wiry type of man apparently is less likely to die of coronary troubles than the short stocky fleshy type. Of course, these are only possibilities not probabilities. Just because a man is skinny does not make him immune by any means.

Q: What is meant by an electrocardiogram?

A: It is a record made by a machine called an electrocardiograph. The machine records tiny electrical currents which accompany heart action. By studying the record, a specialist may learn a great deal about the condition of the heart. The record has to be interpreted very carefully, and unusual patterns do not always mean heart trouble. The machine is an extremely useful adjunct, but never a substitute for a thorough examination.

Q: President Eisenhower had an electrocardiogram made in August, and suffered a coronary attack less than two months later. Why did not the chart show signs of ill-health?

A: Because when the record was made the President had not suffered the attack and was in good health at one moment and suffered a broken leg the next. That is the way a coronary attack usually strikes.

Q: Is a man who has had a heart attack doomed to stop all work and live an invalid's life?

A: That is a complete fallacy. After the heart injury has been repaired, and if the scar is not large, then moderate activity is just as good for the heart as for any other muscle. Well-exercised legs help the heart by squeezing the blood back up through the veins. Heart disease might be less of a problem if we could keep the blood vessels and muscles of the rest of the body functioning properly.

Q: How about climbing stairs and playing golf for those who have had attacks?

A: Walking up-stairs, not running, is actually good for the heart so long as it is not seriously damaged. People who put elevators in their homes after the less serious heart attacks would be smarter to go fishing or hiking. Golf is an ideal game for many recovered heart victims. The man who dropped dead on the seventh hole might well have died earlier if he had stayed in his easy chair.

Q: What is your word for people who have had a heart attack?

A: It has been said that it is a good thing to have had a little heart trouble because knowing it you take better care of yourself and live longer. Heart disease, even when quite severe, may allow a long life of usefulness. Many persons, young and old, live long enough to get over much of the heart trouble that may have affected them. Either in body or mind: Remember, the heart is the body's strongest muscle. It beats 2,500,000,000 times during a lifetime of 70 years and pumps five to 10 tons of blood every day. No emotion, however intense, has ever broken a healthy heart, not even love.

—The Hindu, Madras.

A CASE OF METRITIS

[M. N. R.]

A distant relative of mine, a young lady 25 years old, had given birth to her third child. Some four months after, she sent for me and told me that the uterus had not shrunk properly after the last delivery and that consequently there was a slight swelling on the left side of the abdomen. She thought that in due course it might settle down to its normal condition and did not inform anybody about it.

Recently she had developed nausea for food, there were pains at the loins and slight bleedings; and there was a prickly pain at the uterus. So, she had consulted her family physician who, strange to say, told her: "Why do you come to me when your own uncle is a Homoeopathic Physician? Homoeopathy has more effective medicines for this condition than our system."

I put her on Belladonna 6, one dose every morning and Sabina 6 one dose every evening and within one week she had recovered all round - her pains had disappeared, the uterus had contracted to its normal size and her appetite restored.

I told her that she should really thank her family physician for having so easily got out of her troubles.

Recommendations of the Ceylon Homoeopathic Inquiry Committee

Homoeopathy should be recognised by the State and a Homoeopathic Medical Council should be set up immediately. Necessary legislation should be introduced at an early date to control the practice, and regulate the teaching of Homoeopathy in Ceylon.

Only those who are sufficiently conversant with the principles of Homoeopathy and have had considerable experience of its practice should be registered; and such registered practitioners should have the same privileges as other registered medical practitioners.

Other practitioners may be "listed". Within five years, those listed should undergo a refresher course of one year and pass an examination, after which they may be registered. All the rest and the listed practitioners who are not registered after five years' practice, should be debarred from practising.

Other recommendations include the manufacture of Homoeopathic drugs in Ceylon, the setting up of a Research Institute, award of scholarships for training pharmacists in the U. S. A. and the U. K. and the setting up of a College and Hospital in the same block of land to train future Homoeopathic Medical Practitioners.

The Committee also recommends two courses of training viz., (a) A regular four-year course for students, and (b) A refresher course for one year for listed practitioners.

MARCH '56

21

ASTHMA

By G. E. Leonard

When we are in good health we are more or less unaware of the intricacies of our inner mechanism. Each organ has its duties, and functions quietly and efficiently without our conscious direction, but should anything occur to disturb us, to cause us to deviate from our normal life, it is possible for these silent works to thrust themselves forward for attention. In every person there is likely to be one organ or part of the mechanism weaker than the rest, and it is this weaker or more sensitive member that will be affected first. In the cold damp fogs of the winter months, many are unfortunately made painfully aware of their respiratory apparatus, the mass of tubes within the chest that carry oxygen to the blood stream, oxygen that is so vital to life and well-being.

No one who has witnessed the sufferings of an asthma patient during an attack can doubt the extreme distress they experience, and none but the hardest hearted would feel that something must and should be done to relieve and if possible cure.

Medical Science has advocated many methods of relief but rarely has it been possible to prevent the recurrence of attacks. Patients obtain relief from inhalants and injections but no certainty that they will not suffer again.

Many ask me from time to time the cause of their troubles. Not an easy question always to answer, although a suggestion will sometimes bring forth confirmation. For instance, a lady complained of wheezing, difficult breathing attacks that came on suddenly in the night. She assured me

she was perfectly well if it were not for these nightly upsets. Her doctor had told her it was Asthma and advised an inhalant for relief during the attack, and sleeping tablets to help her to avoid them. The sleeping tablets made her ill, she said, and so she had discarded them, with the result she had few undisturbed nights and was generally worn down in consequence. After much questioning and conversation I elicited a story of much unhappiness following a very great shock to her emotional system. The attacks of Asthma she realized had gradually developed since then. As a girl she had had colds and was considered chesty but no one had suggested Asthma. The shock to her sensitive feelings had reacted on the weakest part of her body and that which had been probably latent, now flared up. To treat such a case purely on the surface by a palliative method is only to weaken the system ultimately and establish what might almost be called an Asthma habit. In Homœopathy the treatment embraces the whole person; every detail of the character, personality and physical make-up is considered. The remedy must be one that will correspond as nearly as possible to the whole picture of the patient. In this particular case, the patient is obviously an emotional, highly strung type, quick to laugh and quick to cry. A woman who is changeable in mood, yet with a suggestion of irritability and obstinacy. She was happiest out of doors, she told me, in fact, a warm stuffy room exhausted her. Her appetite was indifferent, she liked fruits and salads, but fat in any form made her sick. It was obvious she was "touchy" about her friends' opinions of her, yet tried hard to forgive her so-called enemies. As the Asthma had developed following extreme grief and shock, I gave her an initial dose of *Ignatia* 200, followed by a placebo night and morning. After ten days she reported feeling much better having had only one attack. I felt we could now start to tackle her constitution and so try to

eradicate the tendency to colds, chills and wheezing. She was in every way a *Pulsatilla* type—weepy, changeable, irritable, obstinate, somewhat religious, fond of open air, averse to fats, wandering pains, first here and then there. *Pulsatilla* 30 once a week for four weeks made an astonishing difference to this patient. She became calmer, happier in every way and able to tackle long neglected problems with interest and equanimity. A relative met me and asked what had happened to her—she was so different—“more like her old self”. The Asthma seemed to have vanished, there were the slight traces of it when she had been out in the damp and cold or when she was over tired, but they had not developed into the frightening attacks which had disturbed the household. The medicine was repeated two months later for four weekly doses, and she was advised to fortify her food with a regular amount of dried brewers yeast in Marmite or Yeastrel or vegetable soups.

Another case I have had was of a child, a boy of some ten years of age. A white pasty-looking kiddie with a tendency to stoop when standing and crouch when sitting. He had been quite a bonny baby and had never been really well since his third birthday. The treatment of his measles had been large quantities of M. & B. I elicited from the parents that he had had a slight skin trouble when a year old but that had been cleared up nicely at a skin hospital. The old story which so often underlies the history of Asthma. When nature strives to eliminate poisons through the skin, man in his ignorance misunderstands. The poisons are driven inward by the lotions and ointments and while the skin heals, other and more vital organs are attacked, and more often than not, it is the respiratory system that suffers. We then get the vicious alternation of skin (Eczema) and Asthma. When one is present the other is unseen, never the complete

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freedom from both. In this particular child, I found that a further complication or intensification of the condition had occurred since the arrival of another baby in the family, and a change of school. His grandmother fussed and coddled him to make up as she thought, for any possible neglect. But the Asthma was fast becoming worse and the attacks more frequent. Enquiries into diet showed that he adored sweets and sugar and was given vast quantities by the doting granny. I am afraid I was not very popular when I forbade all sweets and limited the sugar. Instead he was to have dates, figs, raisins and pure comb honey, and at least one salad meal a day; pure lemon juice in a little water was advised as an early morning drink and apple juice or carrot juice instead of milk or cocoa. Previous medical treatment was antidoted and later *Morbillinum* 30 was given. His mother was careful with his food and in four weeks reported considerable improvement although he still had attacks of sudden wheezing and shortness of breath. He was given *Ipecacuanha* 6 at half-hourly intervals during the attacks, with very good results. I suggested that he should try and walk slowly down the hall of his home each day, balancing a book on his head, in this way he lost his habit of bending forward as he walked. There is often a tendency to coddle asthmatic children, but it is not a wise plan. They must be lightly but warmly clad, and attention should be paid to the way in which such children breathe, as also to the way in which they stand or sit. I have known cases that have shown marked improvement after manipulative treatment of the spine. This releases nerve tension which will often interfere with the rhythm of breathing. My young patient has now grown taller and lost his pasty look. He is able to enjoy his school life and it is seldom he complains of his chest. *Bacillinum* 200 at two weekly intervals for two months has cleared his condition and there is now little fear for his future.

Many complain that certain foods bring on attacks of Asthma—fish, eggs, strawberries, milk and cheese are those most commonly complained about. Obviously these should be avoided until the Asthma condition is cured. But once the constitution is built up by Homœopathic remedies, these allergies will disappear. The vital force of the patient will once more be in rhythm and the weaknesses overcome.

It should be remembered that while the remedies can achieve wonderful results, their action is greatly hastened by attention being paid to diet. A system that is clogged by toxins accumulated through the years will never be healthy. The eliminative system must be in good order, bowel, kidneys and skin, so that the body is free from all effete matter. A three days fast on fruit juices only, will do much toward cleansing the body and I have known cases of marked improvement in asthmatic conditions of longstanding when this has been done.

There are many remedies to help sufferers from this condition, those given here are but a few that I have found most useful in patients, but it must always be remembered that the remedy must match the patient. Those mentioned may help an attack, but it may well be that a constitutional remedy is needed to restore harmony and health to the system. In this case, a physician or experienced practitioner should be consulted who will be able to treat the whole being with the indicated remedy.

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Antimonium tart. Chest full of phlegm which cannot be expectorated. Attacks at 3 a. m. Patient very drowsy but must sit up. Thirstless.

1 pill in the 6th potency half-hourly during attack.

Ipecac. Sudden wheezing and shortness of breath on slightest movement. Marked nausea and vomiting from cough. Weight and anxiety in the chest. Feet, hands and head cold and clammy.

Ipecac. 6 half-hourly during attack.

Kali. bich. Attacks at 3 or 4 a. m. Patient has to sit up and bend forward for relief. Mucus stringy and yellow or white.

Kali. bich. 6 half-hourly.

Moschus. For a very nervous and neurotic patient. Intense fear and anxiety and a feeling of being smothered.

Moschus. 6 hourly during attack and sometimes every three days afterwards will help prevent recurrence.

Nat. sulph. For chronic cases affected by dampness. Attacks at 4-5 a. m. brought on by damp weather. Pain and wheezing in chest. Patient has to hold the chest with the hands during an attack.

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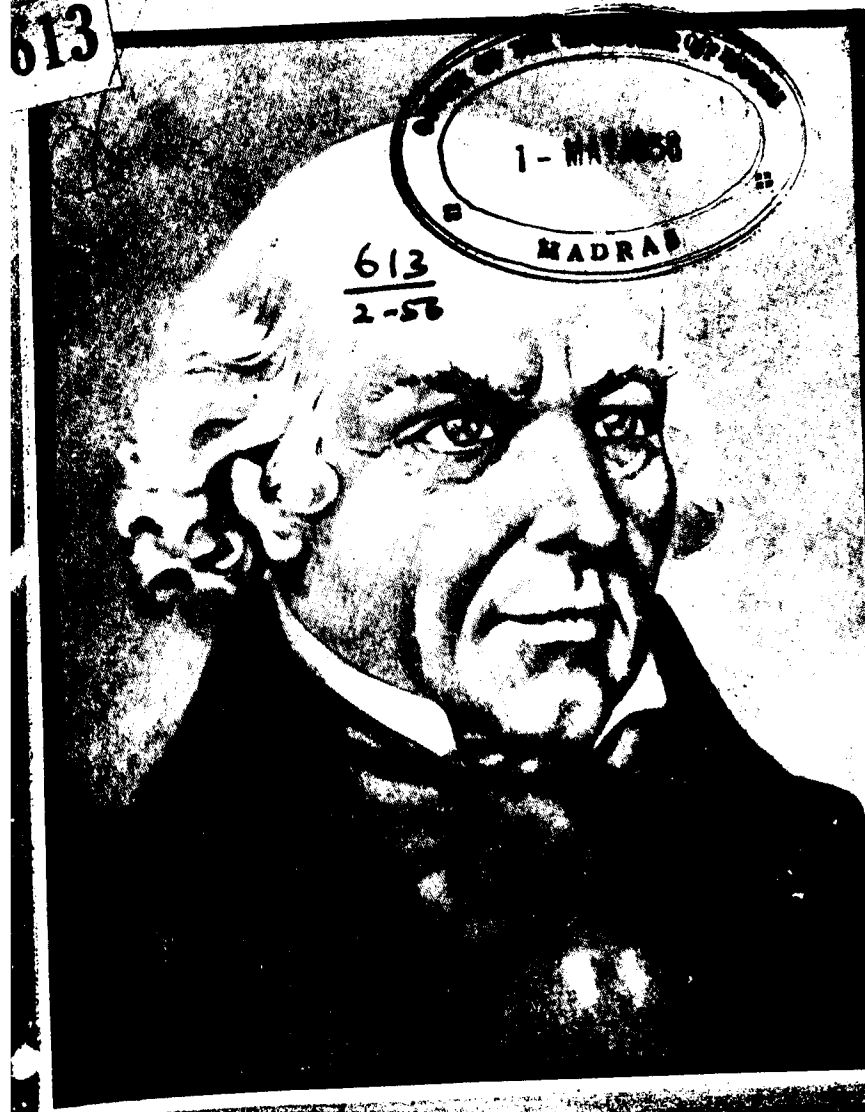


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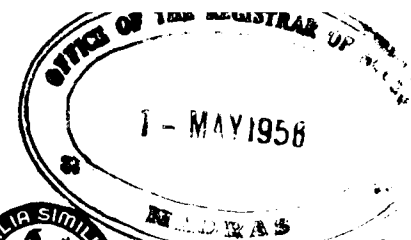
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HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

APRIL

1956

CONTENTS

201 Years	...	6
Report of the Ceylon Committee of Inquiry on Homoeopathy	...	11
Modern Medicine for our People	...	22
Totality of Symptoms	...	31
The Repertory in Homoeopathy	...	37
Homoeopathy in Germany	...	40
Homoeopathy in U. S. A.	...	51
History and Principles of Homoeopathy	...	59
General Conditions of Medical Aid in India	...	63
The Indian Institute of Homoeopaths	...	79
Correspondence	...	81
Homoeopathy in Ceylon	...	84
Laymen Homoeopaths	...	

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THE HOMOEOPATHY

VOL. V

APRIL

BOOK 4

201 YEARS

236
Dr. SAMUEL HAHNEMANN, the founder of Homœopathy, was born on 10th April 1755, in Merissen, Germany. The first edition of his book, the Organon, appeared in 1810. Thus, Homœopathy is only 146 years young, and considering what a revolutionary change it preaches in the practice of medicine and against what powerfully organised interests it had to make headway, we are satisfied that the time has not yet come to adjudge its real worth on the basis of popularity and number of adherents. Since its theory was first propounded, Homœopathy has had its ups and downs, especially in the land of its adoption, the U. S. A. In fact, it is not yet out of its teething troubles.

So far as India is concerned, its real history begins with the conversion in 1867, of Dr. Mahandra Lal Sircar of Calcutta. Within a century, Homœopathy has become so popular, in spite of the obvious handicaps, that now the total number of practitioners are computed to be in the region of 2 to 300,000 including all categories. From this, the number of families preferring to be treated by Homœopaths may very conservatively be put at 5 to 6 millions. This phenomenal increase in popularity which has been achieved in spite

of Government apathy and indifference all these years is a definite pointer to the fact that Homœopathy is in several respects well-adapted to conditions in India and that with reasonable government support it will succeed in being of service to several more millions. It is good that of that support, day by day, more of evidence is forthcoming. In the next few years as the second Five-Year Plan gathers momentum, this budding interest of both Government and the public in the possibilities of Homœopathy to solve our rural illnesses will gather strength.

If Homœopathy is to be able to meet that challenge of the future successfully, it is necessary that we keep Homœopathy in its pristine purity in India as a separate and original system of medicine.

While Dr. S. C. Sen, (who has submitted a separate note to the Report of the Indian Committee of Enquiry) and those of his way of thinking are frankly glad that Homœopathy has now dwindled in U. S. A., without bothering to find out why, Homœopaths must see that a similar fate does not overtake them in India as has happened in U. S. A. As Dr. C. V. S. Corea has so ably pointed out in his presidential address to the International Homœopathic Convention at Calcutta (reproduced on another page) the American Institute of Homœopaths, in a moment of weakness, made the fatal blunder of accepting the thesis that "A Homœopathic Physician is one who adds to his knowledge of medicine a special knowledge of Homœopathic therapeutics and observes the law of similars". As Dr. Corea remarks, "this ridiculous definition has done more damage to Homœopathy than anything that the allopaths and other opponents of Homœopathy have been able to do".

We are obliged to issue this warning as we find that there are some unthinking Homœopaths in India too who,

in their anxiety to get at least half a loaf of recognition, would be satisfied with this sort of compromising formula. The fate of Homœopathy in America should be a warning and a danger signal for our friends to stop and think before it is too late.

Homœopathy can flourish and be of service to the dumb millions of India only if its teaching, practice and research are kept entirely separate from other systems of medicines.

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Report of the Ceylon Committee of Inquiry on Homoeopathy.

