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HOMOEOPATHY

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Managing Editor: Dr. V. R. MURTY

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1958

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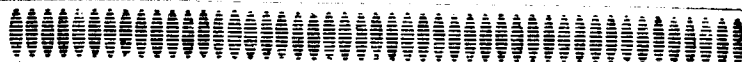
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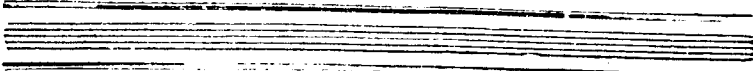


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THE HOMOEOPATHY

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Book 1

NEW HANDICAPS

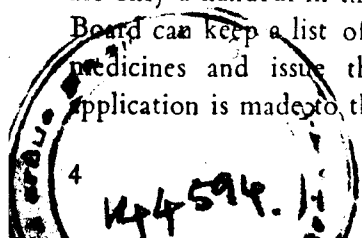
THE recent enactments in Parliament of two acts in connection with the Medicinal and Toilet Preparations and their interstate movement, and the rules made thereunder by the Madras State, have landed the Homœopathic medical trade and Homœopathic practitioners in our State in great difficulty to carry on their day-to-day work.

By the first act, viz. "The Medical and Toilet Preparations (Spirituous Preparations) Act," the Government have withdrawn the concession in excise duty so far enjoyed by the Homœopathic system of medicine. So far, in spite of higher rates of duty for various preparations, homœopathy was allowed a concessional rate of duty at Rs. 5/- per L. P. gallon, and this has been in vogue for quite a number of decades. But now this concession has been withdrawn and Homœopathic preparations have been brought to the level of the other preparations, like medicated wines etc. and the duty raised from Rs. 5/- to Rs. 17/8/- per L. P. Gallon—an increase of 250%! We do not understand why such a drastic increase was imposed on these preparations which have been all along marked for 'Concessional' rates. Has the Homœopathic pharmacy in this country so far advanced as

not to seek any concessions? Or, is it that the Government does not think Homœopathy should be considered as the "poor man's medicine"? The increase of 250% in the excise duty on Homœopathic preparations together with the steep rise in the cost of corks on account of the import policy in respect of this item, has increased the price of spirituous Homœopathic preparations by more than 100% and it is falling heavily on the homœopathic practitioners of this State.

Again, in respect of the supply position of homœopathic preparations in this State the recent enactments have created many complications. The general import permits already in vogue were suspended and people in one State wishing to buy Homœopathic Spirituous preparations from another State are asked to apply to the Board of Revenue, every time a medicine is ordered. The same rule applies both to a large and a small consignment. It generally takes a very long time, after the application is presented to the Board, to get a permit, since the application has got to travel down through all channels of the Prohibition and Excise Departments for an enquiry as to the bonafides of the application and then to travel back to the Board for the issue of permit. As such, according to the rules now in force and the procedure followed, it generally takes not less than a month to obtain a permit from the Board of Revenue and one can imagine the plight of a homœopathic practitioner wanting a potency of a medicine which is not available from local stockists, for the treatment of a case urgently.

The same applies both in respect of a small order and in the case of a big order from the stockists, of whom there are only a handful in this State. It would be better if the Board can keep a list of bonafide dealers in homœopathic medicines and issue the permits then and there when an application is made to them.



HOMŒOPATHY

In the form that has to be filled up to obtain a permit for the import of any spirituous homœopathic preparations from anywhere outside the State, we find a column asking as to "why these have to be imported and as to whether these are not available within the State itself." This appears to us to be a sensible and important question. The intention behind this evidently is that since the excise duty on preparations released out of bond in a foreign State is collected by the releasing State, our State stands to lose by way of excise duty on such goods, unless the import is to a bonded warehouse in this State. The rules in respect of anyone wishing to open a bonded warehouse or a bonded laboratory for the manufacture of these preparations are so stiff and the attitude of persons who interpret these rules are so unhelpful that we are afraid many would not come forward to start these in this State just at present.

As to the selling side of these preparations within the State, again the rules are so severe as to make the average businessmen abandon the same. For export outside the Madras State one has to get a permit from the District Collector, which seems neither easy nor quick to get. And for export of these preparations to our neighbouring countries such as F. M. S. and Ceylon, one has to get a permit from the Board of Revenue, with all the attendant formalities.

With all these, one is led to think that the Government is out to put an end to this trade and this at a time when the cry is for more production, and still more production, and "foreign exchange earning"!

We appeal to the powers that be to look into this question with a view to easing the situation so that business in this line may go on smoothly as has been the case for the last so many decades.

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Diet and Hygiene in Pregnancy

By Dr. Mrs. N. A. RADHA.

*Medical Officer-in-Charge, Women's and Children's Clinic,
Indian Institute of Homoeopaths.*

From the medical point of view, diet and hygiene are as important in pregnancy as proper medical treatment. As I have said in a previous article pregnancy and labour must be considered as a normal physiological condition by every pregnant woman. Of course, pregnancy puts a certain amount of strain on her constitution. Generally speaking, women in their first pregnancy are likely to make a lot of fuss and show a great deal of anxiety about their condition. Similarly women, who have had repeated abortions and who have experienced instrumental deliveries, naturally fear any succeeding pregnancy. Under such circumstances, sound advice puts them in a proper frame of mind, so much so that the whole period of pregnancy and confinement terminates in a normal, physiological way. Therefore, every physician must see that all unnecessary anxieties are avoided by timely advices.

DIET: The pregnant woman must take a simple nourishing diet. Regarding quantity, it is a wrong idea to believe that a pregnant woman must eat both for herself and for the requirement of the growing foetus within her. Women used to a mixed diet in their non-pregnant state, can safely continue the same during pregnancy. Such a diet contains enough proteins, carbo-hydrates, fat, sugar, minerals and vitamins required for both the mother and the foetus. Most probable deficiency during gestation will be with regard to mineral substances, viz., Calcium (lime), iron,

phosphorus and the essential vitamins. Milk is the best and richest source of calcium. Fruits, green leaves and vegetables are also another source. The foods richest in iron are lean red meat, egg, liver, kidney, fruits, etc. Phosphorus is contained in milk, egg, wheat, beans, potatoes, etc. The essential Vitamins are:

VITAMIN A: It is necessary for growth and general health and increases the resistance power to infections. It is abundant in Cod liver Oil.

VITAMIN B: It prevents neuritis and helps digestion. Unpolished rice contains this Vitamin.

VITAMIN C: It is necessary to prevent scurvy and to maintain the blood in good health. It is rich in raw vegetables, oranges, lemons, grape fruits, etc.

VITAMIN D: It helps the absorption of calcium from the diet and prevents rickets in the foetus. Cod Liver Oil contains this Vitamin in large quantities.

VITAMIN E: It has got favourable influence on reproduction. Wheatgerm and lettuce contain this Vitamin.

VITAMIN K: It protects the baby from haemorrhagic disease. Cabbage and tomatoes contain this Vitamin.

Therefore, the pregnant woman must be encouraged to take milk, vegetables, fruits and plenty of water. Raw vegetables and cod liver oil are the main supplementary sources of Vitamins. If the pregnant woman has the slightest tendency to vomiting or heartburn, fatty foods and fried things must be strictly avoided. Stimulants of all types are better avoided.

EXERCISE: The muscular system must be kept strong and healthy by regular exercise in open air. All kinds of violent exercises, such as riding, cycling and swimming

must be avoided during pregnancy. Speaking generally, working women always have normal deliveries whereas those women, who are used to idle and luxurious modes of life, have complicated delivery. It clearly shows the necessity for moderate exercise during the pregnant stage. Women having heavy house work in their ordinary routine life must see that excessive fatigue either to the body or mind is avoided. If the circumstances and weather allow, it is best to have exercise in the open air, such as walking in the evenings. Women engaged in industrial work should be off from work at least 4 weeks before full time. To be on the safe side it is better that pregnant women, in general, and, those who have had repeated abortions and premature labour in particular, avoid long bus journeys. Lifting of heavy weights is to be prohibited.

REST AND SLEEP: These are as important as exercise, especially for those who are over-worked in ordinary life. She must have at least eight hours sleep. An afternoon rest is beneficial in the last two months.

BOWELS: A major portion of pregnant women tend to become constipated. It can be corrected by taking proper diet (fruits and vegetables), drinking plenty of water and a fair amount of milk. Purgatives of any kind should strictly be avoided.

CARE OF TEETH: The deficiency in diet, as regards Vitamin C and D causes dental decay during pregnancy. Any pyorrhoea already present is likely to become intense in pregnancy. Due to these reasons proper attention must be given to maintain the teeth and gums in perfect health by cleaning it morning and bed time and after each meal.

CLOTHING: Pregnant women must wear loose and light dress, so that unnecessary pressure is avoided especially in the

breast and waist regions. Her dress must be always clean. An abdominal belt is advisable in the last months of pregnancy in case of pendulous belly.

BATH: Daily bath, which the pregnant woman is used to normally, can be safely continued throughout.

BREASTS: Undue pressure by wearing tight brassieres must be avoided. Breasts and nipples have to be kept clean by washing with soap and drying. Any cracks in the nipples must be carefully attended to.

SEXUAL INTERCOURSE: It should be strictly avoided in the early months of pregnancy especially in the case of women who have had repeated abortions and miscarriage and also in the last two months, to avoid the risk of septic contamination. At other times the greatest moderation should be observed. It is of great value if it is completely given up in case of habitual abortions.

MENTAL HYGIENE: The expectant mother should avoid all mental excitements. From the psychological point of view, the least amount of fear, or emotional excitement in pregnancy has a great influence on the child as well as the general health of the mother. It complicates the labour. She must try to create herself a proper, peaceful mental environment at any cost even under the worst circumstances, so as to enable her to pass through a normal delivery.

Apart from all the above advices regarding diet and hygiene in pregnancy, every pregnant woman must see that any pathological symptoms, viz., blood discharge, swelling in the face and lower extremities, head-ache and epigastric pain, early rupture of membranes, etc., are immediately reported to a qualified obstetrician and timely treatment effected.

SPASMODIC BRONCHITIS

DR. M. PADMANABHACHARLU, Atmakur.

Name: Mr. G. L.....of Kurukunda

Age: 54 years, stout and short.

Date of observation: 27—7—1955

Entrance complaint: Chronic cough with hoarseness and dyspnoea.

History of the patient: The patient is a professional cook and water carrier. Since two and a half years he was unable to carry on his profession due to terrible cough and dyspnoea. He could not get even slight relief with any medicine and became desperate. Having suspicion of Tuberculosis of lungs, he got x-rayed. It showed no evidence of acute lesion of lungs and the heart shadow was normal. The radiologist diagnosed it as spasmodic bronchitis and prescribed some medicines. In spite of taking those heavy prescriptions he got no relief.

On 27—7—55 he came in for consultation. I examined him and recorded his symptoms. The most characteristic symptoms were:—

1. Coated tongue with a triangular red tip;
2. Great sensitiveness to open air, sleeps with covers;
3. Agg: Sitting quiet, lying and on beginning to move; wet cold weather; lifting or straining; getting wet when perspiring
4. Amel: By continued motion; by warmth.

After repertorising his case I began with RHUS TOX 200. I gave 4 doses of RHUS TOX 200 and placebo for a week.

24—8—55 On inquiry, he told me that he found some improvement, and could not return earlier due to heavy rains: As there was improvement I gave him two doses of RHUS TOX 1 M and plenty of placebo and asked him to report after a month.

25—9—55: Absence of teasing cough since a fortnight; feeling much better. He informed me that he was able to carry on his professional work, which he abandoned two years ago. But hoarseness persisted. Repeated placebo.

14—10—55: No more improvement in hoarseness but free from cough and dyspnoea. RHUS TOX 1 M with placebo.

3—11—55: No further improvement in hoarseness. Again took the new symptoms which pointed to *Causticum*.

Hence *Causticum* 200 four doses and placebo.

27—11—55: Hoarseness slightly improved. Placebo.

12—12—55: No further improvement, Hence increased the potency to 1 M and placebo.

One fine morning (on 23—12—55) he came to me and expressed his gratitude for the cure he had. As he is poor, he could not pay me anything except his gratitude. Though I got no money for the trouble I had taken, I felt satisfied by my curing an ailment which never yielded to many reputed physicians of this district.

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THE THREE MIASMS

(By Dr. C. Vincent Madras)

(Continued from December 1957 Issue)

THE physical indications of Sycosis are inflammation of the testes; hydrocele; orchitis; rheumatism; cold and catarrh in parts of the body, e. g., nose, throat, lungs, stomach, intestines, uterus, etc.; anaemia; emaciation in any part of the body; all urinary troubles, such as diabetes, haematuria, etc., etc. Uterine and ovarian troubles, teething troubles of children, sweating of the head, sour diarrhoea and infantile cholera are also Sycotic in origin.

Syphilis is very deep and insidious in its action. As all the deep acting agents are also slow acting, it affects the mind slowly and gradually and causes imbecility or idiocy. It destroys the very balance of the mind, as it were, and renders it practically destitute of sharpness. All mental and physical conditions are worse at night, particularly in bed. Irresistible impulse to commit suicide. He thinks that his life is a burden and that the sooner he closes it, the better. Syphilis has a decided aversion for meat and he prefers food and drink cold. The Syphilitic is aggravated or not ameliorated by the excretions of sweat, urine, and stool. The Psoric is ameliorated by them and the Sycotic is also at times. The Syphilitic susceptibility to cold can be easily distinguished from the Psoric by the absence of anxiety, and from the Sycotic by the absence of the characteristic aggravation during rain and storm.

The chief physical manifestations of Syphilis are malignant abscesses and boils, buboes, fetid sweat, fetid breath and a thick flabby tongue with a white coating having

imprint of teeth. When Syphilis just acquired and manifested in the shape of an ulcer in the glans is healed up by germicidal injections and ointments, etc., it travels down in the interior of the system resulting in a miasmatic infection of the very personality of the victim. And it then, sometimes, reappears in the shape of malignant buboes and later on in the shape of malignant abscesses and boils, until at last it eats up the still finer tissues, like the mucous membranes and bones. If, however, the infection is cured at once and the insidious process inward arrested, the trouble may stop there. And the cure—real cure of the miasmatic infection means a re-appearance of the primary ulcer and a gradual disappearance of that.

Taking Psora again, the fundamental cause of all the illness of mankind, we find that it has an unnatural appetite. It comes on at an unnatural hour, it comes on even immediately after a full meal—his appetite is never satisfied. Sleepiness after a meal, likes sweet and sour things. Unnatural craving for chalk, clay, pencil, etc.

The Syphilitic prefers fried things more than boiled things. He has not much liking for meat, and even if he takes meat, he does not tolerate it well. Sycosis cannot tolerate meat at all while Psora can tolerate it to a certain extent. Psora prefers food and drink warm, and of all kinds of food he prefers the sweet things most. The Psoric disorder is functional and if it is to be structural it requires, time and one or the other of the miasms of Sycosis and Syphilis.