Our readers will remember that in our August 1955 issue, we published a detailed report of the visit of Mr. K. Kanagaratnam a member of the Ceylon Committee of Inquiry on Homœopathy, to our Institute and Laboratory. He then wrote in our Visitors' Book that while he served as a member of the Committee of Inquiry on Homœopathy, a good number of the practitioners who gave evidence stated they received their lessons by post from the Indian Institute of Homœopaths and, in some cases, the practitioners had attended the Summer Course of Practical Training given by Dr. Murty. He was particularly struck by the business-like manner in which the entire organization was managed and administered. "The orderliness and cleanliness", he added, "of the place attract one's attention immediately. There is no doubt that Dr. Murty has imbibed the true spirit and philosophy of Homœopathy and runs the Institution in a way to serve as a model even for practitioners of other systems of medicine. I am glad I visited the Institute as I now see why it is so popular in Ceylon for its course of postal training and instruction and for its medicines largely used there".

The report of this Committee of Inquiry in Ceylon has just been published. The Chairman of the Committee is a prominent member of the Homœopathic profession in Calcutta, and the other four members represent the important official and non official elements in Ceylon.

In refreshing contrast to what happened in India, rival systems of medicine were not asked to sit in judgment on

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Homoeopathy. The Ceylon Medical Association, representing the allopathic profession did not even wish to give evidence before the Committee and their promised memorandum was never received.

With all this, there is a sameness, both in the procedure adopted and conclusions arrived at, between the reports of the Ceylon Committee and of the Indian Committee published in 1949. This is due to the fact that the Ceylon Committee largely took its cue from across the Palk Strait. To that extent the Ceylon Committee found its work easy and conclusions readymade, but Homoeopathy has again been poorer for this.

Committees of Inquiry are appointed with a view to study any problem in all its various aspects against the background of the country's needs and limitations and then to suggest practical ways of solving the problems which such a study discloses.

In the medical world of India, as well as Ceylon, what is our actual problem? It is not whether such and such a system is more scientific, or more popular, or more well-established or even deserves more encouragement. The chief problem is the dearth of medical attention in thousands of villages where the majority of our population dwells, the inaccessibility of most of the villages from the towns where congregate all the medical hopefuls whom we are able to produce, our sheer inability in any foreseeable future to produce enough doctors of the correct blue-blood type to man all our requirements (largely due to want of finance and qualified teaching personnel) and to induce them to settle in villages, and the frustration caused in consequence. No well-wisher of India denies the existence of these facts and these Committees must have been well aware of them. Yet, they have

APRIL '56

not stressed these points anywhere or tried to find out how Homœopathy could be of use in partially and practically solving these problems.

In the words of Dr. N. M. Jaisoorya, M. P., "The greatness of Homœopathy lies in the fact that it can produce a large number of lay practitioners whose contribution to social service is exceedingly great. It is the lay practitioner who is a unique feature of Homœopathy in India and I say that we cannot do without them, because they are in the present phase of our socio-economy, that is characteristic of India in particular, and Asia in general, a social and economical necessity for many years to come".

Homœopathy can, and has, produced a large band of trained lay practitioners mostly from among the rural dwellers, by means of its correspondence courses, planned and managed on honest, business-cum-social service basis. It is a pity that neither of the two Committees have had the patience, or imagination to investigate the possibilities of this feature in solving our major problem of rural medicine.

Nevertheless, let us hope, that both the Government of India and of Ceylon will find it worth-while to devote some time to look into this aspect of the matter before they undertake final legislation with regard to controlling the practice and teaching of Homœopathy.

Free Homœopathic Dispensary

The Annadana Sivan Sangham has opened a Free Homœopathic Dispensary at their Ashramam in Annalagraharam, Kumbakonam, devoted to social service work. It will be in charge of an experienced Homœopathic Doctor under supervision & management of The Indian Institute of Homœopaths, Kumbakonam.

Modern Medicine for our People

(Dr. V. R. Murty)

There is an old proverb in Tamil which, if translated, would read thus: "*Keeping a wolf to watch a herd of sheep.*" It does not require any explanation as to what will happen to the sheep! The medical and health services of India today are not in the hands of people who are members of the profession of any system of medicine. The Hon. Rajkumari Amrit Gour is a lady who was one of the devout disciples of Gandhiji. She is not a doctor and she is a lay-woman (you may call her "lay-lady, if you like) like our Kalyani, Parwathi or Chokkammal, of any of our villages in so far as medicine is concerned. Nearer home, our State Health Minister, the Hon. Mr. A. B. Shetty, is also a lay-man to medicine. Even at times when fully qualified medical men, like Dr. U. Krishna Rau, were members of the Madras Cabinet, such people were handling portfolios unconnected with medicine as a precaution against keeping a wolf to watch a herd of sheep. Even at such times, Mr. Shetty was the Health Minister, probably on account of his unprejudiced attitude and his love for the welfare of our people.

This is as it should be; because if a follower of a particular system of medicine were to be in charge of the medical portfolio, it may happen sometimes that he may be prejudiced and the fate of other systems of medicine may suffer in his hands. So, it all appears very well that people with no vested interests and who can be expected to be impartial are at the helm of affairs in our country and state, where, unfortunately, there are so many systems of medicine

practised, and one of such systems is the *ayurveda* of this land, which, some claim, was practised elaborately even two thousand years ago and is the base for all other systems of medicine.

But one fails to see why the disciple of Gandhiji, and Mr. Shetty in the south, always swear by *allopathy* and not only that, why should they look down upon all other systems of medicine, including, of course, *ayurveda* and *homoeopathy*. We refer only to *ayurveda* and *homoeopathy* here, because the former is the medicine of our land and as to the latter, we are intimately interested in it.

There are yet many people in this country, and among these there are a few practitioners of allopathy also, who would like to see that the state took some interest in encouraging the popular among the other systems also. One feels, from certain interpollations and other utterances of Dr. U. Krishna Rau, for example, that even he, a practitioner of allopathy, is not against such encouragement to the indigenous system of medicine *and* homoeopathy. (*Mind you: I have not stated 'Indigenous systems of medicine', but have added *and homoeopathy*, purposely, as I am quite sure that homoeopathy is not an indigenous system of medicine.*)

For the Health Ministers above mentioned, nothing appeals except allopathy, because that is the only *modern medicine*. Many people do not seem to understand this attitude of the ministers. Only the other day, in Madras, somebody said that even though we have advanced as a nation in so many ways after our independence, even though we have done many things which the world looks upon with awe and wonder, we have not advanced a wee bit in the matter of medical aid to our people. That friend again

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wondered as to how this has happened when such brilliant people like the Rajkumari and Mr. Shetty are at the helm of affairs. But our friend failed to grasp the vital point. Our ministers and other persons who direct the destinies of the health of our people are for giving them only "most modern treatment" for their diseases, whether they be living in the towns or the villages. They do not want to give to our ailing brethren anything which is not "modern" and which is not considered "Scientific" by the world, as that would be denying the people their rights. The intention, you will agree, is pure gold, and you cannot challenge it.

So the search for the most modern methods of treatment and the way by which it can be made to reach every one of our people goes on with untiring effort. Researches are started, not only in India, but we take advantage of the researches made all over the world. So many committees are appointed as it has to be thoroughly investigated, because, mind you, we cannot afford to give our people anything which is not most modern. On account of such researches only we have had the most modern drugs like the sulphonamides, the penicillin, streptomycin, aureomycin etc. etc. and even *acth*. But unfortunately when as a result of elaborate researches and findings a medicine is perfected and passed on to the people as "most modern", another research gives fruit and has to be given the place "most modern" and, as we have to give to our people only the latest most 'modern,' the previous one has to be abandoned, even if it is only one year old. Again by the time the latest "modern" medicine comes into the market, some snag is found somewhere in respect of the older ones. Either the lately "modern" medical wonder drugs or the sick individuals become crankish and do not respond to each other as they should! Only the other day one doctor of the 'modern' school was

APRIL '56

15

telling me that nowadays penicillin brought about allergic manifestations on more number of patients than it did a year or so ago and where originally about one lac units seemed to act, now even ten lacs are resisted.

At this rate, these researches are going on from day to day and year to year, *for the benefit of the people*, and the state is doing it regardless of the cost involved, only for the benefit of the people; but one feels frustrated seeing the ungratefulness, the hurry and haste of the people. Must they not wait till the scientists produce the most modern treatments for all diseases and what is the use of crying hoarse in the meantime? Even this issue contains a correspondence over some researches conducted on Fertility Control and one Dr. Chatterjee complains that so much of the tax payers' money is wasted; but such complaint-wallas will always be there and the state cannot afford to stop such useful "modern", "scientific" researches, which are undertaken for the benefit of our people, on account of the prattle of a few complaint-wallas. The good work will have to go on, and of course will go on, till the most "modern" medicine is evolved and our people will have to wait, not complain. If the people complain too much, all that can be done is only to investigate the truth of such complaints by the appointment of a committee, who will hear people who have no complaints and then give a report on the complaints of the complaint-wallas!

Writing about the unnecessary hurry and haste of the people, I am reminded about the hurry and haste of some people who wish to have Homœopathy recognised by the state. I do not understand (and I am sure that our health ministers, health councils and even our health and other committees, that are periodically appointed, will not

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understand) the hurry and haste in such matters. Homoeopathy is not a Modern System of medicine! It was originated by Dr. Hahnemann, about 150 years ago. Has there been any research in Homoeopathy during this period? By research, I mean, researches in the accepted sense of the word. Do not the real homoeopaths, follow the same methods, the same principles, the same drugs as used by Hahnemann, a hundred and fifty years ago? Can this compare with "modern" medicine, in which they constantly go on making researches, finding out all that was considered by scientific investigators as good last year are not good this year! And how do you expect the present day scientists to accept your 150 years old system, which has not changed so far, and which perhaps nobody would be able to change at some future date also, as the system suitable for our people, who must have the benefits of the latest "wonder"? You say that the totality of symptoms for the administration of your "Sulphur" or "Bryonia" is the same as laid down by Hahnemann, a hundred and fifty years ago. How can this be accepted as modern and as science? You say that Hahnemann prescribed "Bryonia" for a case that had pain on every movement and that the pain was better by hard pressure and that you would also do the same and in the same breath claim that it is science. Consider the number of scientific researches made all these 150 years and the changes in "modern medicine" during this period - how many new drugs have been introduced by the scientists and how many have been found to be useless later on. Is that not science, pure and simple? If at all your homoeopathy must be considered scientific, you will have to prove that Hahnemann was wrong and that *Bryonia* would be indicated in persons who are better by movement and worse by hard pressure and so on. That would be science!

APRIL '56

19

Such is the state of affairs today and many people, (of course all of them must be ignorant) clamour for recognition to homoeopathy. If such pressure from these trouble makers increase, something will have to be done and if the men ('men' includes 'women') at the helm of affairs take into their heads to recognise homoeopathy also it may be, perhaps, on a par with the very old system "ayurveda".

The people at the helm of affairs in Madras in the twenties wanted to do something for the Indian medicine and so started the Indian Medical School at Madras. At that time, because the person who thought of the Indian Medical School was not a true patriot (as he was helping the Britishers in their exploitation of the land) he did not feel that our people must have only the most "modern" treatments, and so it is that he helped to start the Indian Medical school for the teaching of Ayurveda, Siddha and Unani etc. Probably he thought that our people did not deserve "modern" treatment. This Indian Medical School, later on became the school of Indigenous Medicine and now, after the advent of Swaraj, since our ministers are all pure patriots and would not tolerate anything "not modern" for our people, the school has been upgraded and it has become the "College of INTEGRATED Medicine". This up-grading has been done in a very efficient manner. For example, when originally the hospital attached to the college had 210 beds, about 155 beds were allotted for Indian medicine, but as a result of the upgrading, the hospital has 270 beds and no less than 126 beds are allotted for Indian medicine, (only 31 less)! Originally, a sum of about two lacs was allotted for the preparation of Indian medicines, whereas after upgrading this amount has been brought down to about forty thousand rupees per annum. (See how much of the tax payers'

money is saved). To this extent, we are told, the Indian medicines used in the hospital has been reduced. In the integrated hospital it is said, there are about 900 modern medicines in use whereas there are only about 90 Indian medicines in use and it is also said that this hospital does not possess even *Tri-phala* and *Tri-katu*!

We along with people who direct the destinies of medicine in this state, pity the individuals who wail at such a state of affairs. The *tri-phalas*, and *tri-katus*, are as old as ayurveda, and are not certainly "modern"; they are most "ancient" and how can one think of giving to our people such old and antiquated medicines, in lieu of the latest "wonder drugs"? Does this not appear to be correct according to the methods of our "modern" ministers? Does not patriotism require that our people must be given only the most "modern", in order to be in the fore front in the world of medicine on a par with any other country in the world?

Under these circumstances, if a College of Homœopathic Medicine is started by the Government, would there be any surprise if the hospital attached thereto does not care to prescribe your Nux Vomica, and Sulphur in potencies and does not keep any of your so-called potentised medicine. Still it will be a College of Homœopathy, because, it is called so by the Government, but mind you, our people must have the most "modern" of modern medicines and that is patriotism too!

In these days many dairies, and milkmen pass off solutions of powdered milk and skimmed milk as pure milk. It is often very difficult for the housewife to find out the hoax although in taste and smell the two are different.

There is, however, a very simple method of distinguishing the two. Pure milk, when heated, will foam and froth at first and then start boiling. The powdered milk variety will not rise up in foam but will only boil.

TOTALITY OF SYMPTOMS

(By Sri R. Ramachandran, Madras)

The famous fountain pen, Parker 51, consists of, say, 15 parts. If you manage to collect all the 15 parts and put them in a jumble you wont produce that fountain pen. You will have to fix them in a definite pattern and with precision before you produce that deluxe pen.

The above analogy should be thoroughly understood before an understanding of the phrase "TOTALITY OF SYMPTOMS" is attempted. Even experienced homoeopaths have only a haphazard idea of this very important aspect of Homoeopathic science. In consequence, many of the elaborate casetakings that I have seen, constitute only a jumbled mass of numerous single symptoms which do not reveal the disease pattern at all, let alone the indicated remedy. And it follows that if one were to attempt a repertory analysis with such basic error, the indicated remedy will not be obtained at all. Many of the text books dealing with this aspect of Homoeopathic Philosophy describe it so abstrusely that students of Homoeopathy are more apt to be bewildered than put wise. I should say, however, that Dr. Kent alone of all the authors has made the subject easy of comprehension.

Let me recapitulate a few of the learned quotations on the subject :

"It implies not merely a numerical aggregate of all the symptoms but also relates to the synthetic comprehension of a concrete individual picture of the patient through logical combinations of general, particular and strange, rare and uncommon symptoms as are manifested by the patient".

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Let us delve further into this mysterious subject.
Phenomena of Cause and Effect.

It is generally accepted that all happenings and phenomena in this world are the results of some previous cause, and that they are not casual or accidental. But it is extremely difficult to determine the direct causative factor of any happening or phenomenon with any degree of accuracy because the so-called causation itself may be the result of a previous cause. So it is, there are thinkers who have postulated that there is no such thing as cause and effect, that things do happen as it were, and that it is not possible to trace any relationship between the so-called cause and effect. As Hume argued, no experience can cause another experience, any more than one fact can produce another and entirely different fact. Experience is composed of random sensations.

An illustration may be considered here. I have been having a severe headache for years. In my impression it is due to severe knock on the head in an accident. It might be easy to say that the headache is due to the knock on the head. But the accident itself was caused by my being absent-minded at the time. I might also add that my absent-mindedness is traceable to a severe, exhausting illness I suffered from much earlier. That illness itself did not come about without a cause. I think it was due to overwork.

So you see in the above series of happenings that it is difficult to say what exactly is the cause of my present

headache. One may be right in saying that the overwork (which may have a prior cause) I was subjected to years ago is the cause of my headache.

By deduction in the aforesaid manner some thinkers have stated that man is subject to a series of events and phenomena and that it is not possible to say what cause leads to what result.

But this type of reasoning is fatal to our teachings. We have necessarily to know what possibly may be the causative factor (exciting cause, pre-disposing cause) operating in the sick man. Unless we have a clue to this information, our prescription will be well-nigh impossible. So without adopting an extreme line of thinking, we take it that for homoeopathic purposes, there is an immediate or remote cause which is at the back of all ailments.

How Cause and Effect are related. How are a series of happenings which we designate as cause and effect, related to one another? How do earlier events shape later events and cast their own impress on them?

Dr. Kent gives an illuminating example. Imagine a chain composed of a number of rings or hoops. Can you see the connection between the first and last rings? They are connected by means of the intermediate rings. You may, therefore, well say that the shape and substance of the chain is maintained because of the connection of each of the hooks with the preceding and succeeding rings. The first ring holds the last ring in position through the intermediate rings.

Cause and effect are related to each other in the same manner. The cause may be compared to the first or the

preceding links of the chain, and the effect, the last or the succeeding links. The stage at which the patient consults the homœopathic physician may be compared to the last link of the chain. In order to ascertain the Totality of Symptoms, Hahnemann insisted that the previous links of the disease, commencing from the cause, should be determined. It is not enough to elicit all the present symptoms of the patient at the time of consultation. His entire health history should be gone into before forming a mental picture of the Totality; that is why homœopaths take so much trouble in case-taking, and interrogate the patient so assiduously. The case-taking so compiled should aim at unravelling not merely the relevant disease symptoms and disease pattern presented, but should spot out the causative factors in the patient. In fact, there is no Totality without Causation. This needs any amount of emphasis. I have been enabled to effect magical cures wherever I was able to pin-point the causative factors. Those patients in whom these factors were not so much evident, did not progress satisfactorily. So I repeat, in every patient that you treat, try to discover the causative factors which are operating. Treat the cause, treat the patient on the basis of the Totality. Don't tackle him on the basis of a fictitious name of the disease in Latin or Greek! Above all, try to discriminate between useless and really worthwhile symptoms which Hahnemann called prominent, uncommon and peculiar. Before concluding, I may give a brief resume' of the meaning and purport of the term "Totality of Symptoms".

1. The Totality is a mental picture or comprehension of the disease pattern.

2. It refers to the patient who is sick-not his hand, nor his eye, nor his heart.

3. No Totality can be arrived at theoretically based on the name of the disease. In other words, no Totality can be found out unless the sick man is brought before us in flesh and blood. In the same way for one and the same (name of) disease suffered by different people, there will be different totalities.

4. The Totality constitutes the entire disease-starting from the cause of the disease and going through the several phases and evolutions of the disease and presenting a certain disease pattern at the time of the examination of the patient.

5. The various individual symptoms of the patient are looked upon as the components or parts of a machine. If the parts are put together in a certain form and arrangement the machine will function. In the same way the symptoms of the sick man taken as a whole and viewed as a whole must give a mental picture of the disease-pattern which is afflicting the patient.

6. "The removal of the totality of the symptoms is actually the removal of the cause. Since causes are continued into effects (i. e. causes continue in ultimates), all ultimates to a great extent contain the cause of the beginnings". (Dr. Kent)

7. "The totality cannot be removed without removing the cause" (Dr. Kent.)

8. The totality can be likened to a chain which is made up of several links. Since every link is dependent on the preceding link, we can say that the last link or loop depends on the first through the intermediate links. Then only the form and substance of the chain as a whole can be maintained. In the same way, the totality refers to a mental

understanding of the invisible disease, starting from the cause of the disease and studying the further progress and effects of these causes in the life of the patient. In fact the philosophy of cause and effect determines the totality.

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Clinical tests on Homoeopathic treatment were conducted in 1953 in Soviet Russia. The Public Health Ministry complained afterwards that doctors at the Botkin Hospital adopted an "insufficiently serious attitude" towards the tests, which were held on a small number of patients and did not permit the drawing of definite conclusions. Now, a new study has been ordered. Special discussions will take place and patients will be treated by Homoeopathic methods in Leningrad and Kharkhov as well as in Moscow,

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Now, let us try to study the origin and nature of the Repertory in Homœopathy. A Repertory is a work on symptoms and conditions of disease regarding remedies, arranged according to the "Hahnemannian schemata" for easy and ready reference. Repertories were started when 'provings' became numerous and bulky. Each compiler chose a method suited to his taste. The first Repertory was published in America in the year 1838. This *Repertory to the Manual* by Constantine Hering is not in existence now. Boenninghausen's *Pocket Book* published in 1845 is still in daily use. The plan of the book was approved by Hahnemann. This is a master piece in generalizations. A symptom in

general, according to Boenninghausen, is one without modification. Location also is very strong in this book. The individualization of each case is enabled by the mental symptoms at the beginning of the book divided into mind and intellect, by the full list of sensations and aggravations and ameliorations. The remedies are given in five different types. The last third of the book is devoted to relationship of remedies. Under each heading, related remedies are printed in four types to show the degree of relationship.

Next we come to *Jahr's Repertory*. Here the author listed remedies for diseases, then remedies for symptoms of diseases, and then the symptoms of the patient, general symptoms modified and particular symptoms with their modifications. He emphasised that the symptoms of the patient were the most important and must be sought before finding the remedy.

Hempel's Repertory was published in the year 1853. Hempel relied mostly in 'particulars'. He kept the symptoms in the words of the 'prover', and most of the symptoms have only one remedy.

Knerr published his Repertory in 1896. Knerr was the son-in-law of Constantine Hering. This repertory is a bulky volume. As a reference repertory for comparative research, it is a useful book.

C. Lippe's work is a landmark in the history of the repertory. He published his Repertory in the year 1880. Basing his work on the 1838 Repertory, he added selections from Boenninghausen, Adolph Lippe, Bell, Guernsey, Hering and Jahr. He has followed the Hahnemannian schema in the *Materia Medica Pura* and added a section on 'Generalities'. Lippe uses only two rubrics unlike Boenninghausen

who uses five. In Lippe's Repertory the great majority of rubrics have so very few symptoms that combinations of them lead us nowhere.

Now, we come to *Kent's Repertory*. It was first published in 1900. Kent improved upon all the existing repertories, adding his own observations. To Kent, *local* was the most important factor in finding a remedy. Hence all the symptoms affecting a part were placed in alphabetic order in the chapter on that part. If it affected the whole, then it was placed in whichever chapter of a whole that it belonged. The arrangement of chapters followed the Hahnemannian Schema. The mental generals, with the exception of a few found in 'sleep' are in the chapter on 'mind'. The physical generals, those of the patient as a whole, are found in the chapter on Sleep, Chills, Fever and Generalities. The symptoms of the parts run through the other chapters, each containing all the symptoms of that part. In the third Edition Dr. Kent says:—

"This third edition completes my life-work. I have brought it uptodate. I have rearranged and made numerous corrections in addition to adding many new remedies. I have verified every symptom in the book. You will find all remedies of any value contained herein. The book is complete". The fourth edition was published by Ehrhart and Karl in 1935.

The fifth edition of *Kent's Repertory* was published by Dr. Clara Louise Kent in the year 1945. Many are anxiously awaiting the publication of the sixth edition of this colossal work. This is the only repertory which has worked out modifications logically to great detail. The Boenninghausen method and the Kentian method are considered to be the best ones available for repertorisation.

Gentry's Concordance is another repertory published in six volumes. Owing to its bulk, repetition and lack of useful method, this repertory has not been popular.

Apart from these, Card-Repertories have been published by some authors. Dr. Margaret Tyler was the pioneer in the field. Based on Kent's Repertory, the Card-System has been carefully prepared though incomplete. The next was Richard Field's *Symptom Register on Cards*. *Boger's Card Repertory* follows the Boenninghausen method. It directs to Kent for particulars. Lastly we have *Jimenez's Card Repertory* published in Mexico. This "practical card Repertory" is the result of years of patient labour.

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Homoeopathy in Germany.

(Some are under the impression that Homoeopathy is not flourishing now in Germany. We reproduce below an extract from INDIA, a high-class Quarterly published in Germany and devoted to promotion of commerce and cultural relations between Germany and India. This paragraph appears in an article entitled "The German Pharmaceutical Industry," by Mr. Oswal Gerhardt, Cologne—The Editor).

The three hundred thousand odd Homoeopathic Doctors in India, the "land of Homoeopathy", will be particularly interested in the factories for biological medicaments. They manufacture medicines out of herbs, though not like a wise shepherd who hoards more or less mysterious secrets and sells traditional prescriptions, but according to the procedures and objective principles of science. Firms like Dr. Madaus & Co., in Cologne-Merheim or Dr. Wilmar Schwab Ltd., in Karlsruhe-Durlach maintain biological institutes under responsible experts, in order to test the healing properties of time-honoured medicinal plants by modern methods of exact research. It goes without saying for the medical on-looker that this usually demands varied and careful checks on many control animals. For the manufacture of medicines with precise dosages, which the conscientious physician must demand in the interest of his patients, requires more than to make extracts or fomentations of medicinal herbs; it requires the exact and thoroughly tested combination of their active vegetable substances, whose prophylactic or therapeutic efficiency must be previously determined, as regards both quantity and quality. The best guarantee is the reputation of the German factories for the successful production of biological medicines from fresh plants. This explains why their biochemical tablets, globules and triturations are once more to be found throughout the length and breadth of

the sub-continent, from the Punjab to Travancore, from Saurashtra to Bengal.

But biological medicaments are obtained not only from vegetable raw materials, but also from materials produced by animals, by small six-legged animals, for instance, i.e. insects, and insects that from time immemorial have been sung and prized as symbols of industry namely, bees.

South of Ulm, a town in South Germany, you will find at Illertissen on a sidechannel of the river Iller the largest bee-farm in Europe. It belongs to the chemical and pharmaceutical factory of Heinrich Mack Nachfolger and has no fewer than one thousand colonies of bees. The firm's scientific staff is not only concerned with the delicious honey which has given the bee an honoured place among man's "domestic animals" for thousands of years. It is still more interested in the poison secreted by the bee.

Worker bees - not drones - have a long, tubular poison-gland about 13 to 14 mm long, whose secretion is stored in the poison-bag in the abdomen and ejected by the sting. It is only a tiny drop of 0.3 mg, but it is enough to cause painful inflammation after a sting by a bee, even if the sting, which mostly breaks off, is immediately taken out of the wound. This bee-poison has certain remedial effects on rheumatic complaints, as bee-keepers have always known. That is why a thousand colonies of bees are kept at Illertissen; they are a natural source of raw material for medicine made from bee-poison. This does not mean death for the actual producers of the poison, the industrious bees themselves. Nimble-fingered "bee-girls" in the factory have learnt by pressing gently on the bee's abdomen to make it eject the coveted secretion, while it is well known that, as soon as a bee has stung a person the wound in its abdomen caused by the sting-breaking is almost always fatal.

A pharmaceutical enterprise which knows how to obtain an animal-secretion with so much consideration for its donors and which is able to transform the poison of an insect's natural weapon of defence into medicine for man naturally works according to scientific principles of thought. In all its activities - whether it manufactures from honey a medicament for lowering blood-pressure or for relieving a cough, whether it processes bee-poison into medicine for rheumatism in the form of ointments and injections, whether it also produces (as is actually the case) hormone preparations of medical value, ferments and protective medicament for the skin - the Illertissen plant, like others, is under the supervision of experts who direct research so as to discover new possibilities for using their products at the sick-bed. It was this firm that exported their novel medicaments made from bee-poison to India before the last war, and they are once more to be found in the huge sub-continent with its 400 million inhabitants that lies between the Himalayas and the Indian Ocean.

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39

HOMOEOPATHY IN U. S. A.

Presidential Address delivered at the International Homoeopathic Convention Calcutta

(By Dr. C. V. S. Corea, Colombo, Ceylon)

(By kind permission)

It gives me great pleasure indeed to be present here at this august assembly and I thank the organizers of this momentous Convention for the great honour they have done me in electing me the President, which I can assure you I appreciate very much. I come here today to represent the World Homoeopathic Congress, as its International Director for Asia and the Homoeopathic Association of Ceylon, of which I am the President. It was my privilege just a year ago to have been invited to represent my country and Asia at the Inaugural Meeting of the First World Homoeopathic Medical Congress held at Rio de Janeiro in Brazil, to which delegates from practically every country in the world came in large numbers to represent their respective countries. The gathering there was indeed of a most representative character and the resolutions adopted at that Congress were of momentous importance towards the establishment, and unification of Homoeopathy throughout the world. It is with very great difficulty indeed, that I have been able to get away from my practice and other activities, but I thought that as this Convention is of great importance to Homoeopathy and Homoeopaths, it was well worth the inconvenience and expenditure incurred, and I hope that the deliberations at this Convention and the conclusions arrived at would be of the greatest importance to Homoeopathy in the whole world.

I have spent many hours, days and weeks, nay, months on meditation as to how it has come about that this great

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truth of the Homoeopathic Law has been suppressed in this enlightened century of ours and after reviewing the situation from practically every possible angle I have come to the conclusion that the recession of Homoeopathy in the world today is definitely and without the slightest doubt due entirely to the ignoble and fallacious definition given by some Eclectic bodies both to Homoeopathy and the Homoeopathic physician. Those of you who have gone deeply into the study of the history of Homoeopathy would know that the purely Homoeopathic Hospitals, Medical Colleges, and other Institutions, which were doing splendid work and flourishing at the time of the stalwarts of Homoeopathy like the great Kent on whom the mantle of Hahnemann has fallen more than on anyone else, have been completely wiped out as a result of Eclectics creeping in and forming an over-whelming majority in those bodies that were responsible for the government, maintenance and continuance of those institutions. When the Eclectic body known as the American Institute of Homoeopathy, defined Homoeopathy as an addition or a mere appendage to Allopathy, it sounded the death-knell of Homoeopathy, and it was certainly for no idle purpose nor for any caprice, that the great Kent along with the oldest and most respected members who were all genuine Homoeopaths, left the American Institute, and formed a separate Association, known as the International Hahnemannian Association. In an address to this new Institution, Kent says, "Was not this Association formed solely for the purpose, as expressed, of perpetuating and developing true Homoeopathy?" "Was it not felt at the time of its organization that the hour had come for true men to arouse themselves, and work for the Science they loved? Had they not heard all the principles which Hahnemann had taught, and which the experience of many had proved to be true, vilified and abused, had not in short all true Homoeopathy been driven from the Institute?"

The Homoeopathic School, then as now was divided into two parties the one representing Eclectic methods and practice, the other the principles and practice of Hahnemann, of Gross, of Boenninghausen, of Hering. The time had come when all practitioners had to decide which of the parties they should join, and let it be to the eternal glory of these men, that they chose rather to be right than to be with the majority. In the history of the American Institute we may read a warning for us. In its first years the Institute was composed of able and true men and its purpose was for truth and usefulness. But little by little Eclectics were allowed to creep into its membership, and lo and behold! the whole body is Eclectic. It is not great numbers that we want, but men of truth and purpose. Personal interests and ambitions have no place here but only what is truth." It is a matter of great regret that even this International Hahnemannian Association has turned Eclectic, after the great Kent, and its illustrious founders, so that today there is hardly any Institution in the U. S. A. or Europe where true Homoeopathy is taught in the way it should be, and practised in accordance with the teachings of its Founder, the Immortal Hahnemann, as found in the Homoeopathic Bible—the Organon and the Chronic Diseases. Indeed, has it been said by masters, since its writing that new truths come out of it, after every reading, to suit the varying degrees of advancement in the progress of each faithful observer, no difference how old or how wise. The masters of these living doctrines and the Materia Medica have been constant readers of this great work. Not one of the prescribers have ever claimed a discovery not fully set forth in this work, but all in their greatest accomplishments have said that they based their successes upon the Organon. It is the first book for the student to read, and the last for the old and busiest physician to ponder over. When Lippe, Wells, and scores

of others advocated a continuous reading of this book during their long careers, should we not similarly look upon it with a feeling of profound respect? Hahnemann formulated the principles of Homoeopathic therapeutics. He so arranged the rules of practice in the Organon and Chronic Diseases that the system of Homoeopathic therapeutics, may be considered complete. Hahnemann's teaching has never been improved upon.

It is a matter of great pride and satisfaction to know that there are a few Institutions in India which cater for Under-graduates. The ideal to be aimed at in my opinion should be the re-establishment of purely Homoeopathic Medical Colleges where the Basic Sciences and pure Homoeopathy alone are taught to the exclusion of all Allopathic Therapeutics. The students of these Colleges should be of a high educational standard on a par with those of the Allopathic School.

I am not unmindful of the use and help of the many thousands, who have been practising as Homoeopaths in India and other countries in the East, and I am sure that most of you assembled here would agree with me when I say that we are most grateful to all these men who have helped to propagate and advertise Homoeopathy although, a large majority of them do not practise genuine Homoeopathy as such, but confine themselves to the practice of Schuessler's Biochemic system, Count Matty's System and others. It must be remembered that it is because of these men who are in existence in their hundreds of thousands, that the name of Homoeopathy has come to be known through the length and breadth of those countries in which they practise and as a mark of our esteem for the work they have done in this connection, I think it is nothing but right to honour them by listing them, which would confer on

hem the right to practise as long as they live. We also welcome all those Allopaths who have abandoned Allopathy and taken to Homoeopathy. They must not be confused with the Eclectics, who in my opinion are a menace to the advancement of true Homoeopathy, as one cannot serve God and Mammon. Kent says, "The Eclectics claim to teach in the most scientific manner of all because they select the good from all schools of medicine. Who has guided them to this great wisdom?" Do they pretend to have a law or a philosophy to enable them to select the wheat from the chaff? No, such a thing does not belong to their pretensions. They even claim the greatest empiricism to be the highest order of science. The greater, the chaos and confusion the greater the science?

I am therefore convinced that in order to safeguard the interests of genuine Homoeopathy it is imperative that from now all those who would be eligible for registration to practise as Homoeopaths should be men who have graduated from purely Homoeopathic Medical Colleges of a very high and uniform standard. It is then, and then only, that we would be able to put Homoeopathy on a sound footing, which will not only enable it to hold its own, but also be in a position to prove by its results that it is unquestionably the greatest and most scientific system of healing the world has ever known.

I should like at this juncture to refer once again to the all important question of the definition of a Homoeopathic physician, and I propose that the following definition of a Homoeopathic Physician as given by Kent be adopted by this Convention.

"The Homoeopathic physician is one who prescribes the single remedy in the minimum dose in potentised form

selected according to the Law of Similars." We must also declare that this meeting of Homoeopaths is definitely opposed to the fallacious definition of a Homoeopathic physician as given by the American Institute of Homoeopathy which reads—"A Homoeopathic physician is one who adds to his knowledge of medicine a special knowledge of Homoeopathic Therapeutics and observes the Law of Similars." This ridiculous definition has done more damage to Homoeopathy than anything that the Allopaths and other opponents of Homoeopathy have been able to do. It is this stupid definition that prevents every man from becoming a good Homoeopathic physician. Kent says "The astonishing part of this formula is that it frames into the definition just the part that prevents every man from becoming a Homoeopathic Physician." It cannot refer to the basic Sciences of Anatomy Physiology etc, as they are a part of a doctor's rights and possessions, and there is nothing to add to these.

He also says, "Was not the adoption of this definition for the sole purpose of giving standing to men whose requirements were a knowledge of fads and traditional absurdities and ignorance of Hahnemann's Organon and the Pure Materia Medica? It is a question that must come to the mind of every thinking Homoeopathic physician. It has been often asked why Homoeopathy grows so slowly. Is it not apparent that the reason is to be found in the sentiment that caused the adoption of this definition of the Homoeopathic physician which so misrepresents the true followers of Homoeopathy? Yet the American Institute of Homoeopathy definition permits the fraudulent misrepresentation to pose as a genuine Homoeopathic physician." You will now see the great importance that must be attached to the correct definition of Homoeopathy and a Homoeopathic Physician. It is on this definition that hangs the future of Homoeopathy. Are we going to allow the same fate to overtake Homoeopathy

in Asia as in the U. S. A. and Europe, or are we going to plant the banner of true Homoeopathy so firmly and high in the soil of Asia that it would in time go from strength to strength, and vindicate the superiority of this system of Medicine over all others?

In this connection I should like to inform you that we in Ceylon intend to have a Homoeopathic Hospital and a purely Homoeopathic Medical College on the lines I have laid before and with the Grace of God, hope to set an example to the rest of the world as to how a really genuine Homoeopathic Medical College should be run.

I have read a pamphlet by the Conveners of this Convention to the effect that they intend to make this a World Organization. As there already is in existence today a World Homoeopathic Medical Congress which is a World Organization, may I suggest as an International Director of this Organization, that in order to avoid duplication of such Organizations which would inevitably diminish the strength and prestige of each of them, that we form a Homoeopathic Congress of Asia, and affiliate it to the World Homoeopathic Medical Congress? In such an event, I can assure you that I will give you all the help that is within my power to the best of my ability.