As an instance of the latter element we shall quote here a supposed case of insanity. You collect the symptoms of the patient, and you find that there are certain changes in the features of his face—a frantic or a vacant look stamped

on his face. Now the stamp on the face would signify that there has been some change of structure in the brain matter. This should at once enable you to diagnose that it is not Psora alone that has done this. There is certainly either Sycosis or Syphilis or both besides Psora, and it is one of these last, that is predominating.

The predominance of one or the other of the miasms is always in accordance with the exciting cause. A certain exciting cause has a greater power of exciting one of the miasms, while a certain other exciting cause has a similar power of exciting another. Only one miasm becomes predominant in a case because of the operation of the immediately exciting cause. One miasm may become more predominant than the others, because of the immediately exciting cause that has an affinity to it. The torturing miasm must draw your attention first. The fundamental cause is the true cause. The immediate cause is the exciting cause; this is to be avoided for a prevention, though not to be treated.

By bad mentation—the Psora—the man acquired the susceptibility to disease, that is to say that, he acquired such a condition as subjected him to the ravages of external nature—exciting causes—and he lost all the power of withstanding them. ‘A bad conscience is always fearful and uneasy’, says a good writer of a good book. He again adds, ‘The glory of a good man is the testimony of a good conscience’. So, man has to keep always a clean heart as a possible guard against diseases.

A deep acting miasmatic medicine in high potency, when used during the course of an acute disease or during the aggravation of a chronic disease will cause severe aggravation. As such, the acute manifestations or the aggravation of the chronic disease must be removed

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first by some superficially acting medicine as called for by the symptoms and then only the miasmatic medicine selected for the chronic case should be used. Unless there is sufficient strength in your patient to bear the sufferings of a temporary homoeopathic aggravation he may altogether succumb under your medicine. Here no *curatives*—deep-acting medicine—but only *palliatives*—superficially homoeopathic—should be given. So, if only the patient comes earlier, i.e., when he has got the vitality enough to stand the homoeopathic aggravation, can he be cured without much difficulty.

(To be continued)

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(A product manufactured under Homoeopathic methods
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NEWS AND NOTES

CO-EXISTENCE: While inaugurating the First Andhra Pradesh Medical Conference, Mr. Gopala Reddi, Finance Minister, Andhra State, referred to indigenous systems of medicine and said: “In spite of all of you, people still die. It may be that you prolong the agony or alleviate suffering. In this process, you need not decry one another. There is room for co-existence”.

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RISHI BHOJAN: Dr. B. Pattabhi Sitaramayya, former Governor of Madhya Pradesh, said that he proposed to try on himself the efficacy of the roots of a plant called ‘Rishi Bhojan’, which was said to keep a person free from hunger for seven days.

He said he had planted ‘Rishi Bhojan’ in Bhopal and he exhibited the root of the plant at the first Andhra Pradesh Medical Conference.

He said he would eat the root and try to go without food for seven days.

He disclosed that the leaves of a plant, reported to be available in the Jain pilgrim centre of Kulpak (six miles from Alair) when eaten, were said to be capable of subduing hunger for 12 days.

He wished Indian practitioners of the western system of medicine took greater interest in such indigenous drugs and helped to bring to light such hidden treasures by securing them for their exhibitions.

—Indian Express

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TOBACCO AND CANCER: A Study carried out in 1950 shows that the incidence of cancer in the region of the mouth was more common in Bombay than in New York or London. While 36 per cent of the cancer cases treated in a cancer hospital in Bombay were those of cancer of the mouth, the corresponding percentages in New York and London were 16 and 7 respectively.

Analysis of data collected in the course of the investigations suggests that the habit of chewing tobacco is probably one of the factors for the high incidence of cancer of the cheek, that of bidi smoking and tobacco chewing for the high incidence of cancer of the back of the tongue and upper part of the throat, and that of smoking bidi and cigarette for the high incidence of cancer of the lower part of the throat and adjacent part of the food-pipe.

* * *

ALL-INDIA HOMOEOPATHIC DIRECTORY AND WHO'S WHO 1958: Shri Ram Partap Verma, Prem House, Kanech, Sanahwal, Ludhiana, Punjab, intends to compile an All-India Homoeopathic Directory and Who's Who. Those who are interested are requested to get into touch with him.

* * *

HOMOEOPATHIC COLLEGE IN KERALA: Dr. A. R. Menon, Health Minister, told the Kerala Assembly recently that an application to establish a Homoeopathic College in the State, if the Government was prepared to grant financial assistance, had been received by the Government and it was under its consideration. The Government of Kerala had not decided to start any such College by the Government itself.

* * *

LASKER AWARD: Dr. Rustom Jal Vakil, the first Indian to receive the International Albert Lasker Award of 1957

of the American Public Health Association, for his outstanding research in the treatment of high blood pressure, was felicitated in Bombay by the Society of Goodwill and Culture at Gulmoht, Apollo Bunder.

The award was given to Dr. Vakil for his research work on the successful use of the 'Rauwolfia' plant in cases of high blood pressure.

Addressing the gathering on the 'Historical Evolution of Present Day concepts of High Blood Pressure and Heart Disease', Dr. Vakil said that on his return from England on completion of postgraduate studies, he was impressed, like many of his colleagues, by the futility of all methods of treatment, then current, for high blood pressure states.

Having read about Sir Ramnath Chopra's experiments on dogs with 'Rauwolfia' and having assured himself of the non-toxicity of the drug he said, he started using the powdered root of the plant, in the form of serpina tablets, routinely, in cases of high blood pressure in 1939.

After extensive trial of the preparation for about 10 years, he published the results of his work in the 'British Heart Journal' of 1949. It was for this work that the American Public Health Association had awarded him this year's Albert Lasker Trophy citation and award.

—Indian Express

HAND BOOK OF
MATERIA MEDICA, HOMOEOPATHY, VOLUME I.
(By K. L. Narasimhamurthi, Publishers, Account Test Institute, Madras 8)

PRICE. RS. 5/-

We have pleasure in acknowledging receipt of this book, which is a fine piece of printing and get-up. As the author states, this is the outcome of his notes to the students of Homoeopathy in the free classes held by him in Madras. Although it is only a compilation from the various standard works on the subject, the great care with which this work has been done should make it highly useful as a ready referencer for practitioners of Homoeopathy. It is a pity, therefore, that the scheme on which the various drugs have been serialised has not been divulged.

Why *Sulphur* should come first, *Nux Vomica* then, *Belladonna* then, and *Arsenic Album* and *Chamomilla* last in the book, we are not told. How is this an improvement on the alphabetical method, one would like to know.

As a second Volume is promised, let us hope that this point will be cleared. If we did not have to refer to the contents-cum-index every time we wanted to refer to a remedy, the usefulness of the book would have been greatly enhanced.

M. N. R.

Copies of the above book are on sale at:
INDIAN INSTITUTE OF HOMOEOPATHS
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THOUGHT GEMS IN HOMOEOPATHY

By Dr. K. N. Gopala Pillai, M. A., Changanachery

1. No true homoeopathic physician will ever fall into such a snare as "Specialism".

2. A true Hahnemannian treats every form of disease strictly and exclusively according to the rules laid down in the "Organon".

3. The exclusively high dilutionists are only one-eyed practitioners, though, of course, kings among the blind are the Allopaths.

4. In difficult chronic, complicated cases, we require not a remedy but a series of remedies, not one of which can itself effect the cure, but each of which works cure-wards, their cumulative action eventuating a cure.

5. Symptoms which may seem unimportant and ridiculous to the patient may be of the utmost value to the experienced prescribing doctor because they point straightaway to the indicated remedy.

6. As the mind rules the body, Homœopaths attach the greatest importance to mental symptoms.

7. Routine treatment with so called specifics is as disastrous in brain disease as it is in rheumatism and heart disease.

8. Paralysis and particularly what is called "Progressive paralysis" of the insane is not incurable to Homœopaths who know how to match a set of disease-symptoms by a drug which has produced a similar set of symptoms.

11. Treatment of diseases for their names is hopelessly unscientific. An exact diagnosis is often a hindrance than a help to treatment.

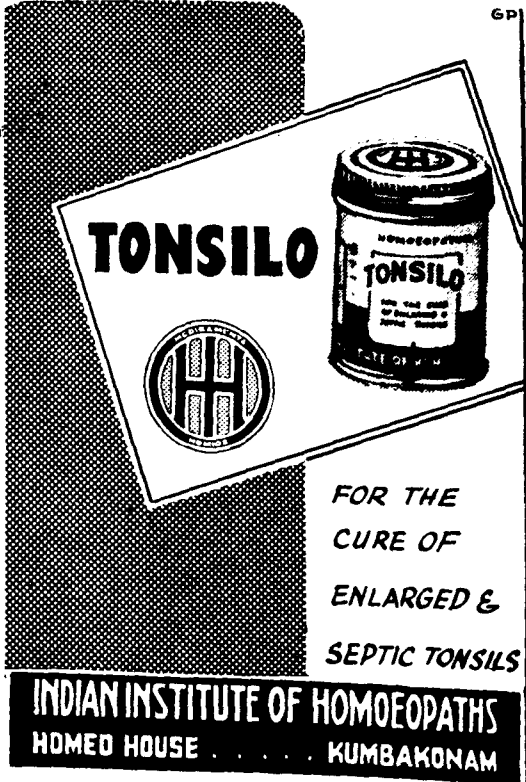
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HOMOEOPATHY

FOR HEALTH



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HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

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1958

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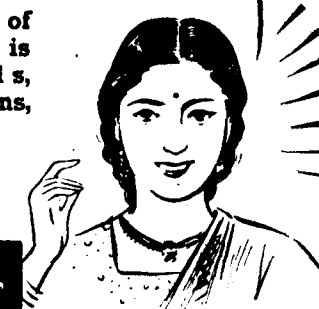
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THE HOMOEOPATHY

VOL. VII

FEBRUARY

Book 2

THE CENTRAL HEALTH COUNCIL

The Central Health Council recently held its first meeting for the New Year in Bangalore and was attended by the Health Ministers of various States, Mr. S. K. Dey, Union Minister for Community Development Projects Administration, representatives of W. H. O., Rockefeller Foundation and U. N. I. C. E. F., among others.

Mr. S. Nijalingappa, Chief Minister, Mysore, inaugurated the meeting. Mr. D. P. Karmarkar, Union Health Minister, and Chairman of the Council, conducted the proceedings.

The proceedings of this Council is of great interest to all medical practitioners as decisions are taken affecting policy matters regarding public health and medicine for the whole of India. As our readers are aware, we have always held out that if Homoeopathy and Indigenous Medicines are to flourish and be of greater use to the millions of our urban and rural population, it is imperative that they are helped to grow on their individual merits and maintain their separate entities. Integration with Allopathy can only spell their extinction and all those who have got the welfare of India in their hearts cannot allow such a situation to grow and lead to undesirable

results. We are, therefore, glad to note that most of the speakers at the meeting generally accepted this view, and expressed their opinion against the integration of modern and indigenous systems of medicine. We may take it, therefore, that in future, as a matter of settled Governmental policy Indigenous Medicines and Homœopathy will be allowed to develop by themselves and that the Government will render all necessary help towards this end.

Mr. S. K. Dey, Union Minister for Community Development Projects Administration, doubted the capacity of modern systems of Medicine in tackling health problems and felt, therefore, that Ayurveda and other systems will play an important role in improving the health of the people. The integration with modern medicine appeared to him to be an unequal partnership. He further appealed to the Health Ministers to accept the challenge of finding a solution to problems of health in rural areas by making it compulsory for medical men to serve one year in villages before graduation.

Mr. D. P. Karmarkar, Union Health Minister, also spoke of the present situation as a challenge "to our resourcefulness" and we have no doubt that our endeavours as a team will take us nearer our objective.

The question of rural medicine has found a place at every meeting of Health Ministers and emphasis has been laid on the fact that it has not been possible to give proper medical attention to rural areas and that efforts should be made to induce medical practitioners to go and settle in villages. This point has been emphasised *ad nauseam* and the Government has gone even to the length of offering special inducements and facilities to medical graduates willing to settle in villages. But the response has been meagre.

We believe that the time has come for the Health Ministers to take bold steps to break this stalemate about rural health. We know that for decades people had been talking of the poverty and the sub-standard living of our rural areas and it took a Pandit Jawaharlal Nehru to find out ways and means of solving this problem to a certain extent at least through the formation of community development projects, which are already starting to pay dividends. A similar bold action in the matter of rural health is also now called for and we would appeal to Mr. Karmarkar who talks of "a challenge to our resourcefulness" to break through the traditional channels of action and do something imaginative in this line.

For example, we know that as a result of the Community Development Projects and National Extension Service Schemes quite a large number of Gram-Sevaks and Gram Sevikas are spreading themselves out carrying knowledge and hope and method into practically the innermost reaches of rural India. We ask why should it not be practicable to give a 6 months' or one year's training to all these Gram Sevaks and Sevikas so that they might carry the healing art also into the innermost villages. Surely it is public knowledge that even for ordinary illnesses which can be treated easily in their early stages by intelligent laymen, the villagers have to suffer in the absence of proper dispensaries or doctors within walking distance. This state of affairs can easily be mended if only the Health authorities and the Health Ministers will wake up from their lethargy, shake off preconceived prejudices and use all means in their power to bring succour where it is needed. We make this suggestion to our Union Health Minister, Mr. D. P. Karmarkar, and hope that the reputation he has for drive and imagination will be put to use in initiating some such step.

Another important decision this Central Health Council has taken in their recent meeting at Bangalore refers to the

recommendations of the Dave Committee on Indigenous Medicine. It was the Committee's opinion that Central action with a view to improving the possibilities of Indigenous Medicines and Homoeopathy should be undertaken. But now, all the Health Ministers, in conference met, have decided that it was not possible to lay down a uniform policy for all States under existing conditions and have recommended to the State Governments to take such steps as they consider practicable and desirable for the development of Indigenous systems of Medicine and Homoeopathy. Nevertheless, they did also feel that the Centre should continue actively to encourage research in Ayurveda, Unani and Homoeopathy.

We shall have opportunity to refer again to this important decision at a later date.

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THE THREE MIASMS

(BY DR. C. VINCENT, MADRAS)

(Continued from January 1958 issue)

A CLASSICAL LIST OF MIASMATIC REMEDIES

ANTI-PSORIC REMEDIES

Abrot	*Caps.
Acet. Ac.	Cist Can.
Agar. Musc	Clematis
Aloe.	Coccus Cacti
*Alumina	*Con
Ambra Grisea	*Crotalus
Ammon Carb	Croton Tig.
*Anacardium	Cupr Met.
Ant. Crud.	Dig.
*Apis	Dulc.
Arg. Met.	Ferr. Met
Arg. Nitr.	Ferr. Phos
**Ars Alb.	*Fluo Ac
**Ars Iod.	*Graph
*Aur. Met.	**Hepr Sulph.
*Aur. Mur.	**Iodine
*Baryta Carb.	*Kali Bichr.
Bell	*Kali Carb.
Benzoic Ac.	*Kali Iodide
Berberis	Kali Phos
Borax	Kali Sulph
*Bufo	*Lac Caninum
*Calcarea Carb.	**Lach
*Calcarea Ars	*Led
*Calcarea Phos.	*Lyc.
*Carbo An.	Magn. Carb.
*Carbo Veg.	Magn. mur.