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HISTORY AND PRINCIPLES OF HOMŒOPATHY

Homœopathy is the system of medicine founded by Dr. Christian Frederick Samuel Hahnemann, who has been called a Reformer of Medical Science. This illustrious man was born in Germany in the year 1753, and as a student he had shown such brilliance of intellect that he was called by his teachers, "the double-headed prodigy of genius and erudition". Hahnemann, besides being an allopathic doctor of eminence, was a master of seven languages. Deeply intellectual and thoroughly conscientious, he was unwilling to inflict suffering on his patients by the practice of a system of medicine, which he characterised as "barbarous". It is said that in utter disgust he threw up his flourishing practice and plunged himself and his family into poverty in his search for a law of cure as certain and precise as the other laws of nature.

While engaged in this search, Hahnemann was translating some of the books on medicine of his time, amongst which was Cullen's *Materia Medica*, when the idea came to him to test the action of drugs on himself to ascertain their power to produce sickness. Having taken a quantity of Peruvian bark, (*Cinchona*), he found, to his surprise, that it produced in him the symptoms of the sickness which it was supposed to cure. He thus discovered what he set out to find, namely, that the Peruvian bark could cure ague only because it had the capacity to produce it in a healthy person, when given frequently in small quantities.

APRIL '56

51

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Hahnemann tested many drugs on himself, the members of his family and his students, and established the truth that it is only by their power to make people sick that drugs can cure the sick, and that a drug can cure persons of only such a sickness as it is capable of producing in healthy human beings.

At this point it would be necessary to explain how drugs are "proved". Several healthy persons of both sexes and of different ages are made to take a particular drug and when the poisonous effects of that drug begin to appear, further taking of the drug is stopped and the symptoms of poisoning are allowed to develop. When these have developed fully and pathological changes also begin to take place, the "provers", as they are called, record all their mental and physical symptoms. These records are then studied and the *Materia Medica* of that drug is built up.

The poisonous effects of drugs taken by the prover gradually pass away automatically, and that without doing any permanent harm to him, though he is subjected to some temporary sufferings. Hahnemann himself proved many remedies and lived in full vigour of health for 89 years. This shows that the proving of drugs did not inflict any harm on him.

As Newton discovered the Law of Gravitation, Hahnemann discovered the great Therapeutic Law of Cure, which he enunciated in the memorable words, "*Similia Similibus Curantur*". Homoeopathy maintains that, unless medicines are tested on healthy human beings, the true picture of a drug for use on human beings cannot be obtained. A test on a sick person can only give a picture of the drug, *plus* the disease, while experiments on animals do not bring out the same picture and symptoms of the drug, as they would, had

they been used on healthy human beings. Testing drugs on animals is useless for the building up of a correct *Materia Medica* for the use of human beings. Homoeopathy here maintains that the common saying, "one man's meat is another man's poison", is tenfold true, when it comes to the use of drugs.

After Hahnemann had formulated his law of cure and had explained the method of building up a *Materia Medica*, an enthusiastic band of disciples about 50 in number, many of them medical men of repute of the orthodox school, gathered round him and with their co-operation he proved drug after drug, taking all possible precautions to eliminate error. These original provings, carefully and faithfully recorded, form the nucleus of the Homoeopathic *Materia Medica*. They are embodied in his monumental work, the "*Materia Medica Pura*", which is as alive and up-to-date to day as on the day it was written. His next work was "*Chronic Diseases*", and the treatment of chronic disease is said to be the crowning glory of homoeopathy. These two works also with his "*Organon of Medicine*", in which the entire science and philosophy of disease and cure are explained, form the basis of Homoeopathy.

Homoeopathy has no place for specifics, nor does it prescribe a named remedy for a named disease. It takes the individual as a whole, studies his personal reactions to environment, physical, mental and moral, as well as his deviations from the normal, and especially from his own normal, due to sickness. Thus Homoeopathic provings have to be very fine, very delicate and definite, and the subjective and objective symptoms obtained from tests on healthy human beings carefully recorded. For whenever any patient's condition corresponds to the drug picture obtained in this way, the drug in question can cure him irrespective of the name of the malady. As Hahnemann himself wrote:

"to cure mildly, rapidly and permanently choose for every case of disease a medicine which can itself produce a milar affection".

Hahnemann did not stop after his discovery of this great law of cure. He discovered no less greater a truth in his process of "potentisation", (or "dynamisation"), of drugs.

While using drugs in their crude form according to the law of Similars, he noticed that, though in the beginning there was aggravation, this aggravation used to pass off and was followed by cure. He now began to reduce the quantity of the crude drug to see if this temporary aggravation could be avoided and noticed that the more the quantity of the dose was reduced, the lesser was the aggravation and quicker the process of cure. This led him to "potentise" the drug, and the process is as follows:

For the centesimal "potency" one drop of the mother tincture of a drug would be added to 99 drops of alcohol, and "succussed". "Succussed" means holding the phial containing the drops of mother tincture and alcohol with the right hand and striking it against the palm of the left hand 40 times, so as to impart a double jerk to the contents of the phial. The contents of the phial, after the above process of jerking, become the first centesimal potency of the medicine. Then, one drop of this first potency is added to 99 drops of alcohol in another phial and succussed as above. This gives the second potency of the drug. Then, one drop of this second potency is added to 99 drops of alcohol in another phial and succussed as above. This gives the third potency. In this way a drug is run up to higher and higher potencies.

Similarly, decimal potencies are made by adding one drop of the mother tincture to 9 drops of alcohol.

The drugs proved by Hahnemann and his followers were run up to the 30th potency, and with these he and his followers cured all their cases. At the present day, drugs have been run up to the 200th, 1,000th, 10,000th, 50,000th and 100,000th and so on up to M. M. potency. This potentisation is now done mechanically and not manually. In the case of solid substances like gold, silver, silica, &c. which are not soluble in water or alcohol, the first few potencies are made by triturating the substance with sugar of milk instead of alcohol, and when, after being run up to the third or fourth potency, they become soluble in alcohol, alcohol is used for the next potencies in the same way as in the case of soluble substances.

By potentisation the quantity of the material medicine is reduced, but its quality, that is to say, its curative power, is increased. Chemical examination would fail to detect any material medicine in the 200th, or even the 30th potency. But it is claimed that only potentised drugs, which are as fine and subtle as the vital force can reach the vital plane, act there and cure disease. Dr. Boyd of Glasgow has recently published a paper on "Biochemical and Biological Evidence of the Activity of High Potencies."

It would be interesting to note here that many reputed allopaths of Hahnemann's time, including Dr. Constantin Hering of Germany and Dr. Hans B. Gramm of Denmark, were sent to refute his discovery, but all of them, men of wide vision and keen intellect, abandoned allopathy, "unlearnt" all that they had learnt and became faithful and honest converts to homœopathy, as soon as its science and philosophy were explained and it was practically demonstrated. In later years many others, amongst whom Dr. J. T. Kent of America and Dr. Sircar of India may be mentioned, abandoned allopathy and embraced homœopathy.

Dr. J. T. Kent said :—

“Homoeopathy will not be universally adopted for many centuries. There are many peoples in the world who cannot believe a great truth, however much evidence is presented in its favour. We are all encumbered with tradition. The tendency to ridicule what we do not understand is born in us, only a few refined and educated minds that have been opened by circumstances are prepared to examine our principles.”

Dr. Sircar, who was Vice-President of the British Medical Association, wrote in the Calcutta Journal of Medicine of his conversation :—

“I was thus equally with my professional brethren a hater and denouncer of Homoeopathy. and perhaps the most furious of them all. Like them, I had no knowledge of it, except from the caricatures of the orthodox opponents. This distorted knowledge, derived from misrepresentations of the system aided by the apparent absurdity of the law of ‘Similaris’ and the infinitesimal dose, was enough to justify my refusing to read books on Homoeopathy by Homoeopaths, that is, by those who had practically investigated its claims and found them based upon facts.”

Homoeopathy has survived for over a hundred and fifty years and it is not inappropriate to reproduce here, what the founder of this system of medicine wrote shortly before he died :—

“I rejoice at the benefit Homoeopathy has already conferred on humanity, and look forward with intense pleasure to the not distant date, when, though I shall no longer be here below, a future generation of mankind will do justice to this gift of a gracious God, and will thankfully avail themselves of the blessed means He has provided for the alleviation of their bodily and mental sufferings.”

—from the Report of the Ceylon Committee of inquiry on Homoeopathy

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GENERAL CONDITIONS OF MEDICAL AID IN INDIA

The Health Survey and Development Committee found that the present position regarding the availability of proper medical facilities for the vast majority of our people was very unsatisfactory and that the proportion of doctors, taking into account both graduates and licentiates in medicine, to the population was approximately 1 in 6,300, against 1 in 1,000 and 1 in 1,750, respectively, in the United Kingdom and in the United States of America. We agree with the Health Survey and Development Committee that while a mechanical application of existing ratios in other countries to India may not be justified, it is certainly necessary to increase materially the existing proportion in India of doctors to population in order that Medical aid may be provided to the people to such an extent as may be possible.

The number of hospitals and dispensaries in the country is not at all commensurate with its requirements. Moreover by far the majority of these hospitals and dispensaries are not properly equipped both in staff and appliances. Another aspect which requires serious consideration is that medical practitioners, hospitals and dispensaries are mostly located in urban areas and these facilities are much less available for the rural areas where live by far the majority of our population.

The absence of properly qualified medical men and of hospitals and dispensaries renders it possible for quacks and quackery to thrive. Two other important factors which have materially contributed to the growth of quacks and quackery are the ignorance and credulity of the people. It is a fact of psychology that a man suffering from a disease or seeing his near and dear ones suffering from it will turn

without hesitation to any one who professes to bring relief to the sufferer at a cost which is within his means. Such a person can ill afford to be critical about the actual 'qualifications' of the person promising such relief.

It is common knowledge that India practically lives in villages. No government can be indifferent to the needs of the bulk of its people wherever they may be residing. In the course of our investigations this disproportionate distribution of medical practitioners and facilities as between urban and rural areas came repeatedly to our notice.

Extent to which the Homoeopathic system is practised in the Country

The extent to which the homoeopathic system is practised in India could be assessed from the number of homoeopathic practitioners and the number of persons treated under this system. Excepting the State Faculty of Homoeopathic Medicine of West Bengal there is no other recognized organization which maintains a list of homoeopathic practitioners. We have therefore, to draw upon the information received from the homoeopathic associations, whose representatives we interviewed, and also on such supplementary information as was supplied to us. The estimate we can make must, therefore, be very much limited in its accuracy. There is, however, no doubt that the number of homoeopathic practitioners in India is very large.

We have quoted below some figures placed before us by persons whom we interviewed and who are likely to have direct knowledge of the homoeopathic physicians. These figures will convey an idea of the extent to which the homoeopathic system is practised in the country:

(a) According to the Secretary of the All India Institute of Homoeopathy, Delhi, the number of homoeopathic practitioners who had received some sort of institutional training in India is about 1,050 excluding those of West Bengal. He put the number of unqualified persons at about 50 times of this figure, i. e., at more than 50,000.

(b) The Secretary of the All India Homoeopathic Medical Association, Delhi, estimated the figure at 75,000.

(c) The Proprietor, Hahnemann Publishing Co., Calcutta, in his Hahnemannian Gleanings of April, 1949 (Vol. XVI, No. 4) stated that their customers in India, who seem to be homoeopathic practitioners, were approximately 95,000. Of these 50 per cent, belonged to Bengal. There is one firm in Calcutta which has a much larger volume of business than the above firm. There are several firms in Calcutta who have as much volume of business as the Hahnemann Publishing Co. There are many other homoeopathic firms all over India.

(d) The number of homoeopathic practitioners registered up to 1948 with the State Faculty of Homoeopathic Medicine, West Bengal, was 6,401.

(e) The Bihar Homoeopathic Provincial Medical Association (Registered) informed us that the total number of homoeopathic practitioners in Bihar was about 16,000.

(f) The U. P. Provincial Homoeopathic Association enrolled 321 members since the "U. P. Homoeopathic Medical Act 1947", came into force. The total number registered is 2,018.

From the figures given above and especially the number of customers indicated in clause (c) above, we are of the

opinion that the number of homœopathic practitioners in India would exceed 2 to 300,000 possibly including all categories, whereas the number of homœopathic practitioners who have received some sort of institutional training is not likely to exceed 5,000. It is very difficult to give any figures as to the number of persons who are being treated by homœopathy at any one time, but the estimate of 3 million people will be on the low side.

At this stage it is desirable to state the more important reasons which according to a section of people, have made homœopathy popular in India. The reasons advanced are:—

(i) the cost of homœopathic medicines is very much less than that of medicines used in any other system of medicine, which means a lot to the average person in India;

(ii) treatment under the system is more sympathetic as compared to other systems; it is absolutely harmless; it avoids injections and also generally surgical operations;

(iii) the system prescribes small doses of drugs which do not upset the patient in any way and the medicines are orally administered and are sweet to the taste;

(iv) it cures all types of patients;

(v) homœopathy is much more efficacious than other systems of medicine in cases of certain types of diseases; such as, cholera, ailments of children, etc.

—From the Report of the Homœopathic Enquiry Committee—1941

THE INDIAN INSTITUTE OF HOMŒOPATHS

ITS GROWTH AND SERVICE

By Dr. K. V. SWAMY.

Director & Secretary, Indian Institute of Homœopaths

"The Indian Institute of Homœopaths", the organization for the propagation of the homœopathic system of medicine came into being on the first day of September 1939 at Madras. Although the actual or rather the formal inauguration of the Institute was on the date abovementioned, the real foundation for such an institution was laid by the founder, Dr. V. R. Murty, very much earlier than that.

I remember, as a small boy, the work and ambitions of the doctor early in the thirties. It was in the year 1931 or so that Dr. Murty returned to the south after a sojourn of nearly a decade in Northern India, and while he returned to his native land, he came in as a full-fledged Homœopathic Physician, having had his training for more than four years in the institution known as the Bombay Homœopathic Medical College in Bombay.

It was, I think, on the 6th February 1933 that Dr. Murty actually started a small Homœopathic Dispensary in a village in Tanjore District and even from the start he had brilliant successes in all the cases that he undertook to treat. Homœopathy was new to South India then and people did not actually understand what Homœopathy meant. As such in the village parts, he was popularly known as the "German Doctor", because the people understood only that the Homœopathic system of medicine originated in Germany.

Generally, cases that come for treatment under a new doctor, especially in the villages, are those that are either

too simple or those that have exhausted all other treatment and have been left out as hopeless. Some of the cases that came to him in the early days of his practice were of the latter category. These were cases abandoned as hopeless by several prominent practitioners and many came to our doctor, not with much hope but to put it in their own words, to get treated till the end! A good majority of such cases really got well under the homoeopathic treatment of Dr. Murty, and as such his fame spread not only in and around the villages as a physician with capabilities, but also to far off places. Grateful patients sang his praise to other ailing people and thus he had a good bit of practice which kept him busy. Homoeopaths, in those times, were few and far between in South India and even then Dr. Murty was visualising an institution for the south which could train so many of our unemployed young men in the science and art of Homoeopathy so that they could not only carve out a career for themselves but also would be useful to the people at large who were actually in need of some form of medical aid, especially in the villages.

Incidentally, Dr. Murty published some of his case reports in the homoeopathic journals published in Bombay and Calcutta then and these attracted the attention of many and one such was a doctor of allopathic medicine who was just trying to start a postal tuition business in homoeopathy and he offered to take in Dr. Murty as his assistant in his business. Dr. Murty thought at first that working with an elderly doctor of the other school with homoeopathic leanings would help to increase his own knowledge and so thought over the offer. This was, on investigation, found to be not quite genuine and bonafide. Dr. Murty thought that he was more fitted to start an institution to teach homoeopathy to our people. This was in 1935 and from then on Dr. Murty

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was planning and preparing for the Institution which saw its inception on the 1st September 1939, as stated earlier.

The years just before the second world war was one of depression and it was no easy matter to find the required finance for such an institution. However, undaunted, scraping all that he could collect, Dr. Murty arrived in Madras early in 1939, as Madras was considered by him to be a suitable central place for such an institution in the south. The money that he had with him when he arrived in Madras was so meagre that in order that the same might not be unnecessarily spent except for the object for which it was intended, Dr. Murty opened a small office, within the office of an auditor in Thambuchetty Street. In return for the rent for the portion occupied and a small allowance to keep him going, he was giving most of his time to the auditor to help him audit accounts. Thus, we see the amount of care and attention, Dr. Murty paid to every detail and the amount of suffering he must have undergone, in those days.

In September 1939, the Indian Institute of Homoeopaths moved into a separate building, at 72, Armenian Street. The staff included only two other persons besides Dr. Murty. One was Mr. S. K. Murty, who acted as compounder, (and who fortunately now continues as the Manager of the Madras Office of the Indian Institute of Homoeopaths) and a part-time stenographer cum clerk, Mr. V. S. Subramaniam. Although Mr. Subramaniam was first engaged as part-time clerk and stenographer, he was later taken on as a full-time employee and finally became Secretary to Dr. Murty and remained so till he left him in 1947, to start his own business in Madras under the style of The Homocopathy House.

Dr. Murty skipped over his earlier trials and tribulations when almost single handed he used to write out the lessons

and sometimes even work the cyclostyle machine, despatch the postal lessons and at the same time deliver lectures to the class of students who attended personally. Thus, when the thunders of war boomed across the frontiers of Poland on the fateful 1st of September 1939, in far off Madras, Dr. Murty gave organised existence to his great humanitarian and educational effort, by founding this Institute. At first, lessons were taught only in English and the first student to join the institution for postal tuition was Dr. Gokkarnesan, L.M.P., who was already a fully qualified allopathic doctor in practice. At that time, as already said, the Institute was located in 72, Arménian Street, Madras, and within six months he realised that for homoeopathy to be really useful to our villages it was necessary to impart the education in Tamil. Accordingly, by February 1940 lessons in Tamil were also started and the first student to join the Tamil classes was one Mr. K. P. Narayanan Nair from Ramnad District. About this time the Institute was shifted to No. 303, Thambu Chetty Street.

By 1941, the Institute had already outgrown its premises and so had to be shifted to No. 77, Lloyd's Road, Royapettah. This place saw the birth of Dr. Murty's Homoeopathic Materia Medica in Tamil, a land mark in the history of Homoeopathy in South India.

By 1942, the hounds of War unleashed by Hitler and the Japanese threatened to reach the shores of Madras and consequently in a hurry, all offices, Government and others, were advised to vacate Madras. After a temporary shift for a few months to Palghat, the institute found its location in Kumbakonam in a rented place. From 1943 to 1951, the Institute was located in two or three rented places in Kumbakonam and it was so very inconvenient for a growing institution to be located in rented places with landlords out

for more money without corresponding amenities. In 1949, it was considered essential that the Institute should have its own building, so that it can serve homoeopathy properly in this country and arrangements were made to construct a building to house the institute to suit its needs. The eleventh February 1951 saw the day on which the Institute moved into its own premises the "HOMEIO HOUSE" in No. 30 Bakthapuri Street, Kumbakonam. This building which is in grounds extending more than two acres of land, has an area in the ground floor of about 10,000 sq. feet and about 7,000 sq. ft. on the first floor, thus the Institute uses about an acre of space for its main activities.

For the benefit of those who have not yet visited the Institute I give below a description of the various departments as one finds them on entering:

TUTORIAL DEPARTMENT

The Tutorial Department has been growing from strength to strength year after year. The following table of the number of students who joined the Institute and the number who passed out bears eloquent testimony to the popularity of our postal tuition:—

Year.	Number of admissions.			Number of Passes.		
	English.	Tamil.	Total.	English.	Tamil.	Total
1939-40	50	28	78	—	—	—
1940-41	40	79	119	27	18	45
1941-42	15	72	87	9	35	44
1942-43	66	107	173	16	35	51
1943-44	83	127	210	25	66	91
1944-45	88	190	278	33	82	115
1945-46	88	160	248	61	242	303
1946-47	114	235	349	40	120	160
1947-48	200	369	569	45	125	170

APRIL '56

Year.	Number of admissions.			Number of Passes.		
	English.	Tamil.	Total.	English.	Tamil.	Total.
1948-49	196	442	638	53	222	275
1949-50	234	394	628	294	118	412
1950-51	264	547	811	335	111	446
1951-52	261	510	771	228	133	361
1952-53	355	438	693	267	143	410
1953-54	429	596	1025	355	189	544
1954-55	469	798	1267	266	118	384

The admissions represent a typical cross-section of our population-teachers, nurses, doctors, clerks, villagers, landlords, auditors, college students, retired and active government officials. Men and women are almost equally represented. They hail from all parts of India and the world-Madras, of course, Travancore, Andhra, Mysore, Bombay, Madhya Pradesh, Punjab, Vindhya Pradesh and Himachal; also Ceylon, Burma, Malaya and Singapore, Bahrain, South & East Africa, Saudi Arabia, Australia and England. Both Tamil and English mediums are equally popular.

PERSONAL CLASS

Quite early in the development of the Institute, Dr. Murty felt the need for personal tuition to supplement the postal lessons. This was especially the case with Tamil students who came mostly from the inner-most villages of the South. So, in 1943, Personal Classes for Tamil students were begun by Dr. Murty. They were held once in a year in the month of May and usually lasted from three to four weeks. Such subjects as the practical use of the Stethoscope, Blood-pressure gauge, Urinometer, Injection Therapy, Minor Surgery, Midwifery and Clinical practice are all taught personally by Dr. Murty himself assisted by requisite charts, equipment, and cinematograph films.

These classes have been a phenomenon so much so that Dr. Murty is thinking of conducting them in English also. The following table gives at a glance the progress being made in this section:—

Year.	Male Students.	Lady Students.	Total.
1943	31	2	33
1944	25	1	26
1945	53	1	54
1946	51	3	54
1947	77	4	81
1948	102	3	105
1949	97	7	104
1950	98	5	103
1951	113	11	124
1952	126	10	136
1953	90	8	98
1954	117	9	126
1955	126	6	132

The Tutorial Department consists of 12 assistants.

PUBLICATIONS DEPARTMENT.

Genius, Dr. C. V. Raman, the Nobel-prize Winner, used to say, is nine-tenths hard-work and only one-tenth, luck. With very great forethought, Dr. Murty started a press of his own early in his career and equipped it with the latest and best machinery to undertake all printing jobs, including Colour and Display work. This, along with his unrivalled capacity for hard-work, has resulted in developing a Publications Department, which handles efficiently the printing of the enormous amount of pamphlets, booklets, leaflets and books connected with the Institute and its activities, and undertakes finest job-printing works.

APRIL '56

71

The first edition of Dr. Murty's Tamil *Materia Medica* (which is in two volumes) was published in 1942. It is now in its fourth edition. *Twelve Tissue Remedies* by Dr. Schussler was translated in 1943. A Repertory for the Tamil *Materia Medica*, (First Part) was published in 1953. The Second Part is under preparation. 1955 saw the publication in Tamil of the famous *Organon of Medicine* by Dr. S. Hahnemann. It is to the credit of Dr. Murty that all these books were published in Tamil for the first time. These were quickly followed by a series of popular and educative brochures on such subjects as Cholera, Typhoid and Plague.

JOURNALS

In 1940 Dr. Murty started a monthly journal by the name of "Homoeopathist" in the English language, to enable his students to keep in touch with the Homoeopathic news all over the world. In 1947 the Tamil "Homoeopathy" was published. Ultimately, the name of the English journal was also changed into "Homoeopathy", so that we now have two editions of "Homoeopathy" each month—one in English appearing on the 5th, and the other in Tamil, published on the 20th. Their contents are entirely different, the one in Tamil being suited to the insular needs of the Tamil speaking students and subscribers, and the other in English more suited to the broader requirements of the English-knowing public. Readers eagerly await the arrival of each issue and even a day's delay means dozens of enquiries by post. Case-notes, original articles on Homoeopathic philosophy and therapeutics, and other articles of general medical and public health interest are contributed regularly for these two journals by Dr. Murty and other eminent contributors.

SALES DEPARTMENT

Started in a small way to supply the medicines required by the students who passed out of the Institute, this Department,

by dint of its prompt and efficient service, has built up a connection which in 1955 brought to the Institute business to the tune of Rs 1,13,000. The prices compare favourably with those prevailing anywhere in India.

LABORATORY.

Dr. Murty's Goldrops and Sodhari have earned deserved reputation, while his Homoetubes, used for subcutaneous and intramuscular injections are very popular. Our Laboratory where these, as well as other patented and Homoeopathic medicines, are tested and manufactured, is the most up-to-date one in the East. We have our own electrical rotary potentizer and tablet-making and water-distilling plants.

DISTINGUISHED VISITORS.

Among the distinguished visitors who, from time to time, visited the Institute, and appreciated our activities special mention must be made of the Hon'ble. C. Subramaniam. Minister for Finance, Government of Madras, Shri Jai Prakash Narain, Dr. U. Krishna Rau, Ex-Minister, Government of Madras, and Shri K. Kanakaratnam, Retd. Auditor-General of Ceylon and a Member of the Ceylon Committee of Inquiry on Homoeopathy.

The Indian Institute of Homoeopaths is a living monument to the personality and ambitions of Dr. Murty. Started at first with a view to propagate Homoeopathy in South India where till then it was practically unknown, soon the impact of a big fact viz. the utter absence of medical facilities to the millions of village folk, made such a deep impression on Dr. Murty that now, with missionary fervour, he concentrates on bringing medical succour to the deserving poor. In the Institute itself, he runs a Free Dispensary, where poor patients are examined, and treated without having to pay any charges. Recently, at the outskirts of Kumbakonam,

APRIL '56

73

another Free Dispensary has been opened by the Annadana Sivan Memorial Trust, and the Institute has undertaken the responsibility of helping, supervising and advising medical attention there. Several students who were hard-hit by the last year's cyclone in Tanjore and Ramnad Districts were allowed for a period of two and three months to study freely without paying any fees.

Both for the benefit of thousands of his students and of the multifarious direct patients, who live scattered in villages unapproached by bus or train, and who hail from across the seas, Dr. Murty maintains, at a nominal charge, a regular stream of consultation and treatment by correspondence. From four to five hours of his time each day are spent thus in consultations, both in person and by post.

It is now difficult to guess which love comes foremost in Dr. Murty's mind—love of Homoeopathy, or love for his poorer countrymen.

It is truer to say that with the expanding success of the Institute, a happy amalgam has been reached in his personality, by which *both* benefit - Homoeopathy, as well as his countrymen in South India



Dr. V. R. MURTY,
Governing Director, Indian Institute of Homoeopaths,
and Managing Editor the "Homoeopathy".

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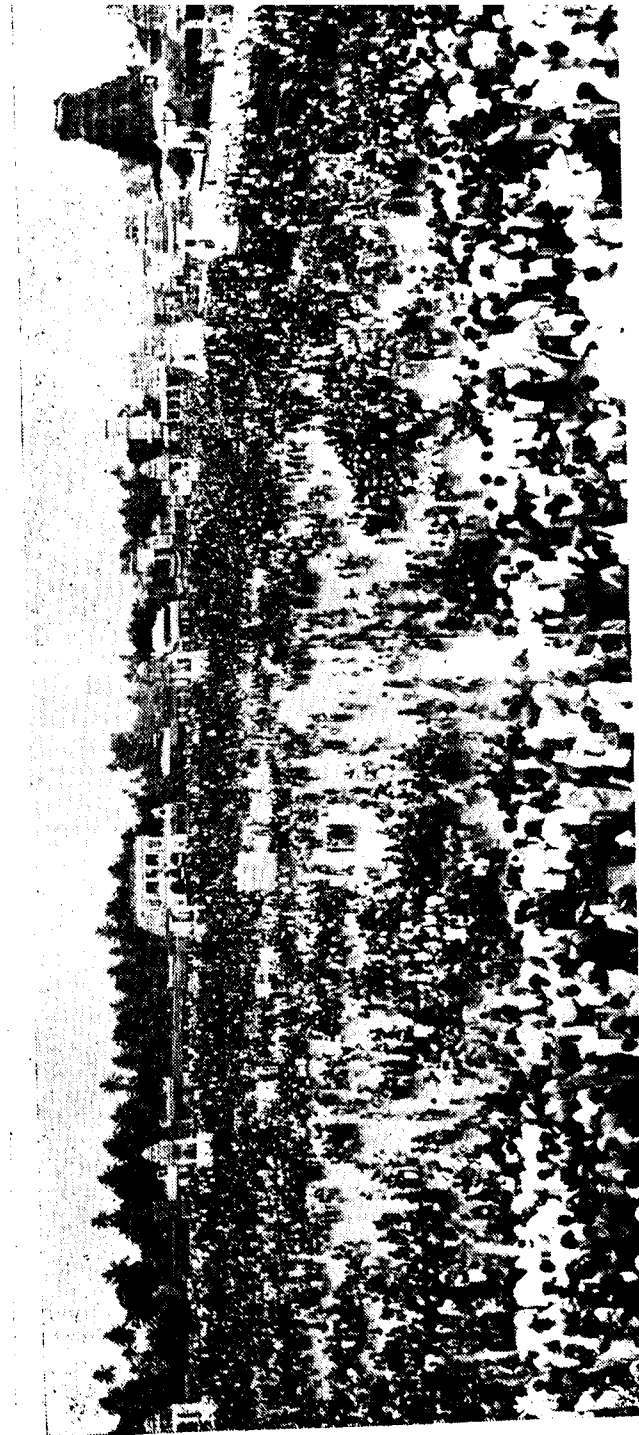
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“Mahamakhham” is a holy festival at Kumbakonam, which takes place once in twelve years. Then people from all over India & Ceylon gather here for taking bath in the holy tank.

A view of the tank on that day this year, is shown above.

CORRESPONDENCE

The Editor, "Homœopathy"

Kumbakonam.

Research on Fertility Control

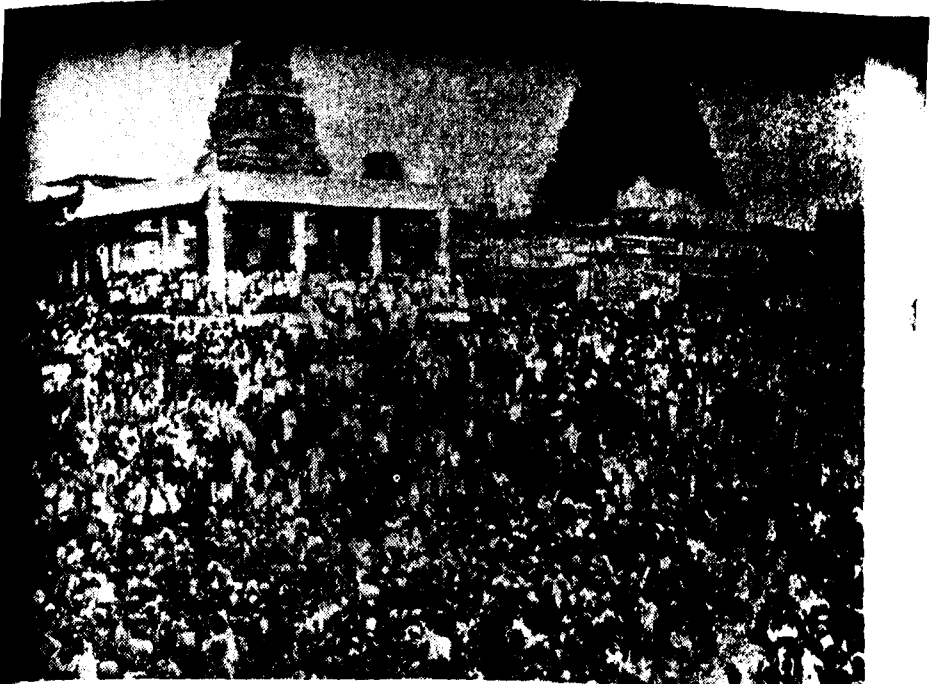
Dear Sir,

I come to know from the Amrita Bazar Patrika, Page 8, dated 14th February, 1956, that Dr. S. N. Sanyal, of the Calcutta Bacteriological Institute, who conducted research on the wonderful drug named M-XYLOHYDROQUINON, for the last five years said that the Government of India had sanctioned a sum of Rs. 1,20,000 for a three-year field experiment on the drug at the Institute of Hygiene and Public Health. Dr. Sanyal tried this drug on 727 human subjects, and the drug showed success in 83 percent cases.

In the proceedings of the third International Conference on Planned Parenthood, held in Bombay on 24-29, November 1952, page 104, (Contraceptive Methods-Biological), Dr. Sanyal, writes various experiments were conducted to prove the sterility effect of the Oil of *Pisum Sativum* (Common 'Peas', Indian name 'Matar Dal', trade name 'Ovatrium'), its active principle and also a similar compound, M-Xylohydroquinon. White rats, whether male or female, fed on 'Matar Dal' alone became temporarily sterile although they maintained their normal health as characterised by their normal rate of growth on discontinuation of this diet and they gave birth to litters after sometime. After these observations, different experiments were carried out with immature and mature rats and the changes of the uteri, both macro-

APRIL '56

79



A view of the Mahamakham Tank on the day of the festival at Kumbakonam on 25-2-56.



scopic, and Micro-sopic were determined. Experiments on the resorption of foetus in gestating rats and its correction by timely administration of vitamin 'E' were conducted".

It is interesting to state here that the antiprogesteric effect is destroyed not only by the administration of vitamin 'E', but there are also various antidotes-such as Camphor, Arsenic, Phosphorus etc. Further, Vitamin 'E' is found in wheatgerm, eggs, vegetables, oils and green leaves. How can our human females maintain their antiprogesteric effect by administration of 'M-Xylohydroquinone, when vitamin 'E' which is a substance of our daily consumption according to the theory and pathological findings of Dr. Sanyal has not succeeded in controlling fertility rate in human culture but does actually increase fertility?

Yours faithfully,
B. C. Chatterjee, M. D.,
(Homoeo), Bhatpara—24
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Homoeopathy in Ceylon

*Mr. K. Kanagaratnam, Retd. Auditor General, Member of the
Committee of Inquiry on Homoeopathy, Ceylon.*

It gives me very great pleasure to meet the members of the All Ceylon Homoeopathic Practitioners' Association. This privilege has been accorded to me by Dr. & Dr. (Mrs) Mathuranayagam and Dr. (Mrs) Grace Philips who have persuaded me, in spite of my very poor health, to preside over this public meeting.

You are already aware that I was one of the members of a committee appointed by the Minister for Health some time last year to report on the extent to which Homoeopathy is practised in Ceylon and whether Homoeopathy should be recognised by Government and if so, what steps should be taken to provide facilities for training and to control the practice.

We held several meetings, interviewed practitioners, visited some of the clinics both in Colombo and some of the outstations. The first clinic visited was the one run by Dr. & Dr. (Mrs) Mathuranayagam. The chairman of the committee Dr. Banarjee, was pleased with this clinic and the real Homoeopathic atmosphere which prevails in this clinic.

I am glad to state that your association led a deputation consisting of your Vice President, one of the joint secretaries, the Treasurer and three other members and this deputation urged that immediate steps should be taken by Government (a) to recognise Homoeopathy, (b) to register all those who are presently qualified in Homoeopathy and practising in that system of medicine and (c) to register such qualified people

and practitioners irrespective of the language in which the qualification has been acquired.

The committee's report was published this month as a Government sessional Paper. You will be glad to know that the Committee has recommended that:

1. Homœopathy should be recognised by the state.
2. A Homœopathic Medicine Council should be set up immediately.
3. Those who are sufficiently conversant with the principles of Homœopathy and have had considerable experience of its practice should be registered.
4. The other practitioners should be allowed to continue practice for five years and qualify themselves for registration.
5. A College and Hospital should be set up to train future Homœopathic Practitioners.

You will appreciate that Homœopathy is still in an infant stage and many people in Ceylon are practising it as a side profession in addition to other work. According to the replies received to the questionnaire issued by the committee, 291 persons are practising this profession and of these, only 120 persons are full time Homœopathic practitioners, and the remaining practitioners are Ayurvedic Doctors, Apothecaries, Estate Dispensers, Pharmacists, Clerks and others.

I have all hope that Government will recognise Homœopathy as a system of medicine in addition to the Allopathic and Ayurvedic systems and it is up to the members of this

association to perfect their knowledge and qualify themselves for registration. I happened to go to Kumbakonam in July last and I was amazed to see the Indian Institute of Homœopathy there run by Dr. V. R. Murty so efficiently. To those who do not understand English, he has ample literature in Tamil and you will be well advised to study the books printed by this institute and gain full knowledge of the system of Homœopathy.

Homœopathy is the poor man's medicine in view of its low cost and it is up to you, to prove its efficacy by gaining the confidence of the people. There is no doubt that the founder of this system of Medicine has proved its worth after many years of laborious research and a proper study of this system will be of immense value in curing many ailments at cheap cost.

I wish your Association all success and best endeavours to make full use of the facilities which Government will give as a result of the recommendations of the committee which investigated the extent of its use in many countries in the world. In India, the Government has accepted Homœopathy as a system of Medicine to be recognised by the State and has approved a syllabus of studies for adoption in the Homœopathic Institutions in India. The Government of India has also provided Rs. 40 Lakhs for the development of Homœopathy in the next Five Year Plan.