Manganum
 Mezereum
 Mur. Ac.
 *Natr. Ars.
 *Natr. Carb.
 **Natr. Mur.
 *Natr. Sulph.
 *Nitric Ac.
 Petrol
 *Phos
 Phos. Ac.
 Plat.
 Plumb.
 **Psor

*Pyr.
 Sarsap
 Secale
 *Selen
 **Sepia
 **Sil
 Stann.
 *Staph
 **Sul
 Sulphuric Ac.
 *Tarent
 Therid
 **Tuberc.
 Zinc.

ANTI-SYCOTIC REMEDIES

Arg. Met.
 Arg. Nitric.
 **Ars. Alb.
 **Ars. Iod.
 Benzoic Ac.
 Berberis
 *Calc. Ars.
 *Caust.
 Clematis
 Colch.
 Dulc.
 Fluor Ac.
 **Iodine
 *Kali Bichr.
 *Kali C.
 *Kali Iod.
 *Lyc.
 Magn. Carb.
 Magn. Mur.

Magn. Phos.
 **Mezereum
 Mur. Ac.
 *Natr. Ars.
 *Natr. Carb.
 **Natr. Mur.
 *Natr. Sulph.
 *Nitric Ac.
 *Phos.
 Phos Ac.
 **Psor.
 **Pyr.
 Sarsap.
 **Sepia
 **Sil.
 *Staph.
 *Thuja
 **Tuberc.

ANTI-SYPHILITIC REMEDIES

Ars. Alb.	**Lach
Ars. Iod.	*Lycop.
*Aurum Met.	*Merc.
*Aurum Mur.	*Nitric Ac.
*Calc. Ars	Phytolacca
Fluor Ac.	Sarsap.
**Hep. Sulph.	*Staph.
*Kali Bichr.	*Syph.
*Kali Carb	**Tuberc.
*Kali Iod.	

All these remedies are used in the treatment of chronic cases. They are all deep-acting. Those with one asterisk against them are comparatively more deep-acting than those without asterisks and those with two asterisks are still more deep-acting. Medicines outside these lists have not much of a miasmatic basis, and they are, as such, used in acute cases generally, and also, at times, during sudden aggravation of chronic diseases. It should be noted that some of these chronic remedies are purely anti-Psoric, some anti-Sycotic and some others anti-Syphilitic, while some are anti-psoro-sycotic, some anti-psoro-syphilitic, and some others anti-psoro-syco-syphilitic.

In the treatment of chronic cases any one of them may have to be followed by any other as occasion arises. But it is not advisable to state as to which should be used after which, as such rigidity would tend to interfere with the freedom of the prescriber in following the suitability of the remedy. Selection should always be made on the basis of the symptoms available and if a particular remedy is called for by the symptoms after any particular remedy, there should

be nothing to stand in the way of the selection. Let us, therefore, avoid orthodoxy in the matter of following one medicine with another.

If the medicine detailed in the above lists are studied thoroughly from a miasmatic point of view, it will appear that some of them have the general symptoms of Psora, some of Sycosis and some of Syphilis. And it will also appear that some of them have even a combination of the general symptoms of two and even of all the three miasms. If you can acquire a knowledge of the general characteristics of these miasms, the treatment of any chronic case will become easy. Because all you will have to do then, would be only to find out the symptoms of the particular patient and to trace out and use the miasmatic remedy that has them.

We have now to frame our conceptions of Psora, Sycosis, and Syphilis from the study of the *Materia Medica* of the remedies, instead of from a study of patients as is done in the case of acute diseases, yet this was by no means the original method with Hahnemann. He made his studies and framed his first conceptions of these miasms from the study of a large number of patients, because he had no miasmatic *Materia Medica* then. It was by a close scrutiny of patients that he discovered three general differences between different groups of Patients and named these three different groups Psoric, Sycotic and Syphilitic. This is, in brief, the history of the discovery of the chronic miasms.

You have to frame your conceptions of the three different chronic miasms (from which chronic diseases arise) by studying up the general symptoms of each, just as you frame your conceptions of cholera, fever and small-pox etc., by studying up their generals. The only difference is that,

in the case of acute diseases, you can form your conceptions from a study of patients, while in the case of the chronic miasms, it would be easier to frame your conceptions from a study of the three classes of miasmatic remedies.

If the general symptoms of the disease (e. g. evacuations, vomiting, coldness and collapse, etc., of cholera) are once grasped, it becomes easy to treat any patient having that disease because it remains then only to find out the particular symptoms in the case of the particular patient and to choose the remedy that has those particulars. In like manner is the case with a miasm and a miasmatic patient too.

(To be continued)

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WHAT SUFFERS?

(SWAMI VENKATESANANDA, A.M.I.H.)

I wish everyone had asked himself this question, and stopped not till he really found the answer.

Is it the body that suffers? No. "The night before" a good old Swami was suffering great agony, he was being choked by asthma; the next morning his body, dead and cold, yet showed no sign of suffering. No, the body does not suffer from any disease.

The mind, perhaps? No. The "patient" is there on the table. The surgeon administers spinal anaesthesia. The abdomen is cut open. The patient looks on with the astonishment of a spectator. The mind is there, functioning, all right. But there is no pain, no suffering.

And, of course, everyone knows the soul does not suffer. It is Immortal, beyond birth, death, old age, and disease. It is That of which the Bhagavad Gita speaks:

*Nainam chindanti sastraani, nainam dahati pavakah
Na chainam kledayantyapo, no soshayati maarutah.*

Weapons do not cut Him; fire does not burn Him; water does not wet Him; nor does wind dry Him up. He is beyond even death.

Ajo Nityah Saswatoyam Purano

Na Hanyate Hanyamaane Shareere

He is the Unborn, Eternal Primordial Being, who is not killed even when the body dies.

Into Him we retire in sleep—though we are unconscious of the truth—and it is in Him that, whatever be the serious-

ness of a man's condition during the waking hours, he finds great peace and happiness. The restless lunatic is calm; the man suffering from the most excruciating pain gains temporary freedom from it, and enjoys peace and happiness.

Body, mind and soul—are the three broad categories we know the human being is made of. If disease and suffering are not in these, where are they?

Our scriptures solve this problem by defining the sufferer as:

Jiva-indriya-mano-yuktam Bhokta iti ahuh maneeshinah
The sufferer is not any one of these, but a mysterious something that links the three. That is the Life Force, Vital Force or the dynamic force.

The operation of this Force is a great mystery. What made us take the first breath and what is going to expire at the last breath shall ever remain mysteries except to the seer of intuitive insight. The mystery of health and disease is but a third one linking the other two.

How does all this help the physician?

Is it not at once apparent to you that the worst fever, the splitting head-ache, the violent eruption on the skin, whatever be the outward sign that indicates an abnormality in the function of the Vital Force, *could* vanish as mysteriously as it was made manifest? Surgery has its place in any system of treatment, and in some cases it does work wonders. But every extra-growth does not need to be cut, nor every swelling demand an incision. The Life Force that threw it up under the stress of certain conditions, knows how to resolve it when those conditions are remedied. Homoeopathy administers just this remedy in the right manner.

True, but more important than the remedy that you administer, is the cheer and hope that you ought to infuse into the patient. All Health is within him. He is the Immortal Atman beyond disease and death. The Life Force which flows from this Immortal Atman, through the mind, to the body, animating it, would be considerably weakened if the channel, viz. the mind, is weakened. Despair, dejection, gloom, lack of will power, negative thoughts, — all these sap the vitality of the mind. When these are present even the best selected remedies often do not manifest their action fully and the result is unsatisfactory.

The doctor's foremost duty is to make the patient cheerful and hopeful. Let your breezy affection reassure the patient that he has only to take the globules on the tongue to feel better. The onlookers might even accuse you of treating the patient's "great" suffering with callous light-heartedness; but rest assured, the patient will come back to you, restored to good health, and he will bring with him others to be similarly healed.

To the extent the vital force needs *help* to heal itself, Homoeopathy provides the correct medicinal agents in the potentised form. The crude drug is atomised and its vital power pressed into service — that is the homoeopathic medicine.

The substance that is capable of producing just that derangement of the vital force alone is capable of curing it, too, when administered in the potentised form. The hunter who enters a forest and goes deep into it, knows how to come out—he knows the path. But the man who lands in the thick of the forest by parachute does not find his way out of it; his unguided efforts would only endanger himself and others. That is what happens when local applications land upon isolated parts of the body. They do not even

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approach the disease; and on the contrary, they themselves get into the system, to work their own havoc.

How does a knowledge of "Who suffers" help a patient?

To give the Vedantin's summary reply. It makes him realise that disease itself is a myth! It is as false as the blueness in the sky, or the dacoit seen in a dream.

The dacoit was a self-created object of one's own imagination; but the palpitation of the heart, perspiration of the body, and trembling of the limbs with which the dreamer awoke, are realities. Even so something went wrong in the vital force—it was as subtle and as "false" as a dream. But as a result of this disturbance, the grosser body is stricken with disease. That has to be treated, by setting right the cause first. If the person who saw a dacoit in dream, persisted even in the waking state that the dacoit was a reality, he might go mad or perhaps have a heart-failure. The wise man will dismiss the *dream* first as soon as he wakes up; and then wipe his perspiration, repeat the Lord's Name for a while and perhaps drink a glass of water, before going back to sleep again! The diseased person should similarly treat his mind first, through Vichara, asserting the Immortal Diseaseless nature of the Self; then take a minute dose of Homoeopathic remedy, repeat the Lord's Name (the Mahamrityunjaya Mantra), adjust his diet, and go about his duties.

The knowledge of "Who suffers" will restore his confidence and hope, bring back cheer and happiness.

Above all, it is good to remember that nothing — not even the worst disease — can approach the inner self of man. This Atma is all-life, light, bliss and peace. It is because man is unable to tap this source that he suffers. It is good for everyone to feel that behind the disease, the weakness,

and the pain, there certainly is the source of all life and strength. The existence of the source is revealed by the happiness and peace derived by the sufferer during deep sleep.

Not only that. Major Ramachandra Rao, a great devotee of my Gurudev Sri Swami Sivanandaji Maharaj, told us this true story. During the last war, he was nursing the wounded, in Europe. A soldier had had his knee broken. Major Rao went to his succour. The soldier would not allow the Major even to touch his knee: it was so painful. At that moment, another bomb fell a few yards away. Fear seized the wounded soldier that he might be killed. The Major says: "He got up and ran quite a distance, before he sat down, writhing with pain." How did he manage that? Unconsciously he had tapped the source. The Yogi or the sage does it consciously.

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LADIES GET IT

(By Dr. Mrs. N. A. RADHA,

Medical Officer-in-charge, Women's and Children's Clinic,
Indian Institute of Homoeopaths.)

In a state of perfect health, the menstrual function is so performed in its regular and rhythmic manner that it does not cause pain or disturbance to the normal activity of a woman's life. Speaking generally, comparatively few women come under this category. In the majority of cases, conditions are the very opposite. Intolerable pain and general malaise, depriving the sufferer of all intellectual and social happiness, become the characteristic symptoms of the menstrual flux. Such painful menstruation is called dysmenorrhoea. It may be due to an unhealthy condition of the uterus and ovaries or it may be caused by disease in other organs, viz., chlorosis, rheumatism, gout, neuralgia, etc. According to the constitution and the temperament of the sufferer and the different causes from which it originates, four classifications can be made, viz.,

1. Spasmodic dysmenorrhoea,
2. Congestive or inflammatory dysmenorrhoea,
3. Mechanical or obstructive dysmenorrhoea,
4. Membranous dysmenorrhoea.

1. SPASMODIC DYSMENORRHOEA: This type of dysmenorrhoea, is seen in young unmarried women connected with sterility and irritable uterus or ovaries. Pain is caused by the spasmodic contraction of the uterine muscles, due to irritation of the sympathetic nervous system. A few hours before the onset of menstrual flow, she feels a certain amount of discomfort and slight pain at the pelvic region, which slowly increases and at the actual establishment of the

discharge, pains become more and more intense in the small of the back through the hips, and down the thighs. Again spasmodic pain in the hypochondrium as if it would burst, violent bearing-down pain resembling the agony and suffering of labour, at the vulva, perineum, and rectum as if the whole pelvic contents were coming out of the vagina, frequent urination, head-ache and vomiting precede the menstrual discharge, which finds its exit at the vulva. Now, the pains slowly decline if a free flow occurs. The poor woman becomes so exhausted in vitality and depressed in spirit that it will take four days for her to recover. In some cases, within one or two days she may become normal.

This condition is present in girls and women of a luxurious way of living due to lack of proper exercise. Diseases such as rheumatism, neuralgia and gout account for such painful dysmenorrhoea; chlorosis in young girls is another cause. Sometimes, it is associated with excessive sexual indulgence and masturbation. Undeveloped uterine muscles and irritable ovaries also occasion this condition.

Treatment: To relieve the pain, during menstruation, hot water bags and hot baths can be suggested. 5 grains of Mag. Phos. 6x in a glassful of warm water repeated every half hour bring relief. Avoidance of constipation and a vitaminful diet is necessary. In the case of the leisured class of women, by proper exercises in open air and engaging them in work, better results were obtained. Regarding medicines, treatment must start one week before menstruation.

Bell 30x: is found to be a very good remedy for spasmodic pain resembling labour pain with head-ache.

Chamomilla 30x: can be given in violent pains extending to the thighs and legs.

Cimicifuga 6x, 30x: very effective with rheumatic complaints.

Colocynthis 6x, 30x: cramping pains in the uterus increased by eating.

Sabina 6x: pain from back to front

Puls, 30x, 200x: If administered one week before the actual menstrual flow, spasmodic pains do not occur.

2. CONGESTIVE OR INFLAMMATORY DYSMENORRHOEA. The pain is due to the inflammation of the mucous lining of the uterus or it may be caused by the inflammation of the ovaries, such as Salpingitis, ovarian cysts, etc. Uterine displacements, peritonitic adhesions and metritis also cause pain and suffering during menstruation. In this form, the pain always corresponds to the inflamed area and is of fixed nature. Complete rest during the period considerably reduces the pain. In the majority of cases, married women, who have borne children, suffer from this type of dysmenorrhoea.

Apis Mel 30x: Inflammation of the ovaries with tenderness in the ovarian region; frequent desire to urinate.

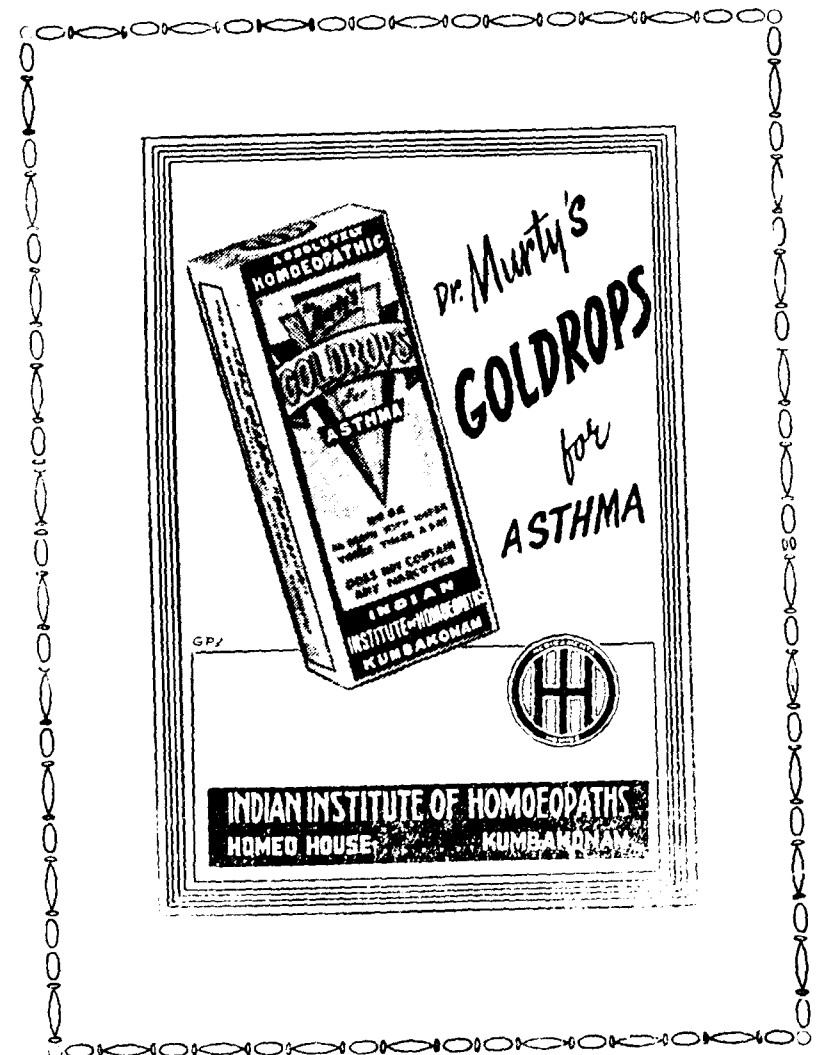
Cimicifuga 30x: Inflammation of the ovaries and irritable uterus.

Kali Bichrom 6x, 200x: When pains are located within the uterine cavity.

Colocynthis 30x: Indicated when there is intense pain causing her to draw up double.

Lachesis 30: Pains in the left ovary and uterine region relieved by a free flow.

3. MECHANICAL OR OBSTRUCTIVE DYSMENORRHOEA: is pain associated with the expulsion of the discharge, which is imprisoned within the uterus owing to some mechanical obstruction of the cervical canal. This obstruction may be due to the narrowness of the cervical canal, or partial closure of the os uteri due to the presence of fibroid growths or



ovarian cysts. Thickening of the lower uterine muscles and uterine displacements are also other causes. Pain subsides once a free flow is established. Child birth generally cures this condition. When indicated medicines do not give relief, dilatation or other surgical interference may be necessary.

Puls 30x, 200x: Encouraging and successful results were obtained in thickening of the lower uterine portion and delayed painful menstruation.

Sepia 30x: Pain due to displacement of the uterus; bearing-down pains felt at the vulva.

Ars. Alb. 30x: Dysmenorrhoea associated with ovarian tumours and burning sensation.

Conium 30x, 6x: Uterine fibroids. nausea and vomiting.

Carbo Animalis 30x, 6x: Due to displacement of the uterus.

Silicea: Uterine displacement and constipation.

4. MEMBRANEOUS DYSMENORRHOEA: Pain is caused by the passage of membranes or cysts from the uterine cavity. In married women it is due to the remarkable changes in the endometrium of the uterus, following puerperal infections. Unmarried girls of a peculiar constitution are also seen sometimes suffering from this condition. The membranes are thrown off in pieces at intervals or expelled as a mass, with intolerable pains. On examination of the expelled membranes, the triangular shape of the uterine cavity can be seen. It is distinguished from the products of uterine abortion or tubal pregnancy from the absence of the chorionic villi.

Bromium 30x: Violent contractive spasms during menses lasting for hours leaving the parts sore.

Bryonia 6x 30x: Tearing pains in the limbs during menses.

Calc, Carb 30x: Menses too profuse.

Rhus Tox 6x, 30x, 200x: When rheumatic symptoms are present.

NEWS AND NOTES

AYURVEDIC PHARMACOPOEIA: The Government of Bombay has set up an eight-member Committee under the chairmanship of Pandit Shiv Sarma, for preparing an Ayurvedic Pharmacopoeia.

°° °° °°

THE SALEM DISTRICT HOMOEOPATHIC ASSOCIATION held their monthly meeting on 3rd January at Velur under the chairmanship of Dr. M. Rajamanickam. A tea party was arranged by the local members. Dr. M. K. V. Puri gave a lecture on *Homoeopathy and Pregnancy* which was very much appreciated by the audience.

°° °° °°

GRADUATES OF THE COLLEGE OF INTEGRATED MEDICINE: A deputation of the G. C. I. M. Association (Central) representing G. C. I. Ms of Madras, Mysore, Andhra and Kerala waited on Mr. D. P. Karmarkar, Union Health Minister, during his recent visit to Bangalore and requested him to encourage the Governments of Madras and other States to appoint G. C. I. Ms in the medical and public health Services.

There is no point in opening Colleges of Integrated Medicine, Ayurveda, etc., and passing hundreds of graduates every year, if they are to be denied entry into the Government's medical and public health services. At the same time, the moaning goes on that there is a tragic shortage of medical practitioners to keep pace with the expanding medical services.

°° °° °°

STIMULATORS AND MODERATORS: Academician S. I. Wolfkovich writing in the *Soviet Land* of 5th January says:

A fraction of a gramme of a powder derived from a certain organic matter, when dissolved in water, and sprinkled on a plant, will cause an extremely rapid growth of its root system. Substances of this kind, which stimulate growth, are already in use in the cultivation of tomatoes, apples, peas and other plants.

Most of the stimulating substances have an *uncommon* quality, namely, when they are applied in large volumes they act as moderators. They prevent potatoes from sprouting in storage, they stop immature fruits from falling off the trees, and they can even make a rose, the favourite of all flower lovers bloom for weeks instead of days.

In other words, substances which in large quantities act as moderators also act as stimulators of growth in plants when used in *small* quantities.

The universality of the Hahnemannian Law is proved again and again at every step the scientists make, but they refuse to acknowledge it. None so blind as those who will not see.

AROGYA YATRA: The Andhra Ayurvedic Board has submitted a Rs 7 lakh Scheme to the Andhra Government. Under this Scheme, Ayurvedic Health Units are to be established in 2000 villages thus following up the work initiated by the *Arogya Yatri* of Ayurvedic Health Expedition inaugurated recently.

Barring Bengal, perhaps, Madras State has the largest number of Homoeopathic practitioners in India. How does the Madras Government propose to use their services to extend *Arogya* among thousands of villages that are still without any medical facility?

Homoeopathy is safe, Homoeopathy is cheap. When will the Madras Government pick up initiative and courage to start at least a pilot scheme under Government auspices to carry Homoeopathic medicine into a select number of villages?

SINGAPORE HOMOEOPATHS: When Dr. C. V. S. Corea was last in Singapore, he inaugurated a Pan-Malayan Homoeopaths Association to fight for recognition by the Medical authorities there. Homoeopaths are at present allowed to practise but no official recognition has been given. Dr. E. P. McCarthy Heyser states that a charitable 40 bed Homoeopathic Hospital is expected to function in Singapore before the New Year is out.

INDEX FOR "HOMOEOPATHY"—1957: Thanks to the enthusiasm displayed by Mr. P. C. Cheriyaetan Raja, Kozhikode, we are enabled to publish along with this issue an Index of authors and subjects in respect of the 12 issues of "*Homoeopathy*" comprising Volume VI. Mr. Cheriyaetan Raja was kind enough to prepare the Index. We have to thank him also for the suggestion to number the pages of our Journal consecutively from January 1958, which we are gladly adopting.

BODY AND MIND: Inaugurating a four-day conference of the Association of Physicians of India, at Trivandrum on 19th January, Dr. B. Ramakrishna Rao, the Governor of Kerala, made some important points which we give below in brief:—

1. In spite of our having a fairly large number of scientists, including physicians and surgeons in this country, it has not been possible for us so far to make much significant contribution to research and discovery.



ALFALFA TONIC

(HOMOEOPATHIC)

With

VITAMIN B-COMPLEX

Alfalfa Tonic is a common preparation of the Homoeopathic system of medicine which has been tried and used for well over 50 years.

It is an agreeable combination of fresh plant Alfalfa, *Avena Sativa*, Hydrastis, Aswagandha, China etc. with Homoeopathic attenuations of the Tissue Phosphates.

Particulars in respect of the Homoeopathic drugs that go into this preparation are given below as summarised by *Dr. William Boericke* in the Homoeopathic Materia Medica, Ninth Edn.

"ALFALFA: From its action on the sympathetic nervous system Alfalfa favourably influences nutrition, evidenced in 'toning up' the appetite and digestion resulting in greatly improved mental and physical vigour with gain of weight. Disorders characterised by malnutrition are mainly within its therapeutic range, for example neurasthenia, splanchnic blues, nervousness, insomnia, nervous indigestion etc. Acts as a fat producer, corrects tissue waste. Increases quality and quantity of milk in nursing mothers.

"AVENA SATIVA: Has selective action on brain and nervous system favourably influencing their nutritive function. This is called for in nervous exhaustions and the nervous states of ladies in different conditions.

"CHINA (*Cinchona Officinalis*): Debility from exhausting discharges, loss of vital fluids together with a nervous erethism are favourably influenced by this remedy.

"HYDRASTIS: Acts especially on mucous membranes, and tones them up. Hydrastis is especially active in old, easily tired people, cachetic individuals with great debility, Weak muscular power, poor digestion and obstinate constipation.

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"CALC. PHOS: Indicated in anaemias after acute diseases and chronic wasting diseases. Also indicated in tardy dentition and troubles incidental to that period.

"FERR. PHOS: Increases haemoglobin; indicated for pale anaemic subjects, susceptible to haemorrhages.

"KALI. PHOS: One of the greatest nerve remedies. Indicated in disturbances of the sympathetic nervous system; prostration; weak and tired patients. "It corresponds to states of adynamia and decay; gangrenous conditions."

"MAG. PHOS: Indicated in neuralgic conditions and is suitable to tired, languid exhausted subjects.

"NAT. PHOS: A remedy in mild inflammatory conditions, flatulence, colic etc."

This Tonic is highly recommended in convalescence, in depleted conditions and in pregnancy and lactation.

This is particularly valuable in mixed deficiencies of B. Vitamins, impairment of gastro-intestinal functions, digestive disturbances, neurological manifestations, neuritis, vague nerve pains, insomnia, disease of the skin, sores round the lips and fissures round the angles of the mouth, glossitis and ulcers of the mouth and tongue.

Each fluid oz. also contains:—

Aneurine Hydrochloride B. P.	20 Mgms.
Riboflavin B. P.	5 Mgms.
Nicotinamide B. P.	50 Mgms.
Pyridoxine Hydrochloride B. P. C.	2 Mgms.
Calcium Pantothenate	2 Mgms.
Folic Acid B. P.	1 Mgm.
Soln. of Sod. Glycerophos B. P. C.	$\frac{1}{4}$ gm.
Soln. of Pot. Glycerophos B. P. C.	$\frac{1}{4}$ gm.

Packing: In both 4 and 16 fluid oz. bottles.

Dose: One Teaspoonful with water three times a day or as directed by the physician.

Price: 4 oz. packing Rs. 3/50. 16 oz. packing Rs. 12/00.

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2. There is a tendency among some doctors to depend for their diagnosis more on special agencies like microscopic examination, X-ray pictures etc., than on their own clinical experience. This has led to an impression that treatment through modern scientific medicine has become comparatively costlier than before.

3. Modern development of mental sciences has demonstrated the indissoluble unity between mind and body postulated long ago by philosophers. The mental attitude and the psychological condition of patients are now known to play a much more important role in the process of healing.

HOMOEOPATHIC REVIEW: We have received the first issue of an Anglo-Guzarati Quarterly entitled "*Homoeopathic Review*" which is priced at Re. 1 per issue. We are promised that the next issue will be out in April and if the future issue maintains the same high standard both in get-up and contents as this one, it will be a welcome addition to Homoeopathic journalism in India. It is published by the Secretary, Guzarat Branch of All-India Institute of Homoeopathy, Ahmedabad.

BINEURAL STETHOSCOPES

We have received a few pieces of superior quality Bineural Stethoscopes made in China, with 3 adaptable chest pieces in Ford's Bell type, Metal diaphragm and Bakerite Wristlet. The Ford's Bell type is to be used for ordinary diagnosis, the metal diaphragm for heart and lung and the bakerite wristlet for blood pressure.

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One of the finest uses for which Homoeopathic Medicines are used by all schools of medicine is for EASY DELIVERY.

BAHOLA Brand EASY DELIVERY TABLETS, if used during pregnancy, keeps the lady free from so many ailments generally appearing during this period, and also aids in developing a normal pregnancy and normal easy delivery. Even cases in which previous deliveries have been difficult and complicated have benefitted by taking BAHOLA Brand EASY DELIVERY TABLETS during subsequent deliveries.

DOSE: One Tablet at a time, three times a day, throughout pregnancy or at least after the sixth month till delivery, makes delivery a matter of course, (unless there are anatomical impediments.) When labour pains start, give two tablets every 15 minutes with a little hot water. The tablets has to be dissolved in water in the mouth and then swallowed.

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Edited, Printed and Published by Dr. V. R. MURTY at the Homoeopathy Press,
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In the same way as our body needs vitamins for its proper function a balanced supply of mineral Salts is also needed. A deficiency of these Tissue Salts results in disease, either simple or severe.

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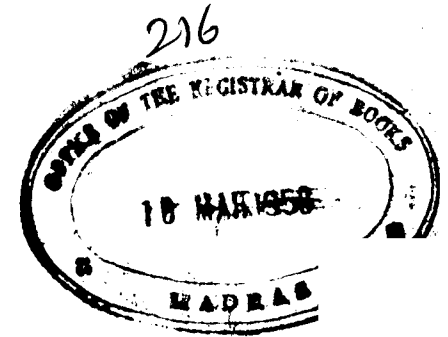
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MARCH 1958

GP

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HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

MARCH

1958

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CIRRH-BALA

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troubles Etc.,



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TOP: Dr. V. R. Murty family & friends giving a send-off to Kumari CHARUBALA

RIGHT: The Principal of Stella Mari's College and Kumari CHARUBALA with co-students before emplaning.

THE HOMOEOPATHY

VOL. VII

MARCH

Book 3

WHO'LL KILL THE GOLDEN GOOSE?