*—Presidential address at a meeting of
the members of The All Ceylon
Homœopathic Practitioners, Association
at Colombo.*

APRIL '56

LAYMEN HOMOEOPATHS

DR. N. M. JAISOORYA. M. D., M. P.

Homœopathy owes its rise in India to that brave band of pioneers who were mostly laymen. It got a certain status through these brave allopaths who faced all persecutions at the hands of their own allopathic brethren. I name with reverence the late Dr. Mahendra Lal Sarkar which Bengal has produced. The greatness of Homœopathy lies in the fact that it can produce a large number of lay practitioners whose contribution to social service is exceedingly great. It is the lay practitioner who is a unique feature of Homœopathy in India and I say that we cannot do without them, because they are, in the present phase of our socio-economy, that is characteristic of India in particular, and Asia in general, a social and economical necessity for many years to come, and so will also the Ayurved, as was realised by the Chinese with regard to their indigenous medical practitioners, and the Chinese are the most practical minded people in the world, which we unfortunately as a people are not. If we concede this point, we will realise that as long as our health needs are far greater than our budgetary resources, and this will be so for several years to come, we shall have to fall back on enlisting every man active in the art of cure, whatever their ability be, till such time as we are in a position to replace them with the necessary numbers of better trained men, which is estimated by the Bhore Committee to be 250,000. We have in India a large mass of people who, one way or another, are active in Homœopathic prescribing, whatever their ability or qualifications be. Can we exterminate them as the Government's Health Ministry and the Indian Medical Association foolishly imagine they can? My answer is 'No'. If Socia-

lism is our goal, and the Government says it is, then Socialism, as I understand it, implies utilisation of every man to his outmost capacity for the welfare of the people. What we need in India is as large as possible a body of practical homœopaths who will be in the first line, internal therapeutists, eminently suited to serve the small towns and country side. Training of Homœopaths in India, what we need under the present circumstances, are three types of courses. The first, a Post Graduate Course of one to one and a half year. This is to produce capable teachers, since we have a great dearth of all round teachers. The second is the more important course. It is of three years duration, and I am fully convinced that to suggest a five year course, or even four, is not only unnecessary but tom-foolery, especially when the allopaths themselves are beginning to feel that too much junk, far too much junk, which till now we thought essential, should be discarded and the course shortened. I feel confident that in three years we can produce eminently practical men who will fulfil what is the criterion and sole guiding start of all therapeutic action, namely clinical success at the bedside; for we intend to produce men whose sole duty is to cure the sick and not discuss learned abstract items relating to science and research. The third course I had the honour to suggest to the Dave Committee is a Course of one and a half year in the tissue remedies for men who will work in the distant villages. I do not say that this scheme is ideal, but it is thoroughly practical and will meet our present and future needs for many years to come.

What the attitude of the Government will be does not interest me, should not interest us in the least. It stands or falls by its own actions. But it is our duty to clarify our own minds and to study problems even if we may not have the power to give effect to our plans today. Most certainly

we would like to have better and better men. But can we do that today, with our meagre resources, with the time racing against us? My answer is 'No'. The Chinese told me that they wish to produce not scientists but practical physicians. That is exactly what I desire, what I plan, not men of Homœopathic Science in the first line, so much practical homœopaths reasonably well trained.

—From the inaugural address of the
International Homœopathic Convention
at Calcutta — (December '55)

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(PART - I)

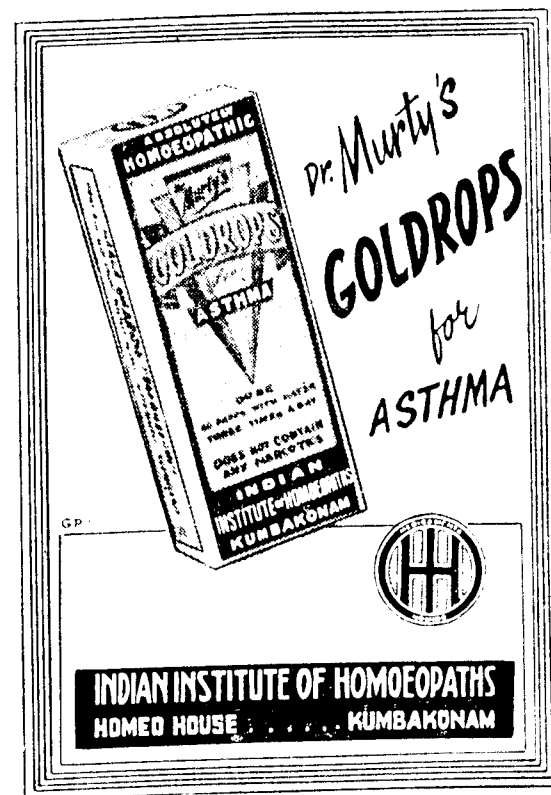
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Managing Editor: Dr. V. R. MURTY

JUNE

1956

CONTENTS

In Rural Areas	...	3
Therapeutic Notes of Various English Authors	...	8
Research on dance of life	...	11
News and Notes	...	16
Rajkumari on Indigenous Medicines	...	22

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THE HOMOEOPATHY

VOL. V

JUNE

BOOK 6

IN RURAL AREAS

THE interim report of the Dave Committee has recommended that "Unregistered and Unenlisted practitioners can practise in rural areas." There is now no means of knowing how far the Committee has followed up the implications of this recommendation and what other suggestions have been made in respect of rural areas. That the problem of paucity of rural medical help is an urgent and pressing one calling for even unorthodox, if only temporary, measures has been well recognised by the Government. This is evident from the lightning courses that are being offered to Rural Medical Practitioners. The Dave Committee has done wisely in frankly recognising this factor and suggesting that unregistered and unenlisted practitioners can practise in rural areas.

We do not pretend to speak about Ayurvedic and Unani systems or how they can be adapted to teaching in a very short period of time, say, six months or one year. But so far as Homoeopathy is concerned, we do claim that we have played no humble part during the last sixteen years in coaching students from the rural areas by giving them a more than

workable knowledge in the theory and practice of Homœopathy within a period of one year, and in some cases, of six months. What is more, we have done this in the language of the soil, viz Tamil, purely by postal tuition, and as a result there are thousands of our students actually practising medicine in the rural parts of the Madras State, and also of Ceylon. This is not a mere theory or experiment; it has been successfully put into practice and has yielded results over a number of years.

We are not wrong in saying that similar medical education has not so far been tried in any other language regions in India.

We suggest to the Dave Committee and the Planning Commission that in the Second Five Year Plan, provision should be made to spread such postal medical education in Homœopathy in other States also, and the result will certainly be conducive to the welfare of the rural population.

That the system of postal tuition in medicine is liable to be misused and has, as a fact, been misused by certain unscrupulous parties, is not denied. That only means that steps must be taken to check this evil not that the system which has given such satisfactory results should be condemned. The presence of a rat in a house is an argument for insecticide but certainly not for setting up a conflagration!

The other recommendation of the Dave Committee, viz. that the Medical Degrees Act may be amended so that the use of a bogus degree in Ayurveda, Unani and Homœopathy could be prohibited, should provide the means, by which the undesirable elements which have created such a bad name for correspondence courses, could be eliminated.

With the elimination of such weeds, it should be possible to support, encourage and control if necessary, all existing institutions doing useful work, and promote similar institutions in other language areas where they do not exist.

Does anybody doubt whether adequate medical knowledge could be imparted purely through postal tuition, without any practical training? We affirm that so far as Homœopathy is concerned, this system is peculiarly adopted for this purpose and we believe that we have successfully demonstrated this to the satisfaction of every questioning enquirer who has called on us during the last several years. Ignorance of a subject is not a qualification for apt criticism but if anybody is willing to see us at work, he will be convinced that we are talking about what we know.

We have found that a one-year, or sometimes six-months course by postal tuition, followed by a brief one-month practical training at our Head-quarters, has given enough equipment to our students to successfully cope up independently with a large percentage of medical problems that arise in rural areas.

At the moment we have at our Head-quarters, a happy party of about 200 men and women who, after having passed in our one-year course of study, are now assembled for the last few weeks in undergoing practical training that will fit them to be better doctors. Personal tuition, demonstrations, cinema films and all other aids are taken to help in this process. That every year the number of students attending these classes show marked increase, is the test how much the students themselves appreciate the utility of these classes. More than 80% of these students come from rural parts to which they will be going back to continue their noble mission.

We have, however, a bone to pick with the Dave Committee. If unregistered and unenlisted practitioners can be allowed to practise in rural areas, why should they be prevented from practising in urban areas. Are they creating a new class of untouchables in medicine? This appears to us to be uncalled for.

BOOK REVIEWS.

A Synopsis of Homoeopathic Philosophy (By Robert Gibson Miller M. B; Published by Messrs. Roy & Co., Princess St., Bombay.) This is a small pamphlet giving in a nut-shell the important principles underlying the treatment of diseases by the Homoeopathic method. The pamphlet gains added importance and authority because it has been revised by no less an authority than the late Dr. J. T. Kent, and includes certain annotations made by him. The late Dr. Miller originally wrote this as a contribution to the *Journal of Homoeopathics* 1900. It is appearing in book form for the first time.

Practice of Bio-Chemic Medicines, Part I (By H. N. Basu Mullick: Published by Messrs. Basmall & Co., (India) Ltd. 56-D, Beadon Street, Calcutta-6) After a brief narration of the Bio-Chemic system of twelve Tissue Remedies developed by Dr. Schussler, the main portion of the book is devoted to the treatment of diseases solely by this method, arranged alphabetically. If what is published is an indication of what is to follow, it should prove a useful reference book to the followers of Dr. Schussler's method of treatment.

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Therapeutic Notes of Various English Authors

By A. R. Kannappan, Vellore.

BRYONIA

ALLEN: (1) A frequently indicated remedy for *typhlitis peritonitis*, *Gastro enteritis*, characterised by extreme soreness, thirst, fever, coated tongue etc. (2) *Asthma* often suitable after *Ipec* in acute asthma.

KENT: (1) In *Inflammation of the breasts* and stopping of the flow in the lying-in period. *Milk fever*. (2) Suitable to many diseases of a *typhoid* nature. (3) *Constipation*: In most inveterate cases, the remedy. (4) *Dysentery*: Cures dysentery with all *tormina* and *tenesmus* possible to imagine with pain in abdomen with bloody and mucus discharge. (5) It conforms to a type of disease with continued fever of *rheumatism* that comes with gradually increasing severity and involving one joint after another until all the fibrous tissues are in a state of pain, inflammation and distress. (6) *Bryonia* often may be indicated in injuries of joints where *Arnica* would be a failure. *Catarrhal* fever may be covered by *Bryonia*.

FARRINGTON: (1) *Meningitis*:— The remedy, when meningitis follows from the suppression of some eruption, e g. measles (or) scarlatina. (2) Prescribe it when the meninges of the brain and spinal cord pleurae; peritonium; and synovial membranes are involved. (3) *Pleuropneumonia*, almost specific. (4) Relapsing fever specially suitable (5) *Croup* in alternation with *Ipec*

COWPERTHWAIT: (1) *Measles*: A standing remedy particularly indicated when the eruption is delayed and when

there are pulmonary complications. (2) A valuable remedy in *gastric derangement* with the characteristic symptoms. (3) May be used in *scarlet fever*, when the eruption does not develop well or has been suppressed, (4) *Bryonia* is often indicated for inflammation of the breast with heaviness and hardness. (5) *Jaundice*: One of the chief remedies brought on by a fit of anger.

NASH: (1) *Epistaxis instead of Menses*. (2) *Iritis*: in rheumatic iritis, first remedy (3) in *pleurisy*, *Peritonitis* and *Pleuropneumonia*:—a regal remedy. (4) For suppression of lochia with bursting head-ache.

HUGHES: (1) *Rheumatic fever*: Most of us employ it throughout rheumatic fever in alternation with *Acon*: unless symptoms call urgently for some other medicine. (2) *Bronchitis*: Occupies the first place among the remedies for acute *Bronchitis*. (3) *Cough*: dry, hard oppressing cough. (4) Best remedy after *Acon*: in a cold on the chest that is where a nasal catarrh has run down the air passages as far as the first or even second division of the Bronchi.

BAHR: (1) The most essential remedy in the second stage of *croupous pneumonia*. (2) *Pleurisy*: under its influence the exudate scarcely ever progresses and the pains rapidly subdue.

GOODNOUGH: (1) No remedy has a stronger claim to a position among the *antipneumonia* remedies than *Bry*., judging from both provings and from clinical experience. (2) *Influenza*: an efficient remedy when bronchial mucous membrane is attacked in influenza and the general pains are tormenting.

JOUSSET: (1) Highly recommended in *Meniere's disease*. (2) *Sciatica*: most efficacious. (3) *Myalgia*: Principal

JUNE '56

26

remedy. (4) *Rheumatism*: Most important use of *Bry.* is in rheumatism, rheumatic arthritis and inflammation in general.

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RESEARCH ON DANCE OF LIFE.

(Dr. Bankim Chandra Chatterjee, M. D., Bhatpara, West Bengal.)

The subject with which this article deals is one which always arouses great interest. It is, indeed, a burning question in all civilized countries. Also, this problem has its political and social aspects, but here we shall be mainly concerned with it from a medical point of view on "SAFE PERIOD THEORY" or in other words "RHYTHM METHOD", and how so much of the tax payer's money is wasted for research work as conducted in the following Indian Government Rhythm Method Clinics: (1) Family Planning Centre, Lodi Colony, New Delhi. (2) Lady Hardinge Medical College, Family Planning Clinic, New Delhi. (3) Ramanagaram Health Unit Family Planning Centre, Ramanagaram, Bangalore, Mysore.

It was formerly thought that ovulation and menstruation were merely or quite coincident, so that an egg cell was ready to be fertilised about the time of menstruation, and that copulation just before or just after the menstrual period was likely to prove fertile, while copulation during the middle fortnight of the inter-menstrual period was absolutely or comparatively safe. Raciborski believed that a woman could not be impregnated by intercourse occurring between the eighth day after one menstrual period and the eighth day before the next menstrual period. Dr. Amand Routh, formerly consulting obstetrician to the Charing Cross Hospital, London, stated in his evidence before the Birth-Rate Commission that there was no doubt whatever that the majority of women conceived either just before or just after the period. Sutherland, in his *Birth Control*, 1922, speaks of the mid-menstrual period, when although conception may

JUNE '56

11

occur, it is less likely to occur than at any other time. Capellman recommended as a safe period those days between the fifteenth day after the end of one menstrual period and the fourth day before the beginning of the next. Soranos, a gynaecologist in the days of antiquity had given a somewhat similar prescription.

Hensen, however, in his article on the "*Physiologie der Zeugung*" in Herrman's *Handbuch der Physiologie*, considered that the first day after menstruation was very favourable for conception, that 248 cases where the last date of copulation was known, 80 percent were fertilized within ten days after the end of menstruation though on no day was the possibility of fertilisation excluded. Feokstition made a curve showing that the frequency of conception on the last day of the period, and on the first, ninth, eleventh and twenty-third days, after were in the proportion of 48, 62, 13, 9 and 1. Thus the probability on the twenty-third day was still $1/62$ of the maximum.

Siegel published a paper in the *Muenchener Medizinische Wochenschrift* in 1916 stating that a series of investigations, made by him during the Great War, showed that the likelihood of fertilisation increases from the first day of menstruation reaching the highest points six days later. Fertility remained about the same up to the twelfth or thirteenth day, and then declined gradually to the twenty-second day, after which there was absolute sterility. In 1917 the same author published a book in which he reported as the result of further investigations that he had been mistaken in assuming that any part of the cycle was absolutely infertile.

More recently a good deal of evidence has been accumulated which seems to show that ovulation takes place about midway between two menstrual periods, and that

fertilisation is most likely to result from intercourse taking place about this time. The two most important authorities on this question, at the moment, are Kanus, an Austrian and Ogino, a Japanese.

According to the Kanus-Ogino's theory, the ovum is always shed on the fifteenth day prior to the commencement of menstruation and remains capable of fertilisation only for twentyfour hours after it is shed. It is also believed that human spermatozoa remain fertile in the female genital organs for not longer than forty-eight hours. Thus, at the most there are not more than seventy two hours, or three days, during the menstrual cycle, when sexual intercourse can result in impregnation, the forty-eight hours preceding the shedding of the ovum and the twenty-four hours following the shedding of the ovum.

It is interesting to note here that the only seventy-two hours during the whole month when, according to the Kanus-Ogino theory, fertilisation is possible, are grouped round about the fifteenth day before the beginning of the next menstrual period. Calculations must therefore be made, not from the date of the last menstrual period which has already occurred, but from the date at which it is hoped or expected that the next menstrual period will occur. Even supposing the Kanus-Ogino theory to be unexceptionable (which is very doubtful) it would only be reliable in the case of those women who menstruate with complete regularity. It would not matter if they menstruated every twenty-one days or every twenty-eight days or every thirty-five days, or at any other intervals, provided that the interval was the same every month. But as a matter of fact comparatively few women manifest such regularity. Most women who keep a careful record of the dates of their menstrual periods find that the

length of cycle varies a little from month to month, even when no obvious cause for the variation can be found. When there is an obvious cause, such as a journey, change of climate, change of food, a cold or some other slight illness, worry, or overwork, the variation may be much greater.

Comparatively few women, therefore, could rely upon the expected date of the arrival of the next menstrual period, as a basis from which to calculate the date of the shedding of the ovum, and therefore as a basis from which to calculate the period of seventy-two hours, during which alone, according to the Kanus-Ogino theory, impregnation is possible.

Frankly we think, very little. There is practically no day, or group of days, which has not at some-time or other, been described, by some authority, and usually with some show of evidence, as absolutely or relatively infertile. Obviously as they are mutually contradictory, they cannot all be right. Observation of any "safe period" entails the limitation of copulation to a part of the month when desire may or may not be present in one or both partners. It necessitates complete sexual abstinence for a great part of the month, however strong mutual desire may be during that time. For majority of women who menstruate with some slight irregularity, either more or less frequently, the so-called safe period of Kanus and Ogino offers very small protection indeed. The Kanus-Ogino plan may perhaps be recommended as a *Pis aller* in occasional cases, for persons who would prefer to avoid conception for a time but to whom an unwanted conception would not be seriously disturbing; but the patient should be warned that the so-called safe period is really VERY UNSAFE.