I

THIS is the Goose that laid golden eggs for the poor villager—at least, if it did not actually add to his wealth, it saved him many a pretty paise in the way of doctors' bills. To that extent it added to his wealth, this Golden Goose, Homoeopathy, and its friends, Indigenous Medicines.

And, just because it is a Golden Goose, they all wanted to kill it.

Who would kill the Golden Goose?

I, said the modern Doctor,
I hate its quack, quack,
I'd fatten on its flesh
If only you'd let me be,
I'd kill the Golden Goose.

I, said the Union Government,
With my wiles
And my guiles,
And my lip sympathies,
While my cash
Goes to other pathies:
I've made a hash
Of Homoeopathies—
I'll kill this Golden Goose.

With my rules and regulations
 I've added to their tribulations;
 Their numbers are restricted,
 Their lives are constricted.
 With my effective Plan
 As far as I can
 I've tried to kill this Golden Goose.

Up rose the Homoeopath and said:
 I trampled on its laurels
 With my quarrels;
 I sat on my seat
 When others were on their feet.
 So, by default
 It's my fault
 If the Golden Goose is dead.

II

Safe in their entrenched position and established reputation, modern doctors put out occasional feelers to find out how they can effectively throttle the indigenous systems of medicine and Homoeopathy, so that in a nationalised India, they are not enabled even remotely to compete with modern medicine in general practice.

The latest is that it is in the interest of these other systems that they should be taught only at research level to specially qualified graduates of modern medicine. If any remedies or methods of treatment were thus proved to be good, modern medicine would be only too glad to make use of them—even as vaccine therapy [known as Nosodes to Homoeopaths] has been made a part and parcel of allopathic medicine. In fact, modern medicine is prepared to do anything so long as other systems do not compete in its general practice.

As regards the Central Government, while honeyed words have been oozing out of the mouths of Health Ministers, during the last few years, in respect of Ayurveda, Unani and Homoeopathy, we cannot help but feel that mighty little is being done to justify the spate of sympathy that is being spouted out.

As a matter of fact, while a few thousand rupees are given to one institution here, another institution is upgraded or a third expanded, compared with the pace with which the unwilling horse of modern medicine is being goaded and prodded to keep pace with and fulfil the requirements of a fast expanding medical service, the indigenous systems and Homoeopathy are not being given any chance to share even in the rural medical benefits that are being started all over the country side by side with the Community Development Projects and National Extension Service Schemes.

We give below an extract from a recent press release :

“ Intensive development of rural health services are planned in the C. D. and N. E. S. blocks, which, by the end of the Second Five-Year Plan are expected to cover the entire country. There will be a total of 5,000 N. E. S. blocks, each comprising about 100 villages and 65,000 people. In 1,100 of these blocks intensive development of rural health services is planned. The nucleus will be a primary health unit, with three sub-centres in each block.

“The proposed staff of a primary health unit will consist of the following full-time employees: a medical officer, a health visitor or graduate nurse, four midwives or assistant nurses, a compounder, a sanitarian and ancillary staff.”

If during all these expansionist schemes of medical training and services, Government has no knowledge of the existence of Ayurveda, Unani or Homoeopathy, if indigenous medicine is offered no scope even in such rural medical aid, we despair of anything tangible being done to our benefit. Is it intended to lull these practitioners into a false sense of hope and security—soothing syrup, in fact ?

III

We are not qualified to speak of Ayurveda and Unani, but, so far as Homoeopathy is concerned, it started under very good auspices in India. The educated intelligentsia were, and now are, among its foremost converts; and every single one of them was a

standing protest against the failure of modern medicine to live up to its faith and ethics. Turning away from the constant failures of modern medicine, they found Homœopathy could, and did, help them back to health at an infinitesimal cost to whatever they had already spent on other systems.

Only the other day we received this interesting letter: "I have decided to take up this course (Homœopathy). To tell you the very truth, the death of my father for whom I could not offer the high and expensive medical charges of the modern doctors, has stirred me to learn Homœopathy, which is within the reach of the poor". (E. T. 1852)

The Report of the Homœopathic Enquiry Committee 1949 (page 23) contains this pregnant sentence: "We record that apart from the opinion of some eminent men trained in the regular system of medicine that Homœopathic medicines are efficacious, there is a widespread belief to that effect amongst people, including *many lay learned men*". Its real significance has been entirely lost on the Committee.

In spite of this good start and in spite of the fact that there are thousands of practitioners all over India they are an entirely neglected lot, mainly because, they have not learned to act in a united manner. In a democracy, as we have often remarked, the crying child gets the milk and one should learn to pull the strings. If we can do neither, why blame anybody else?

IV

By passing Homœopathic Practitioners' Acts and offering registration, most of our States have effectively throttled the existence of Homœopathy. Because, in one breath they all say, more or less, with minor variations, that only those who have come out of recognised institutions can be registered. All the while, the States know that there are no institutions, recognisable or otherwise, within their own periphery and that there are not more than 3 or 4 institutions that can come up to their requirements in the whole of India. Their whole out-turn of physicians for one year cannot be more than 100 to 200. So much so, that some States have ceased to register several years ago!

V

When all is said and done, Madras has a reputation for acumen and it is only in this State that no such frustrating legislation has been passed. We feel sure that, if and when this State thinks it necessary to introduce such an Act, they will give due weight to the fact that there are thousands of Homœopathic practitioners practising effectively in all our villages and make provision to afford continued recognition to them. They will not fail, we hope, to profit from the blunders of commissions and omissions, perpetrated in other States.

A SET OF MEDICINES FOR CHOLERA

is indispensable for rural Homœopathic practitioners

Five Medicines, all ready packed, with instructions—very useful in the various stages of this dreaded disease. With this packet in your pocket, you need not hesitate as to which medicine to choose. It is ready for all emergencies.

In the interest of your patients, keep one set in your *pocket*, one in your *almirah* and one *on order*. That means you have at least Three sets to start with and as each is used up, place an order for replacement.

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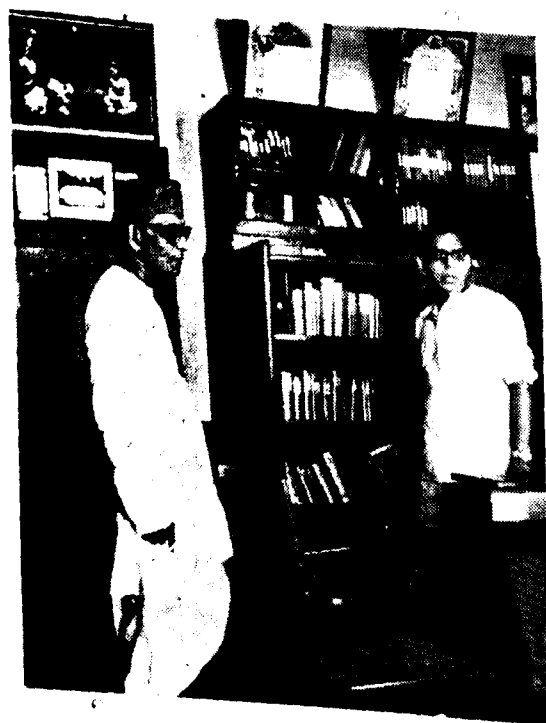
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Sri M. A. Manickavelu, the Hon'ble Minister for Health, Madras State, inspecting the Library of the Indian Institute of Homoeopaths, Kumbakonam, during his visit on 18th February, 58. Dr. V. R. Murty, the Governing Director, is seen explaining.



The Minister inspecting the Laboratory.



Dr. V. R. Murty showing to the Minister the books on Homoeopathy published by the Institute.

STUDY OF HOMŒOPATHIC MATERIA MEDICA

(By Mr. A. V. Subramanian, Salem)

"There is no road to the practice of Homœopathy whether it is the clinical road or the symptomatic road which does not entail close and constant study of the *Materia Medica*". John H Clarke M. D.

All people, big or small, who are genuinely interested in the practice of Homœopathy agree that there is no royal road to success except by a *close* and *constant* study of the *Materia Medica*, emphasis being laid on the two words "Close" and "Constant." No superficial study will serve the purpose; nor can we dispense with the study at any time of our practice throughout our life time. No half-hearted study or just taking it as a hobby as many people do will bring any good either to the practitioner or to the patient. The practitioner should be immersed in the study of the *Materia Medica* throughout the twenty four hours of the day side by side with his practice. He should actually live and breathe in it. Even during his sleeping hours, he should dream about it. Every minute and every hour, every day and every night, he should ponder over the varying symptomatology and the *materia medica* must become part and parcel of the practitioner, as it were. In short, he should have such a personal knowledge of the drug pictures as he has of his most intimate friends and relatives. For example, *Nux Vomica* should appear before him as a typical modern business man, always worrying about his own business, so much engrossed in his own affairs as to care very little for others—even his own kith and kin, taking a pleasure in all modern fancies like cinema shows, parties, and

entertainments, keeping late hours etc. etc. *Pulsatilla* should dance before him as a capricious maid, changeable and contradictory, shedding tears for no apparent cause, etc. etc. *Sulphur* should present the appearance of a spare and stoop-shouldered ragged philosopher so much immersed in his ideas as to forget even the daily routine of work, always wandering hither and thither, etc. etc. *Chamomilla* appearing as a whining and restless child crying without apparent reason, desiring many things and throwing them away immediately after being given them. Such a close study is more or less a necessity for any conscientious practice of homœopathy.

At this stage another bewildering question arises for the beginner. When he goes through a catalogue of homœopathic books, he finds a number of *materia medica*. All of them were apparently written with a purpose and each one of the authors should have taken great pain and devoted much valuable time in compiling them. The philosophic Kent, the fact-finding Hughes, the voluminous Clarke and zealous Farrington—each one of them a master mind in this field—all array themselves before him and he is at a loss to pick up anyone of them immediately. As far as my experience goes, I would advise the beginner to get Clarke's *Prescriber* and Boericke's *Materia Medica* to start with. When advancing further, an inquisitive brain naturally seeks for further literature and more volumes may be added to his library as and when the practitioner requires. But, I think, Clarke's *Prescriber* and Boericke's *Materia Medica* are of immense practical value. The introduction to the *Prescriber* should be studied not once or twice but several times. The author gives therein the essentials of homœopathic practice in a nut-shell and every aspirant should read and re-read it as many times as possible. I am yet to come across such a lucid and concise exposition of homœopathic theory.

Boericke's *Materia Medica*, as I have already stated, is a cent-per-cent practical book. It gives the scheme of the medicines in a succinct way without omitting any details. The essential parts of the narration given under each drug are the introductory paragraph, the mental symptoms and the modalities. For further confirmation we can refer to the symptoms under various organs like head, face, nose, etc. but the importance of the three paragraphs mentioned above cannot be over-emphasised. I have been able to solve many knotty problematic cases by the use of these. Though I am a small man struggling in my own way and though Boericke requires no praise from me, yet I cannot resist the temptation of describing it as a most valuable treasure-house for homoeopaths. Kent's Lectures, Clarke's Dictionary, and Hughe's Pharmacodynamics are all excellent books which the practitioner may advantageously study later.

Finally I must once more stress the fact that a *materia medica* should be the inseparable companion of a practitioner; and whenever he finds himself alone, he must turn over its pages and when he will find something valuable, some hints for which he has been searching for a long time. Such findings may ultimately prove to be a boon to some sufferer or other.

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EGGS HAVE HIGH NUTRITIVE VALUE

By. JANAKI MOSES

Recently I visited a sick friend who told me that the doctor had advised her to eat eggs but that she could not bear the sight of them. Perhaps if the doctor had prescribed some noxious medicine she would have 'stuck' to it willingly.

It is a great pity that there are many who have not yet realised the highly nutritive value of this food. There are others who cannot avail themselves of its benefits because of their ignorance of the art of cooking it.

The egg is a corrective for nutritional deficiency in an illbalanced diet. It is a protective food 'par excellence' and many of the minerals and salts which are lacking in our diet are concentrated in it.

Its protein content is of high biologic value, essential for the growth and repair of the tissues. It is rich in vitamins A, D, E and B complex which help towards clear eyes good digestion, strong nerves, bone development, and prevention of colds and other respiratory infections.

It also contains calcium and phosphorus both necessary for bone building, sulphur for the growth of hair and nails, and most important of all, iron which is indispensable for red blood cells and a security against anaemia, a common ailment among women and children.

MEDICINAL VALUE

The 'white' of an egg has medicinal properties. It is beaten to a thick froth and applied inside the eye in case of

redness, burning and other irritations. This has a soothing effect.

In dysentery the white of a raw egg swallowed on an empty stomach helps towards a cure. Albumen water is used for feeding sick patients and invalids.

The white is also considered good for complexion and therefore used in beauty treatment.

A few hints here about preservation and preparation will, I hope, help to remove the prejudice against eggs and be of value to those who do not know how to get rid of its odour.

The main thing is to make sure that the eggs are fresh. The easiest way to test them is to place them gently in a bowl of water.

A 'good' egg will lie flat at the bottom, whereas a 'bad' one will stand on its end or even float on the surface.

STORING

The next point is to know how to store them. It is best to store eggs with clean shells but they should not be kept too long in water or scrubbed. Wipe them gently with a damp cloth so as to leave intact the protective film or 'bloom' which seals the pores keeping out bacteria and bad odours.

Keep them in a cool place, if possible in a refrigerator. All strong smelling substances should be kept away from them. Keep them covered, as otherwise the moisture in them might evaporate and the eggs would absorb outside odours.

Eggs, as well as other protein foods should be cooked over a moderate fire. If cooked with high heat they become leathery and stiff and lose much of their nutritive value. They should never be overcooked.

MARCH '58

The following recipes will help you eat your eggs with relish.

Hard boiled egg: Heat water in a kettle and when it begins to boil take it off the fire and gently drop in the egg. Keep the egg for two or three minutes and then take it out and put it in cold water.

This helps to remove the shell without sticking. Mash the egg on a plate adding pepper and salt. Eat it with bread. For 'soft' boiled keep the egg in hot water just half the time.

Bull's Eye: Place a teaspoonful of butter, ghee or any oil in a frying pan and when it becomes hot break an egg into it. Let the yolk remain in the centre surrounded by the white.

With the spoon, slightly cover the 'yellow' with the 'white' so that it may not trickle out. When the egg hardens a bit and the border becomes crisp, remove from fire. Sprinkle pepper and salt and serve hot with bread or chappati.

Scrambled eggs: 2 eggs, 2 tablespoons milk. 1 table spoon butter, ghee or oil, pepper and salt to taste.

Beat the egg well adding milk. Season with pepper and salt. Pour it into the frying pan containing melted butter, ghee or oil. Stir continuously over a low fire till it thickens. Serve hot.

Scrambled eggs with tomatoes: 2 eggs 4 medium sized tomatoes, salt and pepper, 1 table spoon fat (ghee, butter or oil).

Pour boiling water over the tomatoes and peel the skin. Beat the eggs and add the mashed tomatoes. Season with pepper and salt and pour into the pan containing melted butter. Stir over a slow fire until it thickens. Serve hot on chappati or toast.

— The Sunday Standard.