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NEWS AND NOTES

We are glad to announce that *Dr. V. R. Murty*, our Managing Editor, and Governing Director, Indian Institute of Homoeopaths, has been elected by a thumping majority to the Municipal Council, Kumbakonam, as a representative of the 4th ward. The election was keenly contested. In these days of highly-organised political parties contesting elections, it is difficult for a no-party man to win elections. The fact that *Dr. Murty* stood as an Independent and won his seat speaks volumes for his popularity in Kumbakonam. He himself considers this only as an extension of his opportunities to be of service to the people, whose welfare he always has at heart. Till now, he has been concentrating on giving medical succour and medical knowledge to the people, but it is high time he took an active hand in improving the health and sanitation of the city in which he lives.

Journalistic prophets and most of the people of Kumbakonam have already started indicating that he is the fittest person to be the Chairman of the Kumbakonam Municipality and we are told that quite a large number of the voters in Kumbakonam would welcome his drive, honesty and consideration for the welfare of the poor to be at the helm of affairs.

We have great pleasure in congratulating *Sreemathi M. S. Pattammal*, who has been elected unopposed to the Municipal Council, Kumbakonam, winning the reserved seat for women. Her quiet demeanour and winning manners hide quite a lot of organising ability, clear thinking, desire

for special work, all of which will have greater opportunity now. We hope she will devote her attention to making the parks and public gardens of Kumbakonam more attractive to the women and children of this city. We are proud to record that she is a student of our Institute, and readers of our Tamil counterpart have long appreciated her series of articles on Yoga Asanas.

* * *

Planning Commission Conference on Indigenous Systems of Medicine: Matters of policy common to Ayurveda Unani and Homoeopathy were considered by the conference of experts on Indigenous systems of medicine, which concluded its two-day deliberations at New Delhi recently. The conference, which was convened by the Planning Commission, generally felt that every system of medicine should have full opportunity of development under the patronage and guidance of the Union and State Governments. In this connection, the question of having separate advisers for Ayurveda, Unani and Homoeopathy, both at the Centre and in the States was considered.

The other matters discussed at the conference were: Training of personnel and courses of studies; status and emoluments of the trained staff; facilities for research as well as for the manufacture of drugs and their standardisation.

Dr. J. C. Ghosh, Member, Planning Commission, presided over the conference which was attended by *Mr. V. T. Krishnamachari*, Deputy Chairman, Planning Commission, *Rajkumari Amrit Kaur*, Union Minister for Health, *Mr. Gulzarilal Nanda*, Union Minister for Planning and *Mr. S. N. Mishra*, Union Deputy Minister for Planning.

—THE HINDU

Failure of Mixed Instruction: Dr. A. Lakshmipathi, Principal, Government Ayurveda College, Trivandrum, has been deputed to set up a Research Institute for the Development of Ayurvedic System of Medicine in Kerala at a cost of over Rs. 50 lakhs.

Explaining the reasons for closing down the Ayurveda College at Trivandrum, following the students' strike, he said, that the students wanted to become secondary practitioners of modern medicine instead of studying the Ayurvedic system. "Our experiment of giving a mixed instruction in Ayurveda and Allopathy has failed as in Madras."

* * *

The Erode Homœopathic Medical Association held its General Body Meeting on 6th May and elected Dr. D. S. S. Rayer as President and Dr. V. M. Subramaniam as Secretary. The Members of the Committee as well as other office-bearers were also elected at the same time

* * *

The Rayalaseema Homœopathic Association held its Annual Body Meeting at Guntakkal on 26th April last. After the official business was transacted, election of office-bearers for the new year was held. Dr. K. V. Govindarajulu was elected President, Dr. P. K. Rama Rao as Vice-President and Dr. C. P. Subbarayan as General Secretary.

* * *

The Yoga Vedanta Forest University Rishikesh, of which Swami Sivananda is the chancellor, has recently conferred the title of *Homœopathic Chikitsa Acharya* (H. C. A) on Dr. V. R. Murthy, in recognition of his service to Homœopathy.

We reproduce a facsimile of the letter received from Swami Sivananda with the diploma.

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Dated: 24th March, 1956

Sri Dr. V.R. Murthy,
Director, Indian Institute of Homeopaths,
BANKANAM

loved Atman,

Salutations and adorations. Om Namo Narayanaya.

I am very happy to hear of the wonderful work that your Institute is doing, both in serving the sick and in training people in the art of Homeopathy. Those who have studied your postal tuition lessons greatly admire the clarity and the thoroughness with which you have ably dealt with the intricate philosophy of Homeopathy and its practical application.

In appreciation of the great service you have been rendering to humanity, I have conferred upon your noble self the title of H.C.A. (Homeopathic Chikitsa Acharya). Kindly accept it.

Homeopathy has a great future, especially in this country, as it is specially suited, on account of its cheapness and efficacy, to the treatment of the poor people. I am sure, by God's Grace, your Institute will have a distinct role to play in the popularisation of Homeopathic treatment in this country, and thus in bringing relief, health and long life to the masses. This in itself is the greatest service to humanity, and the best worship of the Lord immanent in mankind. This is the highest Yoga which will eventually lead you to the highest spiritual experience. May God bless you with health, long life, peace, prosperity and Kaivalya Moksha with regards, Prem and OM,

Thy own Self,

(Sd) SIVANANDA

The Second Five Year Plan provides for development of research centre and post graduate institute at Jamnagar, the opening of five Ayurvedic Colleges, expansion of 13 existing colleges and for the starting of 1,100 Ayurvedic dispensaries, herbaria etc. and improving 255 existing dispensaries. As against a provision of Rs. 37.5 lakhs made by the Central Government in the first Plan, the Second Plan provides Rs. 1 crore at the Centre and Rs. 5.5 crores in the States for developing the indigenous systems of medicine. The schemes envisaged are expected to bring Ayurvedic institutions to a standard which would enable them to take up research programmes.

* * *

Drugs Act Inspectors:—The Government have appointed the undermentioned persons as inspectors under the Drugs Act with jurisdiction shown against their names :—

Messrs N. M. Saravanabhavan and T. S. Ramamurthi (Madras City) Mr. E. Venugopal (Chingleput and North Arcot Districts) M. G. Ramakrishnan (South Arcot District) Mr. A. Hariharasubramaniam (Tanjore District) Mr. C. V. Mallikarjunamurthi (Trichinopoly District) Mr. C. V. Narasimhan (Mathurai and Ramanathapuram District) Mr. H. Lakshmivaraha Aiyar (Malabar District) Mr. S. Sehanusubramania Aiyar (South Kanara District) Mr. M. S. Bharathi (Salem District) and Mr. S. Subramaniam (Tinnevely District).

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Raikumari on Indigenous Medicines

Winding up a three day debate in the Lok Sabha recently on the Bill for the establishment in New Delhi of the All-India Institute of Medical Sciences, Rajkumari Amrit Kaur, the Health Minister, said.

She was distressed that instead of considering the Bill, the debate had just deteriorated almost into a battle of Ayurveda against modern medicine. It was never the intention of the Government, under whose auspices the Institute was to be brought into being, to have any quarrel with the indigenous systems of medicine.

Recalling a Union Cabinet decision, the Health Minister said, the Cabinet laid down that the Central and State Governments should decide that modern scientific medicine should continue to be the basis of development of a national service in the country. But the Cabinet had also recommended that facilities for research on scientific lines in the Ayurvedic and Unani systems of medicine should be promoted on as broad a basis as possible on the lines recommended in the Bhore Committee's report.

"In the Central Ministry of Health", she said, "it has been my endeavour to follow this resolution which was passed by the Cabinet of this country not only in the letter but in the spirit". She added that she had done as much as she could for the development of Ayurveda on proper lines

Reverting to the plea of members for encouragement to Ayurveda, Rajkumari Amrit Kaur told the House that her Ministry had provided one crore of rupees for research and upgrading of various institutions in the country dealing with

the indigenous systems of medicine. A sum of Rs. 60.5 lakhs had been provided for Ayurveda and in addition Rs. 5 to 6 crores were being spent by the States. There was no question of lack of money, but the question was whether the money given for the development of these systems of medicine would be spent. The Indian Council of Medical Research had set apart Rs. 20 lakhs for investigation of indigenous drugs.

She was also writing to the State Governments asking what they were doing for the development of Ayurveda. But Health Minister after Health Minister from the States had told her that where they put up an Ayurvedic dispensary, people demanded a modern medicine institution.

Mr. Govinda Reddy, intervening, said the people preferred Allopathic to Ayurvedic dispensaries because the Vaidas were paid Rs. 5 or 10 a month.

The Health Minister said it was very wrong to give Rs. 5 or Rs. 10 to Vaidas and she would write to the State Governments

"If Ayurveda was to live," Rajkumari Amrit Kaur continued, "teach your Vaidas a certain amount of hygiene and sanitation so necessary in the villages. Teach them vaccination and inoculation and let them give their own remedies to the villagers. In that way alone Ayurveda will live. If the study of therapeutics of Ayurveda or Homoeopathy is made a post-graduate study, then alone will you get the real essences that are in the systems".

The Health Minister said she intended to give stipends to some students of M. B., B. S. to study Ayurveda and then to practise it. She was even willing to give a Medical College and a Chair for Ayurveda so that those who had graduated

in modern medicine might learn these sciences also. That was the way to revive Ayurveda, she said. Research could only be done by scientific modern medical men and "I shall do my best to encourage research in Ayurveda."

The Health Minister said she would like to "condemn in the strongest language at my disposal" the remarks, made by some members. "It is wrong to hit below the belt. In all my schemes for help to the indigenous systems of medicine, I had nothing but absolute support from them and it is cruel and wrong to talk in that manner," she said.

Rajkumari Amrit Kaur said there was no reason why there should not be close liaison between the Institute provided under the Bill and the Jamnagar Institute for Ayurveda. She would also like institutes to spring up for Unani and Homoeopathy also. These will spring up in time but don't ask me to mix them up here because the very purpose of the Bill will be spoiled."

Chinese Example

Many members had talked about what China was doing for the encouragement to the traditional system of medicine. She found that no communicable disease was allowed to be treated by the traditional doctors. All the new graduates were educated absolutely in the modern way. But they were short of personnel and they were teaching traditional doctors to learn certain amount of hygiene. 'Don't imagine that China is lagging behind the West. It is going ahead.'

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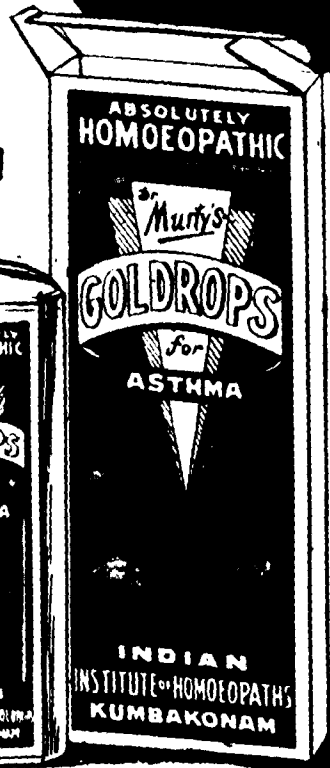
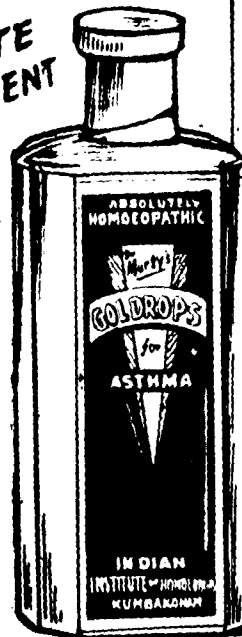
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Managing Editor: Dr. V. R. MURTY

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1956

CONTENTS

Indigenous Medicines	...	3
News and Notes		6
Thought Gems in Homoeopathy	...	11
Catarh	...	13
Demand for Homoeopathic Drug Laboratory		20

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THE HOMOEOPATHY

VOL. V

MAY

BOOK 5

Indigenous Medicines.

THROUGH fifty years of nationalist agitation in India, we used to hear the British officials say "But you are so unfit for independence. If it is given to you tomorrow, you will start fighting between yourselves. You cannot take independent decisions. You cannot fight in defence of your country. We will have to be here all the same. So, proceed slowly, step by step - a big step might wrench your ankles, or even hips!" Yet, within eight years of independence, our achievements in every field of human activity have dumb-founded those birds of ill-omen.

We are reminded of this as we notice with exasperation the day-to-day comments made by our eminent leaders on the subject of indigenous medicines and Homoeopathy. We have almost got used to the cynicisms of Mr. A. B. Shetty and Rajkumari Amrit Kaur. Unwittingly, Mr. K. Kamaraj, our Chief Minister, has walked into this net. Presiding over the Union Day Celebration of the College of Indigenous Medicines, the Chief Minister spoke and said that the agitation from the students had gone to such an extent that it had created a genuine doubt in the minds of some people whether they wanted it to be a College of Indigenous Medicine at all. Further on, he said the patients themselves

med to want the allopathic type of treatment. Was Mr. Kamaraj repeating what the Union Health Minister said previously in the Lok Sabha or does he believe that the patients require only allopathic treatment?

When two such honest well-wishers of India think on these lines, the need is obvious to scrutinise the position further.

When patients seem to prefer the allopathic method of treatment, is it part of enlightened leadership just to say to the Vaid, Hakims and Homoeopaths, "No doubt I have a liking for you: but, old boy, nobody whom I know seems to like your face;" or should we try to probe into the historic and other causes that have led indigenous medicines to fall on such evil days?

There is a saying that when a good man falls, every Tom, Dick and Harry has advice to tender. Primarily due to our political and cultural enslavement to Britain for more than two centuries, many arts and sciences, native to the soil and born of our blood, lost their popularity and influence among the city-dwelling folk who usually look to the ruling clique, not only for their pay, but also for their fashions and cultures. Thus, in India, it was for a long time the fashion among the generation that is now grown old to decry all Eastern achievements—our religion, our astronomy, our architecture and our medicine. Consequently, wanting in support from the rulers or the public, ayurved and unani languished for a long time without any opportunity for expansion or advancement. Under such a predicament, the science passed off gradually from the hands of the advanced and intelligent sections of the community to those of ignorant and poorer folk who just managed to keep the torch burning and practised the system somehow as they knew it.

When such is the case, what is the duty of our national leaders? Is it to talk vaguely of people's preferences or to promote such unholy alliances between the fatted calf and the thin? Had it not been such a tragedy to see well-intentioned, high-principled, national-minded leaders being misled into wrong decisions, we would be inclined to laugh.

To Mr. Kamaraj, to Mr. Shetty and his integrated medicines, we would say, please do not make invidious comparisons between ayurved or unani and allopathy as they are now. The former are famished and half-starved for centuries, while allopathy is par excellence the fatted calf, temple bull, glowing with life and vigour, fed at once both by the temple and the people.

Let ayurved, unani and Homoeopathy have entirely separate and independent existence on a par with allopathy in the matter of grants, facilities for research, privileges and status for two or three decades; be allowed to find their independent feet and their role of usefulness and expansion, and then will be the time to judge about the comparative merits of these systems of medicine.

In the first ebullition of spirits following independence hasty legislations are proving a bane in many respects. Let it not so happen in the field of medicine also. India is vast; her medical requirements are multitudinous; no one system is in a position to meet needs all round. So, it will be the height of wisdom to allow each system to develop on its own independent lines. Any such hasty, half-hearted step as allowing allopathy to get into the College of Indigenous Medicines, or opening Homoeopathic sectors in the present Medical Colleges will only prove disastrous. It will prove like the proverbial alliance between the alligator and the rabbit, or between the mud pot and the brass one.

MAY '56

NEWS AND NOTES

Jabalpur, April, 20
A Conference of Homoeopaths from Madhya Pradesh, Madhya Bharat, Bhopal and Vindhya Pradesh was inaugurated here yesterday by Pandit K. L. Dubey, Speaker, Madhya Pradesh Vidhan Sabha. Dr. R. V. Date, a retired judge of Gwalior High Court and a leading homoeopath presided over the function.

Addressing the gathering on the occasion, Pandit Dubey strongly pleaded for popularising and encouraging the homoeopathic system of medicine. He observed that the Ayurvedic and Homoeopathic systems of medicine were closely related and were identical to each other in many respects. Like Ayurvedic system Homoeopathy was also a cheap and effective system and therefore, it should be duly patronised. The Speaker also suggested that homoeopathy should conduct research in the sphere of medicines.

Dr Date in his presidential address said that Homoeopathy had a bright future. He appealed to the homoeopaths to strengthen their Association in new Madhya Pradesh so that it might be able to serve the people in a better way. Dr S. C. Barat, Chairman of the Reception Committee, welcomed the chief and other guests from Madhya Bharat, Vindhya Pradesh and Bhopal.

The Conference through a resolution demanded establishment of a Homoeopathy Medical College and Hospital at Jabalpur.

—The "Hitavada"

Under the auspices of the Western India Homoeopathic Medical Association, Bombay, the 201st Hahnemann Day was recently celebrated, when glowing tributes were paid to the genius of Dr. Frederick Samuel Hahnemann. Dr. R. R. Thakar, the President of the Association was in the chair.

While speaking recently in the Lok Sabha, Mr. Mohanlal Saxena made a forthright attack on the Health Minister, Rajkumari Amrit Kaur, for her attitude towards the Indigenous Medicines.

He said:— "I cannot persuade myself to support the demands of the Ministry so long as the treatment meted out to Ayurvedic, homoeopathic and other indigenous systems of medicine is discriminatory and so long as it persists in its present attitude, which I consider to be wholly biased, completely perverse and utterly foolish."

Mr. Saksena recalled Gandhiji's support to the Ayurvedic and Unani systems of medicine and said: "But the Health Minister says that it has not been proved that Ayurveda is a scientific system. I may warn her that she may say anything she likes, but she cannot go on like that for all the time."

"I hope" Mr. Saksena said, "that she will rise equal to the occasion and discharge the great responsibilities that rest on her. If, for any reason, it is not the will of God that she should function in the way I expect—and I hope she will—she may have the good sense and strength to quit. Because, in either case, she will be serving the best interests of the country and her own. In a democracy, no one is indispensable."

While the Health Ministry had been "looking down" on the indigenous systems of medicine, Mr. Saksena said, in China no efforts were spared for promoting the Chinese system of medicine. An Australian Professor of Medicine who visited India had said that scientists and scholars in Europe were greatly interested in the Ayurvedic system of medicine.

"I think", Mr. Saksena said "the Health Minister has fallen a victim to a disease to which most of us succumb. It is the disease of Westernism or modernism."