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NEWS AND NOTES

THE STATE HEALTH MINISTER VISITS THE INDIAN INSTITUTE OF HOMŒOPATHS: The Hon'ble Mr. M. A. Manickavelu, Health Minister, Madras, visited the Indian Institute of Homœopaths, Kumbakonam, on 18th February, and spent some time inspecting each department. He was much impressed by the efficiency and service rendered in organisation. The Pharmaceutical Laboratory drew his interested scrutiny. He saw the various processes of manufacture of our products, and the working of the automatic Tablet Counting & Filling Machine and the automatic Liquid Filling Machine.

The Hon'ble Minister said that he was quite convinced about the efficacy and cheapness of Homœopathic medicines and the ideal conditions in which they were being manufactured. He said that he would try his best to promote Homœopathic clinics in rural areas.

KUMARI CHARUBALA, whose photograph appears in another page, is the talented daughter of Dr. V. R. Murty, our Managing Editor, Governing Director of the Indian Institute of Homœopaths and Chairman of the Municipal Council, Kumbakonam. She is an eminent *danseuse* and *artiste*, who has given successful displays of Bharatha Natyam classics in various places in India. Along with a batch of students from the Stella Mari's College, Madras she has left by the Air India International Plane on the 8th February to Europe.

She is expected to visit Italy, Switzerland, Germany, France and United Kingdom, where she will give performances.

M. N. R.

HOMŒOPATHY

THE BOMBAY UNREGISTERED HOMŒOPATHS' ASSOCIATION: Mr. R. M. Somasundaram, the Jt. Hon. Secretary, informs us that an Association of the Bombay Unregistered Homœopaths has been formed with a view to approaching the Government of Bombay to reopen the registration for those who could not previously get themselves registered under the Bombay Homœopathic Act, 1951. It is the aim of the Association to bring about a unification of all the unregistered Homœopaths of the Bombay State and also of the merged areas under a common platform and to put up a strong case under a common banner. The Association is also planning to arrange for lectures to be delivered by eminent doctors. The office of the Association is temporarily located at 23, Fathima Manzil, Dr. Maheshwari Road, Near Dongri Police Station, Bombay-9.

DR. K. I. SINGH of Nepal, who has of recent years become almost a legendary hero, we now understand, is a doctor of Homœopathy and practised as such in Burma for eleven years.

ALL—TAMILNAD HOMŒOPATHIC MEDICAL ASSOCIATION: At a meeting of this Association held on the 28th January last at Tiruchi under the chairmanship of Mr. J. S. Ramanuja Ananthar, B. A., B. L., an appeal was addressed to the Government of Madras to establish Homœo Hospitals in rural areas and utilise the services of Homœopaths as Rural Health Assistants and to open Homœopathic Colleges.

PATHEOSIS: Inaugurating the A. P. Academy of Medical Sciences on 27th January last, Mr. D. P. Karmarkar, Union Health Minister, was in a jocular mood and referred to the 'huge controversy' about the relative merits of Allopathy, Ayurveda, Homœopathy and Naturopathy and

said he did not know how many more 'pathies' would crop up during the period of his ministership. He feared he might ultimately develop "Patheosis", which he defined as "diseases arising out of too many pathies".

Again speaking at Trivandrum on 2nd February, Mr. D. P. Karmarkar characterised as 'unfortunate' the prevailing 'battle' between Ayurveda and Allopathy, stated that the Government itself was in a difficult position in deciding between these pathies suggested that the only way out of it was to accept any sound treatment for any ailment, whatever the system.

If only during his ministry, Mr. D. P. Karmarkar would afford equal opportunity to all pathies to demonstrate their usefulness, he would have gone a far way towards resolving these battles.

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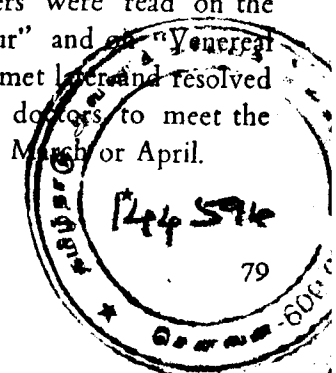
ORIENTAL MEDICINE: In a special article contributed to the "Hindu", Dr. K. Kimura, Professor of Pharmacognosy and Pharmaceutical Botany, Kyoto University, Japan, writes: Japan at present is deeply interested in a thorough study of Oriental medicine. She believes that the indigenous system of medicine which was in vogue in ancient Japan was derived from the medical systems that were prevalent in China which in turn, it is believed, got its knowledge from the Ayurvedic system of medicine in India. She feels that there is a very radical difference in the approach to the cure of a disease between the Eastern system and the Western system. For instance, in the cure of rheumatism the Western system is able to reduce only the pain in a patient by the use of narcotics and other drugs. But the Oriental system aims at not only curing the disease but curing the diseased body. It is a welcome sign that Western systems are now rapidly realising the need for curing the diseased body also and their recent researches in biochemistry and other allied subjects have been directed towards this objective. Since the Western system is rapidly recognising the need to cure not only the disease but also the body, scientists in Japan engaged in the pharmaceutical line have begun a study of the Chinese system and are trying to arrive at conclusions as to the cause for its efficacious nature.

* * *

THE SALEM DISTRICT HOMOEOPATHIC ASSOCIATION, TIRUCHENGODU: The members of this Association met on 15th February when interesting papers were read on the "Philosophy of Homœopathy", "Sulphur" and "Venereal Diseases." The Executive Committee met later and resolved to depute a body of Homœopathic doctors to meet the Health Minister at Madras some time in March or April.

* * *

MARCH '58



KOTTAYAM DISTRICT HOMŒOPATHIC ASSOCIATION: The Silver jubilee Celebrations of this Association was held on 13th February, when Dr. A. R. Menon, the Kerala Health Minister delivered the inaugural address. He said that as Homœopathic remedies were quite cheap and effective the Government had decided to open a Homœopathic Hospital in Trivandrum and that later more such hospitals would be opened in the districts. The State would be prepared to render assistance to persons willing to open and endow Homœopathic Colleges

* * *

"HEALTH AND HYGIENE" BY SRI SWAMI SIVANANDA: (Published by the Yoga-Vedanta Forest University, Sivanandanagar, Rishikesh Price Rs. 4/-). From a healer of bodies, Swamiji has grown into a healer of souls; but his teachings even now insist on the need to possess a healthy body as much as a healthy soul. He is a firm believer in the healthy mind in a healthy body.

The masterly ease with which such abstruse subjects as Physiology and Anatomy, Diseases and Medicines, Public Health and Sanitation are dealt with, so that every householder can have enough knowledge at his finger tips, is quite commendable. All those interested in Health and Hygiene (who is not?) must possess a copy of this useful book.

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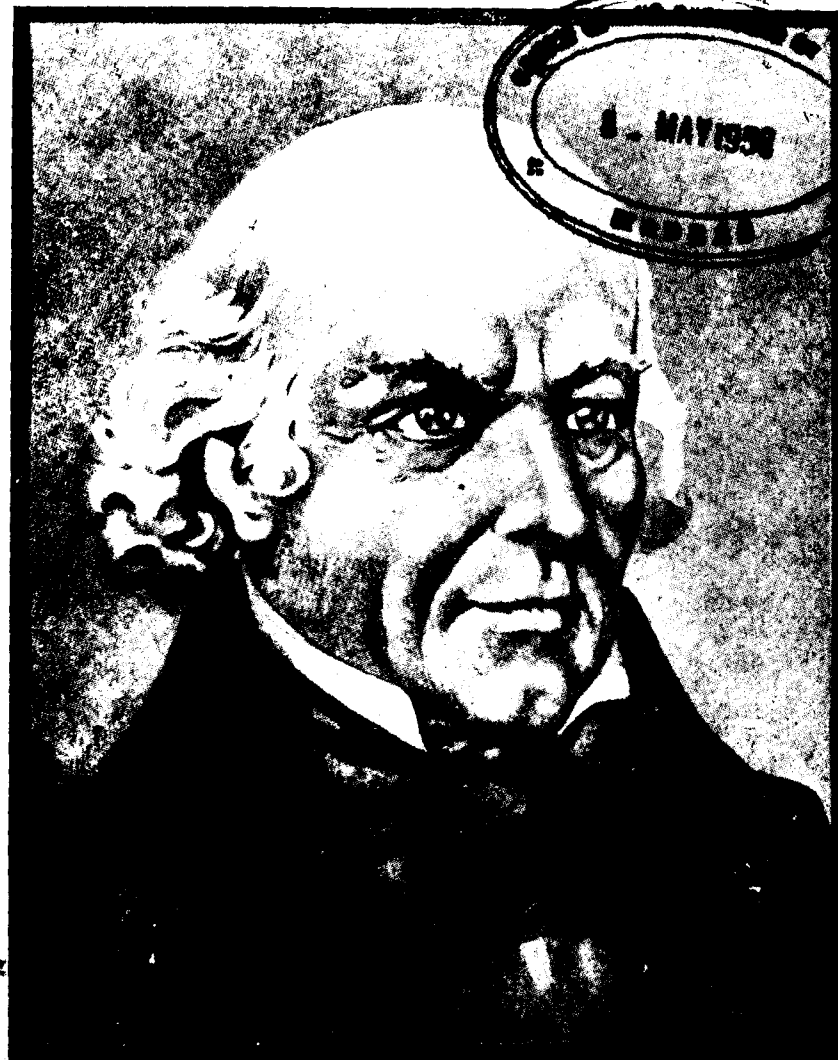
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Managing Editor: Dr. V. R. MURTY

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THE HOMOEOPATHY

VOL. VII

APRIL

Book 4

HAHNEMANN KI JAI

Two hundred and three years after the birth of Dr. Samuel Hahnemann in Germany, we are today happy to be able to sing *Hahnemann Ki Jai*, for, we have at last some really good news for our readers.

On March 9th, Mr. M. A. Manickavelu, Minister for Public Health, Madras, opened a newly constructed block under the National Extension Service Scheme (Second 5-Year Plan) in the Government Hospital, Kumbakonam.

While doing so, he remarked that "the shortage of doctors in the country, with a growing population, can never be met in the foreseeable future by merely depending on the Allopathic system". He said that many medical institutions including Primary Health Centres opened already remained so only on paper for want of doctors. This state of affairs had to be remedied.

The Minister made it clear that the abiding interests of the teeming millions in the land could be best served only by encouraging and more and more popularising at State level the indigenous systems of medicine including Homoeopathy. Already the Government of India had allotted a crore of rupees in the Second 5-Year Plan, for the development of indigenous systems — Ayurveda, Unani, Siddha, Homoeopathy and Naturopathy. A Research Institute has been started in Jamnagar for this purpose. The State Government also was considering

the question of opening a similar Institute to serve the needs of the State. He was sure bright days were in store for these systems.

Continuing, the Minister pointed out that it was a well-known fact that Homoeopathy and other systems had been long exercising a healthy and strong influence on ordinary medical practice and that many remedies thereof were adopted by Allopaths. It was the intention of the Government to organise indigenous systems on a scientific basis and make all systems including Allopathy complementary to each other for common good.

The invaluable knowledge and experience possessed by those practising other systems should have also to be harnessed to serve the medical needs of the people. The Government was deeply considering all these points and a satisfactory solution would be reached soon.

Again, speaking at Coimbatore, on the 16th March the Minister said that indigenous systems of medicine like Ayurveda, Unani and Siddha and also Homoeopathy should be availed of to afford rural medical relief.

Since Mr. M. A. Manickavelu took over the Ministership, a fresh breeze of realism is blowing over the corridors of the Public Health Ministry in Madras. We hope that it is a good augury of vigorous action being taken to enable the millions resident in far-off interior villages to obtain the benefits of medical attention.

Meantime, we wish much strength to the Minister's elbows.

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CARE OF THE EYES

(BY M. N. R.)

His Holiness Sri Swami Sivananda of Rishikesh is par excellence the modern man's guru and saint. He has made it his life business to make the abstruse philosophical aphorisms easily understood by the man in the street and the home and not merely by savants, saints and sanyasins.

After studying Swami Sivananda's expositions, every man feels that, if that is all there is to it, why, I too *can* be religious and *am* religious. Thus, starts enthusiasm and good conduct and good action and one more disciple is added to the thousands who follow Swamiji. Another step, and he renounces the world and joins the order of sanyasins at Sivanandanagar. It all seems so straight and simple the way the Swamiji puts it. Thus, he makes saints out of laymen.

By training a doctor, and by preference a sadhu, who has built up a small empire of holiness and godliness in Sivanandanagar, the Swamiji believes in a healthy soul in a healthy body and is never tired of telling his adherents to take good care of the body that nests the soul and that the one requires as much care and attention as the other. A good sanyasin need not and should not neglect or wantonly allow his body to deteriorate, as the body is the vehicle through which the soul expresses itself.

Hence, the publication of "Health and Hygiene" by the Yoga-Vedanta Forest University, which we reviewed in the last issue. And now, we have the "Care of the Eyes" written by Swami Sivananda himself, (Published by The Yoga Vedanta Forest University, Sivanandanagar, Rishikesh. Price Rs 4/-) which merits more detailed study.

Of all the sense organs, the eyes are the most important and next perhaps to the heart is the hardest-worked. Although formed of parts easily liable to damage, the eyes are always on duty during the waking hours and consequently need ample rest at night. So, our sleep starts with closing of the eyes.

As we said before, Swamiji delights in making abstruse and difficult things easy for the layman to understand and practise. Within the compass of some 339 pages, Swamiji has brought together an immense volume of information, not so readily available to the lay reader. Most of the diseases of the eyes, such as, Blepharitis, Chalazion, Hordeolum, Dacrocystitis, Keratitis Glaucoma, Ophthalmia, to name a few, their causes, prevention and cure are dealt with in such simple, easy English, that any house-holder or layman can read the whole book and not feel the strain of reading a text-book on Ophthalmology.

Almost every year, as often as circumstances permit, Dr. Adhwaryoo, M. B. S., Patan, visits Sivanandanagar and conducts a *Drishti Dana Yagna*, when hundreds of patients are treated free under the care and guidance of Swami Sivananda. Dr. Adhwaryoo is an eye-specialist of more than 25 years experience and has successfully conducted several *Drishti Dhan Yagnas*. He has written a special article on Organisation of Eye Relief Camps, and stresses on points requiring particular care and attention. Capt. G. S. K. Iyer and Dr. Ramjas write on the care of the Eyes. There are special chapters devoted to Ayurvedic, Bio-chemical, Homoeopathic and Naturopathic treatments and Dr. K. M. Agarwal contributes a chapter on Perfect Sight Without Glasses.

There are 25 aphorisms of Swami Sivananda on *How to Preserve the Sight*. We reproduce them below:—

1. Apply Brahmi-amalaka oil on the head and take cold bath.

2. Take a solar eye-bath in the early morning sun, with open eyes for a few seconds.

3. Repeat the Surya Sthuthi and his 12 names in the early morning. Surya or Sun-God is the presiding deity of the eye.

4. Practise Surya Namaskar at sunrise regularly.

5. Face the sun in the early morning. Close the eyes. Gently move the head from side to side. Do this for 5 minutes. This draws the blood to the eyes and relaxes the muscles and nerves.