Replying to the debate, Rajkumari Amrit Kaur said that she had no prejudice in her mind against any system of medicine. There was a Board of Ayurvedic pandits that advised her and if all the money allocated to Ayurveda was not spent, it was not her

fault. She was not against Ayurveda or Unani or Homoeopathy, but she was against quackery in whatever form it existed. The Government of India had insisted on proper under-graduate training in Homoeopathy, and the Homoeopathic College was being up-graded in Calcutta. The Bombay Government was doing the needful in regard to post graduate studies.

The Prime Minister told the Lok Sabha on the 18th April that the Unani, Homoeopathic and Ayurvedic systems of medicine should be examined from a scientific point of view and whichever satisfied those scientific tests should be utilised fully.

The Kolar District Homoeopathic Association celebrated the 201st birthday celebrations of Dr. Samuel Hahnemann on 10th April. Dr. K. Nagarathnam presided over the function and unveiled the portrait of Dr. Samuel Hahnemann.

The Hindu of the 26th April has published the following brief summary of the interim report submitted by the Dave Committee on Indigenous Medicines:—

"Enactment of State legislation within two years for the regulation of practice, professional ethics and teaching of Vaidyas, Hakims and Homoeopaths has been recommended by the committee appointed by the Central Council of Health, to study the question of formulating uniform standards in respect of education and practice of these three indigenous systems of medicine. The committee has submitted an interim report.

This committee is opposed to any Central legislation on the subject and said since medical profession was a concurrent subject, the central body need only be a co-ordinating body exercising control over academic standards and teaching.

Amendment of the Medical Degrees Act has also been suggested so that the use of a bogus degree in Ayurveda, Unani and Homoeopathy could be prohibited.

The other recommendations are: (1) Persons who are of 15 years standing prior to the appointed day will be on the

register along with the institutionally qualified persons. The others who have two years' practice on the appointed day should be on a list. Fees should be levied for registration.

(2)—Initially there should be a nominated body to control the practitioners for three years and subsequent bodies should be partly elected and partly nominated. There should be separate register for practitioners in Ayurvedic, Unani and Homoeopathic systems. If the number of practitioners exceeds 100 a separate board should be constituted. Otherwise a joint register and board are favoured in so far as Ayurvedic and Unani systems are concerned. Homoeopathy should have a separate register and a separate board. (3) The privileges should be given only to registered practitioners and not to enlisted practitioners. Registered practitioners in these three systems should be treated with regard to privileges on a par with practitioners in modern medicines. Unregistered and unenlisted practitioners can practise in rural areas.

It is not fair to comment on a brief press summary of the report, especially so when that report is also an interim one. We shall, therefore, reserve our detailed remarks to a more appropriate occasion. Suffice it now to say that to demand an experience of fifteen years for a practitioner to be registered appears to us too long. We think that some seven to ten years should be more than enough. Listing of persons with two years' experience seems reasonable; but there should be a clause to the effect that on completion of the seven-to-ten year period a person would be entitled to automatic registration. We appreciate the suggestion that registered medical practitioners in these three systems should be treated with regard to privileges on a par with practitioners in modern medicine. We are also happy that the Committee has not forgotten the realities of the situation when they recommend that unregistered and unenlisted practitioners can practise in rural areas. 'Something is better than nothing' they seem to have argued when they came face to face with the problem of the paucity of medical aid in rural areas.

We do hope that before they submit their final report, the Dave Committee will rid their minds of preconceived prejudices

MAY '56

and accept the just claims of correspondence trained Homoeopaths, to legitimate medical practice in rural and other areas. It is agreed that perhaps some legislation will be necessary to separate the sheep from the goats in the matter of recognising correspondence courses.

Only we plead let there not be whole-sale condemnation of a system that is working for the essential welfare of rural India in a vacuum that no one else is in a position to fill now.

* * *

Under the auspices of the Bihar State Homoeopathic Association, Patna, the Bihar State Homoeopathic Conference is expected to be held towards the end of this month. An exhibition is being organised in this respect.

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THOUGHT GEMS IN HOMOEOPATHY

(Sri K. N. Gopala Pillai M. A., N. S. S. College, Changanacherry)

1. Venereal diseases are not at all to be dreaded if they are treated properly. They are only peculiar expressions of a disturbed life-force and should be treated by similia.

2. Malignancies coming after suppression of sycosis, are easily managed if we can reproduce the original gonorrhoeal discharge, but if we are unable to do this, our chances for a cure become very doubtful indeed.

3. The tertiary manifestations of all the miasms whether psora, syphilis or sycosis, though slower in action, often involve the more central organs, and the deeper structures of the organism,

4. The more miasms that are existent in your patient, the more complex are the phenomena presented and the greater the difficulty in finding the similimum of the case.

5. In all forms of ringworm, we see the specific sycotic element, running all through the manifestations of these very mysterious lesions of which so little is known.

6. The more we study disease and the better we become acquainted with the law of cure, the more frequently we employ the nosodes or diseased substances.

7. Many of us know how to select a remedy, but we do not know how to wait upon its action. In other words, we do not understand the retrocession of each miasm, whether it be syphilis, psora or sycosis.

8. It is a pathological law that while the acute goes through its evolution within a few days or weeks, the chronic often takes years.

9. The first selection of the remedy should culminate about the active miasm, and the second selection should cover the latent miasms now disturbed or brought into action by active miasm on which we based our first prescription.

10. A thorough knowledge of the chronic miasms makes plain the backward and forward movements of disease.

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HOMOEOPATHY

CATARRH

By G. E. LEONARD

EVERY season brings its particular ailments and those who suffer prepare themselves accordingly, that is, of course they are unaware of the real curative value of Homœopathic medicine.

So long have the various inhalants, pastilles, gargles and preventives been advertised in gaudy colours and large letters that man has been hypnotized away from any understanding of what health really means. He is made to think only of his apparent symptom and the particular cure-all for it; that it is but the end result, the effect of some underlying cause never crosses the average man's mind. And yet if he reflects, it must become obvious that the disease, whether minor or major, must begin before there is any sign of it in the body. So often, too often we would think, people complain of feeling ill, below par, off colour. They have nothing wrong organically their doctor tells them. The usual tests only give negative results and there is nothing therefore for the allopathic physician to diagnose, and without a diagnosis he is lost. One must have a disease or ailment to treat; if there is no discernible illness there is nothing to treat, but the patient still feels ill. Such a state as this is well within the understanding of the homœopathic physician however. The state of "feeling unwell" denotes to him that there is something very radically wrong and he will set to work to put it right. He is not troubled that there is no disease label to fit the condition, he follows the Master, Samuel Hahnemann—"There are no diseases, but only sick people", and furthermore he believes that "the physician's only duty is to cure". This means curing the sick people, not removing the evidence

8. It is a pathological law that while the acute goes through its evolution within a few days or weeks, the chronic often takes years.

9. The first selection of the remedy should culminate about the active miasm, and the second selection should cover the latent miasms now disturbed or brought into action by active miasm on which we based our first prescription.

10. A thorough knowledge of the chronic miasms makes plain the backward and forward movements of disease.

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INDIAN INSTITUTE OF HOMOEOPATHS
KUMBAKONAM

CATARRH

By G. E. LEONARD

EVERY season brings its particular ailments and those who suffer prepare themselves accordingly, that is, of course if they are unaware of the real curative value of Homœopathic medicine.

So long have the various inhalants, pastilles, gargles and preventives been advertised in gaudy colours and large letters that man has been hypnotized away from any understanding of what health really means. He is made to think only of his apparent symptom and the particular cure-all for it; that it is but the end result, the effect of some underlying cause never crosses the average man's mind. And yet if he reflects, it must become obvious that the disease, whether minor or major, must begin before there is any sign of it in the body. So often, too often we would think, people complain of feeling ill, below par, off colour. They have nothing wrong organically their doctor tells them. The usual tests only give positive results and there is nothing therefore for the allopathic physician to diagnose, and without a diagnosis he is lost. One must have a disease or ailment to treat; if there is no discernible illness there is nothing to treat, but the patient still feels ill. Such a state as this is well within the understanding of the homœopathic physician however. The state of "feeling unwell" denotes to him that there is something very radically wrong and he will set to work to put it right. He is not troubled that there is no disease label to fit the condition, he follows the Master, Samuel Hahnemann—"There are no diseases, but only sick people", and furthermore he believes that "the physician's only duty is to cure". This means curing the sick people, not removing the evidence

of sickness and leaving the cause entombed. By the application of the laws of homœopathic therapeutic art he will match his patient to the appropriate remedy, knowing that the vital force will gradually restore the harmony to the body and that all evidences of discord or disease will fade away.

We are asked sometimes whether this method of cure can be applied to all diseases. Some think it good for children and not for adults; others that it is useful for minor or acute ailments and not for difficult or chronic diseases. Let us re-iterate that Homœopathy treats the person who is sick, whether he be young or old, very sick or slightly ailing—and always according to the law "*Similia similibus curentur*". And now what of Catarrh—a state of inflammation of the mucous membranes, particularly those of the air passages of the nose and throat, with an exudation containing mucin and epithelial cells. Thus states Blakiston's New Gould Medical Dictionary. Few today can say they have no experience of this very uncomfortable condition and many come to the homœopathic physician and practitioner seeking help because it has become chronic. This chronic condition is generally the result of a mismanagement of the health records over the years, together with neglect or carelessness in the matter of diet. The readjustment of the health record means the re-establishment of the sufferer to a state of balance and harmony, sometimes a lengthy process, entailing both careful study and observation on the part of the physician or practitioner and perseverance and truthfulness on the part of the patient. The patient will be required to give an accurate history of *himself*, as well as a description of his symptoms; for the constant exudation from mucous membranes with the attendant headaches, noises and unpleasant tastes and smells betoken a sickness deep within the whole being. The physician will discern the important factors that will lead him to

prescribe the remedy which will be as nearly as possible the *similimum*. The patient can assist in his own cure very considerably by paying due attention to diet or in the case of young children by the wise supervision and direction of the parents. I had a young child brought to me for treatment for this very troublesome complaint—"snorts" the family call it and have made it the child's nickname—a fact likely to cause serious trouble in a more sensitive child and a habit to be deprecated. The mucus was thick and sticky, difficult to blow down, and so the youngster had developed the habit of snorting it back into the throat. She caught cold easily, was restless and difficult with food. A bright intelligent little girl when she chose but often too lazy to exert herself. The parents had tried all kinds of inhalants, drops, ointments, for some three years, but still the snorting continued. She was given antidotal treatment for vaccination and immunization, and then *Pulsatilla* 6 night and morning. In a few days the "snorts" had vanished. A further course of *Pulsatilla* some three months later was required as the child had contracted a heavy cold, following a soaking in a pond, which had left her with a return of the catarrh. The potency was now raised to 30, night and morning for two weeks. The parents are delighted with her improvement which they have noticed is a general all-round development. There has only been one difficulty—sweets. I have forbidden all sweets, cakes and pastry, and there is a doting Granny who finds it difficult to believe little girls should not eat sweets. Fortunately, the child's mother is a determined kind of woman, and firmly but kindly refuses to allow Granny to undermine the child's health. When the child is firmly established in good health, the occasional sweet or cake will do no harm, but excess of these commodities always tends to produce mucus of the throat and stomach. If sweet things must be eaten, dates, figs and raisins are healthier and more health promoting.

MAY '56

A child of three years was brought to me for chronic catarrh following repeated colds. The doctor had suggested inhalants to help the little one to health, and while it eased for a night or two, the parents realized that it was in no way curing the condition. In fact, the father thought the child caught cold more easily when the vaporizer was used freely. Once again advice re diet was given, the vaccination and immunization antidoted, and then a unit dose of *Medorrhinum* 1m. In two months the child was able to breath clearly, his cheeks have become pink, he is a quieter happier child in every way, able to go to a nursery school without fear for chills or snuffles. His diet is fruit, eggs, salads and nuts, he munches peanuts when he is hungry and dates for an occasional change. With the persistent colds he has had since he was six months old, I consider that Homœopathy has scored a triumph, for in spite of the cold winter, the child has been free from all chills and infections. He will doubtless need further remedies as he grows, but one knows that his adolescence and his adulthood will be assuredly healthy and happy on the homœopathic foundation that is being laid now.

There was another case of a woman in the fifties. She had had persistent catarrh for twelve years. She sneezed violently every morning, soaked three large handkerchiefs, and then was able to rise, but as soon as the temperature changed she was sneezing freely and quite unable to breathe through the nose. She felt she could only breathe with her mouth open, a very exhausting and unpleasant state. Such a case can only be treated by constitutional remedies. In this case *Sulphur* was indicated, and *Sulphur* in potencies of 30 at weekly intervals for the first month, followed by *Sulphur* 200 at three-monthly intervals for three doses, cleared this catarrhal condition that had resisted so stubbornly all orthodox attempts.

Sometimes one meets the patient who seems to be the exception. However carefully the details are studied and the remedies chosen, the patient resists all treatment and makes no headway. These are the folk who by some means mislead the physician in their answers to the questions, or they may be like one patient I knew, always resorting to smelling salts when they were particularly "stuffy". Strong smelling substances, menthol, camphor and peppermint are all antidotal to homœopathic remedies, so if the results are not all that may be expected, it may not be entirely the fault of Homœopathy, physician or practitioner.

While catarrh is generally associated with the nasal passages and the throat, it must not be forgotten that there are other mucous membranes of the body equally capable of being irritated so that quantities of exudate may be excreted in the urine or vomited from the stomach. The character of these excretions may vary in each patient and careful note will have to be taken if good prescribing is to bring about a cure. Some discharges are bland, others are acrid and excoriating; some are thick, lumpy or stringy, others are thin, tough or easy flowing, some are white or yellow or green; some taste salt, others offensive and bitter. All these variations are of importance to the homœopathic physician as well as an accurate description of the individual peculiarities and characteristics. The patient must exercise self-discipline if necessary in the matter of food, no white flour products, cakes, pastries, biscuits or buns should ever be taken, bread in limited quantities should be from whole wheat flour; no white sugar or sweets from white sugar should be taken, sugar even if Barbadoes should be cut to a minimum as it constitutes a severe irritant to inflamed mucous membranes. Milk should also be taken sparingly as it always tends to increase the discharge of mucus. Fruit and salads may be

taken freely with *Marmite* or *Yestrel* drinks—and one last important hint—constipation—the system must be thoroughly cleansed every day from all effete matter, bran or molasses will be found the safest foods to restore healthy habits to the lazy excretory system. If they are difficult to take in a raw state, may I suggest they be incorporated into biscuits, scones or even bread. Then, with a purified body and the truly indicated Homœopathic remedy, there should be few sufferers from any form of catarrh who cannot be rid of their burden and know once again the full joy of living.

There are many remedies that have been proved helpful to catarrhal states and one can therefore only suggest a few. If any reader does not find the indications applicable to his particular need, may we suggest that he consults a homœopathic physician as soon as possible. If the condition is recent it will the more quickly respond and disappear; if it is of long duration, then the sooner means are taken to clear it the better for the general health of the sufferer. We live in strenuous days, we need to be well in mind, body and spirit, and in Homœopathy lies the answer to our needs.

Medicines can be taken at hourly intervals, less often when improvement sets in.

Arsenicum 6. Thin watery excoriating discharge from nose. Nose feels stopped up. No relief from sneezing. Worse in open air. Green mucus from stomach on vomiting. Irritable raw feeling in stomach. Burning pain.

Kali bich 6. Snuffles in fat chubby babies. Pressure and pain at root of nose. Discharge thick, ropy, greenish-yellow. Dropping of mucus at back of throat. Loss of

smell. Violent sneezing. Inability to breathe through nose. Chronic inflammation of frontal sinus with stopped up sensation.

Nux vomica 12. Stuffed up nose at night. Stuffy colds from exposure to dry cold atmosphere. Worse in warm room. Coryza fluent in daytime. Irritable temper. Constipated.

Pulsatilla 6. Yellow or green mucus, loss of smell. Bad smell in nose as of old catarrh. Mucus abundant in morning. Tongue covered in sticky tenacious yellow or white mucus. Loss of taste. Averse to all fats and warm foods and drinks. Dysentery; mucus and blood, with chilliness.

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MADRAS—1

MAY '56

19

who can voice his feelings and protest, before it is too late when a remedy is producing dangerous alterations in his functions or internal organs.

As the remedies are finally intended to be used on human beings, it is naturally a great advantage if we can try them on human beings, and watch reactions *provided* it can be done quite safely without any imaginable risk to the person experimented on.

As allopathy used guinea pigs, mice and rabbits for most of their experiments, the latter were in general designated as 'guinea-pigs'. But, as homoeopathy from the very beginning has been experimenting on healthy human beings, the latter were known as 'provers' and the experiments 'provings'.

Dr. Hahnemann, the author of the therapeutic method called Homoeopathy, took pains to make sure what was the dosage of any medicine that could be given to produce effects without producing appreciable or permanent damage. Where, however, he thought there would be any risk, he tried those medicines on himself or, as is the practice in all hazardous occupations, volunteers were used. All his provers were highly-educated, intelligent, eminent doctors who volunteered for the experiments—persons used to close observations and logical deductions.

These methods of his have thus ensured the accuracy of his symptom pictures that have stood the test of over 150 years of medical practice. While all other remedies based on animal guinea-pigs have had to change their therapy for nearly all diseases repeatedly every few years (new remedies constantly replacing old and outmoded ones) the drugs proved by Hahnemannian method still give the same results

which, by experiments, he then decided they would give. His technique of proving has stood the test of time and experience.

After Hahnemann's time, no proving on a large, institutional scale has ever been attempted although, it is said, Dr. Kent by himself contributed a large volume of literature on the symptomatology of remedies based on his own vast experience.

Perhaps it is left to India, the present "home of Homoeopathy" as even Germany acknowledges, to conduct organised provings, on our own ayurvedic herbs and medicinal plants. If under the Second Five-Year Plan, at least one well-equipped Homoeopathic Drug Laboratory is established, under the direction and control of eminent Homoeopaths, it shall be our endeavour to undertake this work on true Hahnemannian methods. We shall commission at least a dozen highly-educated, intelligent, moral and healthy young men endowed with high courage, purpose and zeal, to act as whole-time provers in charge of an experienced Homoeopathic Scientist. We shall prepare mother tinctures and potencies of all our well-known herbs and plants and study the symptom-provings. It is almost certain that this line of investigation will reveal within a measurable period of time, new cures for most of the uncured illnesses of mankind. For, it is the greatness of Homoeopathy that under its method of potentisation, nature has revealed most undreamt-of curative possibilities in such ordinary every day things of the world as charcoal and common salt.

Homoeopathic charcoal is used as a remedy in certain forms of the following illnesses:—

Ailments from abuse of mercury: from salt or salted fish or meat; putrid meat or rancid fats; ailments from