6. Practise Sirshasan for one minute in the early morning.

7. Practise eye exercises.

8. Keep the book or newspaper at a distance of 12 to 15 inches from your eyes.

9. Do not read in the twilight or in the moonlight or candle-light. Candle-light is unsteady and insufficient.

10. Do not read in a moving train, car or carriage, as it is injurious to the eyes.

11. Avoid small print.

12. Do not read lying in bed or when you are drowsy.

13. Avoid a stooping position in reading, writing or sewing, as undue strain is caused on the eyes thereby. Always lean well back while reading.

14. A sloping desk is preferable to a flat table for writing purposes.

15. When you read, take off the eyes from the book very often and rest them either by closing them or by looking at a distant object preferably the sky.

16. For reading at night use a good lamp with a light blue bulb or shade. Do not allow the light to fall directly on your eyes. Place the lamp at your back.

17. Never use spectacles of another person.

18. Do not look at near objects too long. Rest the eyes by closing them or by looking at a distant object.

19. Look at green vegetation very often.

20. On a solar-eclipse day, do not look at the sun with the naked eyes. Use smoke glasses.

21. Do not look at an intensely bright light for a long time. You will get blindness, if you violate this rule.

22. Do not do needle-work in artificial light. Hold the needle from 12 to 15 inches from your eyes.

23. Splash cold water gently in the open eye 3 times daily. This is very effective in toning the eyes.

24. Protect the eyes from glare, smoke and dust.

25. Do not go out in sunlight suddenly after remaining in a dark room. This is very injurious to the eyes.

This book should form a valuable part of every Homoeopathic Practitioner's reference library.

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In the same way as our body needs vitamins for its proper function a balanced supply of mineral Salts is also needed. A deficiency of these Tissue Salts results in disease, either simple or severe.

TISSUETONA is a combination of all the twelve Tissue Salts according to Dr. Schussler, and the same has been presented in a readily assimilable form. The absorption of *Tissuetona* is direct and immediate. There is no physiological change before absorption.

TISSUETONA is a valuable tonic in all rundown states where debility is marked, especially after serious illness. It can also be used in conjunction with other treatments.

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Indications: In all coughs, acute and chronic, acute & chronic Bronchitis, Irritating & troublesome Cough in Influenza, T. B. etc.

DOSE: One Teaspoonful, three to five times a day for adults. Children half teaspoonful per dose. In very acute and troublesome cough the dose may be doubled if necessary without any bad effects.

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LABORATORY

BAHOLA PHARMACEUTICALS

AND THEN THE FLOODS

DR. MRS. N. A. RADHA

Medical Officer in-charge, Women's and Children's Clinic,
Indian Institute of Homoeopaths

Among the different forms of menstrual disorders, excessive bleeding associated with menstruation, continuing for many days (in rare instances till the commencement of the next period) is viewed as an alarming condition, both by the patient as well as the attending physician. Normally, the menstrual discharge lasts about four or five days varying from two to eight ounces in quantity. It contains more calcium salts than the circulating blood. Under normal conditions, it does not clot nor does it leave stains on clothes when washed. Profuse menstrual discharge, with clots, is a symptom of gross change in the uterus and its appendages (ovaries) or disorderly functioning of the mechanism that controls normal menstruation. This disordered condition is termed *Menorrhagia*. As a rough working definition *Menorrhagia* is also a similar condition, resulting from more or less the same causes and with the same symptoms except that it is unassociated with menstruation. Instances have been observed of the same patient suffering from either due to general or local diseases.

For practical purposes, *Menorrhagia* can be classified as:—

1. Functional *Menorrhagia*
2. Organic *Menorrhagia*
3. Sympathetic *Menorrhagia*

1. Functional Menorrhagia: In this form of *menorrhagia* though the uterus is the instrument, some other factor calls the tune. The normal menstrual function is controlled by the balanced and orderly functioning of the hormones, oestrogen and progesterin secreted by the ovary, and the ovary stimulating hormone of the anterior lobe of the pituitary gland. Any disharmony between these three hormones, occasions menstrual disturbance. To cite an example:— *Menorrhagia* (functional)

is believed to be due to excess of oestrogen and amenorrhea due to deficiency of oestrogen; general debility, excessive emotional excitements, and excessive coition also cause this form of menorrhagia. Speaking generally, women of a plethoric temperament and nulliparous women with an infantile uterus are likely to fall victims to this disorder.

Organic menorrhagia: Married women who had repeated abortions or frequent deliveries, mostly suffer from organic menorrhagia. The excessive flow may either precede some structural change in the uterus or its appendages, or it may follow such changes. However, it positively results from the threatened onset of structural disorganisation of the internal generative organs. Chronic endometritis, cervical erosion, cancer, fibrous tumours or polypus of the uterus and congestion of the uterus and ovaries are the different types of local causes which result in organic menorrhagia. Sub-involution is another condition occasioning excessive flow, which is believed to be due to the loss of tone of the uterine muscles to contract after delivery. Retained portion of the placenta after abortion or delivery is also a factor that contributes to occasional organic menorrhagia in married women. Excessive bleeding during climacteric, though coming under this category, is really not due to any structural change and may often be expected as a normal phenomenon.

Sympathetic Menorrhagia: Apart from functional and structural derangements, general ill-health accounts for excessive menstrual flow. This is treated as a pathological condition. For example, during the course of typhoid fever or inflammation of the lungs, menstruation will be suppressed for some time, and then starts spontaneously and the combination of this physiological condition with the already existing pathology may hasten a fatal termination. On the other hand, in heart disease and high blood pressure cases this excessive bleeding actually gives great relief. Scarletina, erysipelas, typhus and cholera are the other diseases that cause this condition.

Treatment: From the curative point of view, it is a two-fold problem for the physician. At the very outset one has to stop the bleeding and then try to set the course right. From a careful psychological study of the victims of menorrhagia, the

physician can easily understand that such patients, deprived of all sexual and social interests in life are to be seen in a pessimistic frame of mind. This condition itself is capable of aggravating the already existing malady. Therefore, when handling such cases, the first and the foremost duty of the physician is to try to create an atmosphere of peace in her mind by kind advices and try the most prompt and efficient measures to arrest the excessive flow. Once this is done, the patient is more amenable to further treatment aimed at the root causes. Writing from my experience, medicines, such as, *Calc. Carb.*, *Carbo. Veg.*, *Secale Car.*, *Arnica*, *Ustilago*, *Sabina*, etc., are capable of arresting any form of menorrhagia. Conditions like fibroid growths of the uterus, cancer, polypus, etc., in an advanced stage, have to be handled by a surgeon (gynecologist). I was able to effect cures in cases of sub-involution of the uterus by giving *Hydrastis* intrauterine douch and *Hydrastis* internally three times a day. Where the excessive flow through clinical investigations, is found to be due to the retained portion of placenta, *Pyrogen-200x* gives encouraging results. When trying to set her course right, apart from the correct Homoeopathic medicines, the patient has to be put on complete rest and all emotional and sexual interferences avoided and her general health improved by a balanced diet.

MEDICINES: *Aletris Far:* (6x, 30x, Q) is a very good remedy in functional and organic menorrhagia, profuse discharge of dark blood, fullness and weight in the uterine region.

Arnica: 6x, 30x. is effective in sub-involution of the uterus or parts of placenta retained. The flow is bright red in colour, pain in the small of the back extending into the groin.

Arsenicum: 6x, 30x: Menorrhagia in feeble women associated with rheumatism, disorganisation of the uterus or ovaries, in eruptive fevers, the best effort exhausts her. I found the remedy to be very effective in sympathetic menorrhagia.

Bryonia 6x, 30x: Menses too often, and too profuse, of dark-red blood with pain in the back, worse on least motion. Nausea on sitting up and after eating.

Calc. Carb.: 6x, 30x: Prompt and efficient cures can be effected by this remedy, especially in emergencies. To set her course right *Calc. Carb.* 30x can be given three times a day before the commencement of her period as a preventive measure.

Caulophyllum: 30x is the correct similimum when the uterus is soft and relaxed and the flow is excessive.

Erigeron: 30x, 6x: The flow in alarming profuseness attended by pallor and weakness.

Sabina: 6x, 30x: the blood is partly fluid and partly clotted and the pains run from back to front.

Secale Corn.: 6x, 30x: Menses too long standing and violent spasms particularly applicable to thin women.

Ustilago Maydis: 6x, 30x: Menorrhagia occurring at the climacteric period, menses occur too frequently, are too profuse and last too long, one period reaching almost to the commencement of another. This remedy I have tried with success in infantile uterus.

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HOMOEOPATHY CROSSWORDS - I

Dr. S. T. MURTY, Rayavaram, Trichy Dist.

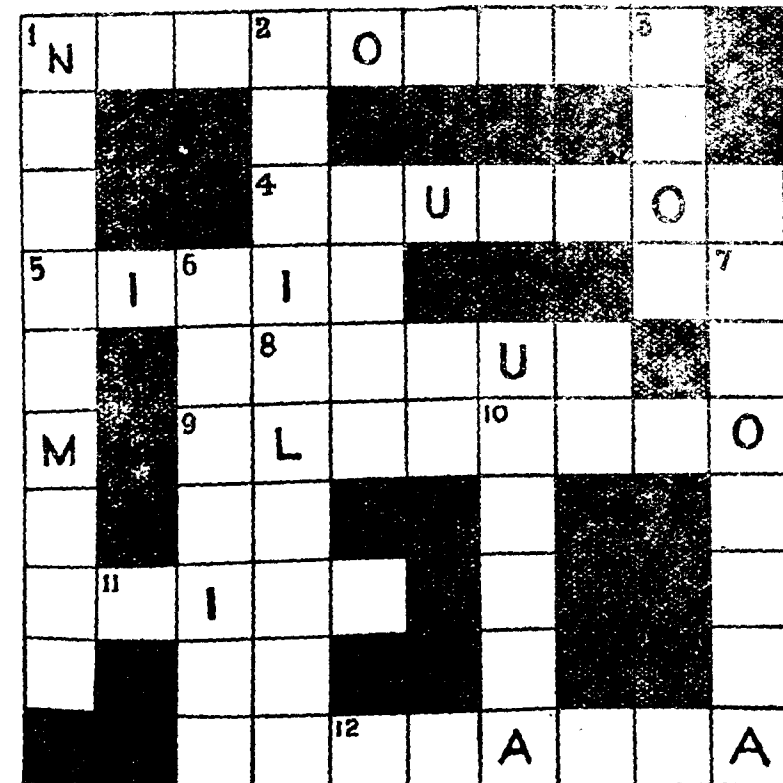
No PRIZES: Solution on page 100.

ACROSS

1. When a case comes to us either from an allopath or a native physician we give few doses of this medicine to change the bad effects of their over dosing.
4. Aggravation when quiet and amelioration from movement is the leading characteristic of this remedy.
5. This is one of our medicines from vegetable kingdom and from its seeds Castor oil is expressed.
8. When the properly selected Homoeopathic remedy does not act, if a dose of this medicine is given, the patient's reactive powers will be roused so that the previous medicine will begin to act.
9. External application of this tincture relieves toothache.
11. Well known Vermicide.
12. ... Orientalis, a wonderful remedy for Asthma.

DOWN

1. A good remedy for patients who are melancholic and depressed in spirits and weep without any cause but if consoled the weeping is increased.
2. Best preventive of small-pox and it is far superior to crude vaccination.
3. ... Socotrina indicated well in piles of blue colour and protruding like a bunch of grapes.
6. This is one of our remedies for Gonorrhoea.
7. For cough, sounding like a saw driven through a wooden board.
10. The chief anti-sycotic remedy.



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NEWS AND NOTES

Kumari Charubala Returns: To felicitate Kumari Charubala on her safe return after her successful tour of Europe the Staff of the Indian Institute of Homoeopaths and the Homoeopathy Press, Kumbakonam, held an interesting function at 6 P.M. on the 12th March, presided over by the Rev. Mother Raphael, of the Holy Angels Convent, Kumbakonam.

After a pleasant Tea Party, the Rev. Mother spoke in Tamil eulogising the achievements of Kumari Charubala, after which, a welcome address was read by Mr. K. V. Swamy, the General Manager, on behalf of the Institute and the Press.

In a graceful little speech, Kumari Charubala narrated her experiences on this her first trip to Europe and made pointed reference to the absence of beggars in the cities she visited there.

Mr. S. Arogyaswami, Director, Sri Rama Vilas Service, Ltd. took this opportunity to announce that the local Rotary Club was actively studying this problem with a view to doing something tangible so far as Kumbakonam was concerned.

Dr. V. R. Murty, in his capacity as Municipal Chairman, offered the whole-hearted cooperation of the Municipal Council if an organised attempt was made.

A delightful Veena performance by Kumari Santha, a student of the Institute, which was much appreciated by the audience, formed a fitting conclusion to the pleasant evening. The elite of the town attended the function.

Kumari Charubala was the recipient of several other welcome addresses in Kumbakonam and she gave two dance performances, one in the Vani Vilasa Sabha and another in the Congress Exhibition grounds. Her interpretation of classic

dances held the audience spell-bound, as, although an amateur, her dance displayed the *finesse* and finish of a talented professional artist.

* * *

Indigenous Medicines and Homœopathy: The annual report of the Union Ministry of Health for the year 1957-58 announces the provision of one crore of rupees for development of Indigenous medicines and Homœopathy under the Second Five-year plan. A further provision of over five crores has also been made in State plans. An adviser has been appointed in the Ministry to advise the Government on development of Indigenous systems of Medicine.

* * *

The Bombay Unregistered Homœopaths' Association: We understand that for the benefit of practising Homœopaths in the newly merged areas of Bombay State under the recent re-organisation of States, the Bombay Government intends to reopen the question of registration of Homœopathic Practitioners under the Bombay Homœopathic Act of 1951. It would appear that only a meagre 1800 have so far been registered under this Act, and that there are several thousands of unregistered Homœopathic practitioners in the old Bombay State itself. It is only fair that when this question is reopened, opportunity should be given to all Homœopathic practitioners in the old, as well as the new, areas of the State to register themselves, if on date they bear the necessary qualifications. Further, it would be an act of wisdom, if on this occasion the qualifications for registration are further liberalised on the lines of the recent draft legislation introduced in the Mysore Legislative Assembly. According to this, any Homœopathic Practitioner who has completed only one year of practice and those practitioners in rural areas who de facto are practising on the date the Act is passed into law may be included in the B list. The Bombay Unregistered Homœopaths' Association has made a representation in this respect to the Public Health Minister, Bombay. The cause is so obviously just that we have no hesitation in hoping that success will crown their efforts.

* * *

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First Andhra Pradesh Homoeopathic Medical Conference:
Presiding over this Conference held at Rajahmundry on the 2nd March last, Dr. D. N. Chatterjee said that the problem of homoeopathy today was not one of recognition by government but one of right vision. The course of study should be such as to absorb new ideas without in any manner adulterating the system.

Dr. Chatterjee said that there were two schools of thought for reorienting homoeopathic education—the Dave Committee report and the plan of Dr. A. B. Roy, Health Minister of West Bengal. He criticised the former as in it lurked the danger of homoeopathy being relegated to the background, defeating the main objective of serving the poor of the country. There was under it also the danger of homoeopathy being merged in allopathy. Dr. Roy's scheme provided facilities for post-graduate researches and study of degree courses for students on fulfilment of certain conditions. "Let us have a probe into both the schemes carefully and squeeze out the essence of both for preparing a practical scheme that will add to the dignity of homoeopathy as a system of treatment." Dr. Chatterjee continued that "we should point out to Government the simple truth that the millions in our villages practically go without treatment, and it certainly makes a sad commentary on the socialistic pattern of our Government. In my opinion, the main solution of the problem of health of the poor millions lies in covering the country with a network of small homoeopathic hospitals and laboratories." Under the scheme every state should have an association with a central

SOLUTION TO HOMOEOPATHIC CROSSWORDS—I

ACROSS

1. NUX VOMICA
4. RHUS TOX
5. RICIN
8. OPIUM
9. PLANTAGO
11. CINA
12. BLATTA

DOWN

1. NATRUM MUR
2. VARIOLINUM
3. ALOE
6. COPAIVA
7. SPONGIA
10. THUJA

association at the top. The State Association should naturally play the vital role in organising colleges, hospitals and laboratories throughout the State. It should embrace in its activities every corner of the State, particularly by establishing small hospitals of 15 to 20 beds with clinical laboratories attached to them in every Union. In order to afford facilities of medical education to distant villages, it would be well to start institutions in the Community Project and National Extension Areas, which are already developed.

Dr. Chatterjee also suggested a common syllabus of study, using regional vernaculars as the medium of teaching.

* * *

Code of Conduct: Our readers will remember that in our December 1957 issue, we wrote an editorial on the Code of Conduct for Homoeopaths and called for comments.

The Salem Homoeopathic Association at a well-attended meeting held on the 23rd February last discussed this Code clause by clause. The members very much appreciated the spirit behind this article, welcoming all the clauses as they stood and were of the opinion that an additional clause, as follows, would be advantageous:—

"I shall not hesitate to exchange with other members of the profession any new ideas based on professional experiences and study which will be beneficial for the advancement of the profession in general."

At the same meeting, it was resolved to convene the First Annual General Meeting of the Association sometime during the first week of June 1958.

* * *

Salem District Homoeopathic Association, Tiruchengode: At the monthly meeting held on the 14th March at Namakkal interesting lectures were delivered on "Anacardium Orientale", "Surgical side of Homoeopathy" and "Influenza".

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The Kurnool District Homœopathic Medical Practitioners Association: At their annual general body meeting this Association decided to urge the Andhra Government to include Homœopathy and to allocate a reasonable amount in the Second Five-year Plan for research, etc., along with other Indigenous Systems of Medicine.

★ ★ ★

The Hahnemann Homeo Institute, Perunna, Changanacherry, celebrated its first anniversary on the 15th March last.

★ ★ ★

Vegetarian Eggs: Replying to a question in the Lok Sabha, the Union Food Minister stated that he would continue publicity through the Press, the A. I. R. and the issue of pamphlets about "Vegetarian eggs" which could be consumed by vegetarians.

The expression "vegetarian eggs", the Minister said, had no scientific connotation. Infertile eggs, which had no life in them, were known as "table eggs" in other countries. The production of such eggs did not necessitate mating.

★ ★ ★

Composition of Milk: The composition of different kinds of milk and of royal jelly, a product obtained from the bee hive, is given below: —

Substance	Percentage content of				
	Water	Protein	Fats	Carbo- hydrates	Ash
Royal jelly	66.1	12.3	5.5	12.3	0.80
Goat's milk	86.3	3.6	4.1	4.3	0.80
Cow's milk	87.8	2.7	3.4	4.7	0.70
Human milk	87.5	0.8	3.74	6.37	0.80

★ ★ ★

Government Homœopathic Dispensaries: The Health Minister of Kerala State recently announced in the Kerala Legislative Assembly that they proposed to start two more Homœopathic Dispensaries this year and give stipends to students for study in Bengal. There should be no prejudice against any system, he said.

APRIL '58

U. P. Homœopathic Board on the new Excise Act: At a special general meeting held on the 17th and the 18th January last, the Homœopathic Medicine Board, Uttar Pradesh, passed the following resolution on the new Excise Act:—

“The greatest shock the Homœopaths of this Province both practitioners and pharmacists (chemists and druggists), have received recently was due to the new Excise Act passed by the Central Government which had made it practically impossible to make any progress in the development of this system of treatment not in this State only, but in the whole of this country. Homœopathic medicines have been classed under the category of Toilet preparations and heavy duties on alcohol have been levied on preparations of Homœopathic medicines. Moreover, such hard restrictions have been imposed upon chemists and druggists for holding licenses for preparation of these medicines that many of the existing druggists and chemists would be forced to put a stop to this popular industry. More so the inter-State trade of Homœopathic medicines has also been made so cumbersome under this new Act that many physicians will suffer heavily in their practice for want of getting right and genuine medicines and consequently the people who come in for the Homœopathic treatment will suffer a great deal”

—“Homœopathy”, Lucknow

*
*
*
Simple Approach: In an editorial dated 28th March entitled “Roads to Health” the *Indian Express* writes as follows:—

“The scientific certitude of allopathy does not stand the individual patient in good stead. The new vistas of diagnosis and treatment which it opens out seem limitless in range and number and medical bills in modern times for the State as well as the individual grow in snowball fashion. Some idea of the possibility of a simpler rival approach in problems of health and cure has been conveyed by Homœopathy”.

Edited, printed & published by Dr. V. R. MURTY, at the Homœopathy Press, Homeo House, Kumbakonam.

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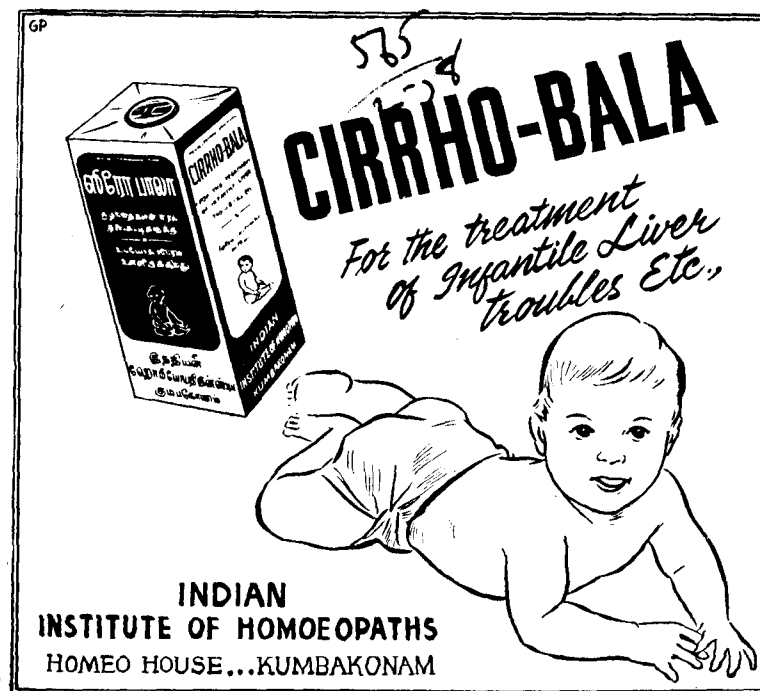
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HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

MAY

1958

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THE HOMOEOPATHY

Vol. VII

MAY

Book 5

FIRST THINGS FIRST

MINISTERS are essentially representatives of the common people and, as such, may be taken to be, on the average, laymen in respect of the thousands of problems that arise in modern governance. Many of them may be, and are, brilliant in their own chosen professions; but, that does not in any way lessen the fact that they have to be largely dependent for decisions on matters of policy on the theses put up by their secretariat.

This is, no doubt, as it should be, but we have felt for quite some time that the secretariats have in several instances misdirected their Ministers with the result that schemes, rightly conceived and deserving success, have got bogged down in a morass of misdirected activities.

We are just now referring to the question of Indigenous Medicine. On the attainment of Independence quite at an early date, Ministers in all the States turned their attention to the need to promote Indigenous Systems of Medicine, such as, Ayurveda, Unani and Siddha as well as Homœopathy. Schools and Colleges were started or expanded and they turned out licentiates and graduates in Indigenous Medicines.

It was then found that almost all of these medical practitioners used allopathic medicines and injections largely in their practice, somuchso that violent agitation started in the colleges of Indigenous Medicine that allopathy should also be taught and that allopathic medicines should be freely made available to them.

Faced with this puzzling situation, at which naturally allopaths gloated with immoderate glee, Government gave way and converted schools of Indigenous into schools of Integrated (we called it "desecrated" in one of our previous issues) Medicine. Integration in slow process of time threatens to become extinction of the effort to promote Indigenous Medicine and all the ebullient enthusiasm at first generated to revive and resuscitate Indigenous Medicine, is fast subsiding into frustrated retrogression, many Ministers also confessing to the fact that faced by the demands of the Indigenous Medicine graduates themselves, they feel powerless. Thus, a sense of inertia is creeping in.

We wonder whether any of them in their busy times have paused to consider why graduates of Indigenous Medicine are disloyal to their tradition, tenets and avocation.

To our mind, there is a simple explanation, which we feel should have been stressed and provided for when first the expansion of Indigenous Medicine was mooted.

Let us see what happens when a graduate of modern medicine comes out of the college and sets up practice. All the pharmacists and medicine manufacturers are at his door for him to pick and choose and prescribe to his patients, so that he is happy and free to concentrate on serving his patients.

On the other hand, when a G. C. I. M. or I. I. M. sets up practice, he cannot concentrate on prescribing medicines to his patients, but he is expected to go in search of medicinal plants and raw products, undergo all the elaborate processes of manufacture on an uneconomic, individual basis and after stocking his own preparations only can he do any practice. Is it fair in such a highly competitive world and profession, to expect him to do all this for himself? There is no wonder that he is dissatisfied and disgruntled and turns to the smoother pathway of prescribing allopathic injections and medicines.

Therefore, it is absolutely necessary that immediate efforts are made by Governments in all States to organise well-equipped laboratories to produce and, distributories to retail, all Indigenous patent remedies for at least such ordinary popular illnesses as,

colds, coughs, fevers, aches, dysentery, diarrhoea, anaemia, etc. which form the bulk of any doctor's general practice. With such a weapon in their armoury readily available at the corner druggists, Indigenous practice will flourish, compete with and even displace foreign-rooted drugs, pharmacies and doctors, with all their evils of monopolised dominance and trade unionism that keep the prices of modern medical consultation and treatment so prohibitively high that the poor man has no alternative but to die without treatment.

If this fester in the body politic has to be burst and health and hygiene promoted at cheaper prices within the reach of the majority of the population, State Governments should first concentrate on opening manufactories of Ayurveda, Unani and Siddha medicines. This should receive top priority even over Research Laboratories which, essential though they be, can produce only long-range effects. Meantime, there is imminent danger of the whole structure of Indigenous Medicine collapsing for want of proper support to their practitioners.

Luckily, Homœopathy is in a better position in this respect. Homœopathic practitioners even in the innermost villages have medicines readily made available to them and do not have to go in search of plants and herbs and then go through the elaborate process of manufacturing. Our Medicine and Sales Department together with its net-work of agents and stockists which has been steadily expanding side by side with our Tutorial Section, is able to meet the Homœopathic requirements of the large number of practitioners in South India, promptly and at short notice.

We have a training, manufacturing and distributing organisation ready at hand, with nearly twenty years' experience at our back, if only the State Government will find out some means of utilising the same to carry the benefits of Homœopathic Medicine right into the innermost villages not so far trodden by organised Medicine.

UNBLOSSOMED BUDS

Dr. Mrs. N. A. RADHA

Medical Officer in-charge, Women's and Children's Clinic,
Indian Institute of Homœopaths

The process of conception starts with the fusion of two microscopic cells (the ovum and the spermatozoon) and terminates with the birth of a live, normal baby of about 7 lbs weight after 40 weeks. The interruption, separation and expulsion of the products of conception at the early period or later period of pregnancy, is termed as an abortion or miscarriage or premature labour, corresponding to the period of its occurrence. Thus, the expulsion taking place, before the 3rd month is termed *Abortion*; between the 12th and the 28th week of gestation, i. e., after the full development of the placenta and before the viability of the child, is termed miscarriage; and after the 28th week and before the full time, *Premature Labour*. Speaking generally, the majority of abortions, from whatever causes or combination of causes, may happen from the second to the fourth months of pregnancy.

VARIETIES OF ABORTION :

From the clinical standpoint, according to the nature and intensity of the influences present, abortion may be:-

1. Threatened abortion
2. Inevitable abortion
3. Complete abortion
4. Incomplete abortion
5. Cervical abortion
6. Missed abortion
7. Febrile abortion



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Indications: In all coughs, acute and chronic, acute & chronic Bronchitis, Irritating & troublesome Cough in Influenza, T. B. etc.

DOSE: One Teaspoonful, three to five times a day for adults. Children half teaspoonful per dose. In very acute and troublesome cough the dose may be doubled if necessary without any bad effects.

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LABORATORY
BAHOLA PHARMACEUTICALS



8. Therapeutic abortion
9. Criminal abortion
10. Habitual abortion

THREATENED ABORTION :

It is characterised by slight blood discharge with colic pains and without dilatation of the cervix. There is every chance for pregnancy to continue, if the proper Homœopathic remedy is administered to check up pains and discharge.

INEVITABLE ABORTION :

This term means that the cervix is dilated, the ovum has been practically separated from the uterus and that it is quite impossible for pregnancy to continue. Free bleeding, frequent and labour-like pains, protrusion of the ovum through the dilated cervix are the main symptoms.

COMPLETE ABORTION :

The products of conception are completely expelled and the cervix contracted normally. The pain subsides and the haemorrhage becomes less.

INCOMPLETE ABORTION :

An abortion is said to be incomplete, when a portion of the placenta or membrane remains unexpelled, causing severe bleeding.

CERVICAL ABORTION :

After the expulsion of the ovum, if it is detained in the cervical cavity, it is termed as cervical abortion.

MISSED ABORTION :

The woman has the symptoms of abortion and the ovum dies in utero. The dead ovum remains for weeks and, in rare occasions, for months, forming a *corneous mole*.

Now, the signs and symptoms of pregnancy subside, the breasts become smaller and the abdomen fails to enlarge corresponding to the period of gestation. At last, pain starts spontaneously and the *corneous mole* is expelled out in the form of a fleshy mass.

FEBRILE ABORTION:

The process of abortion with temperature is termed as febrile abortion.

THERAPEUTIC ABORTION:

Under certain circumstances, induction of abortion or premature labour becomes inevitable to save the life of the mother and it is considered legal.

CRIMINAL ABORTION:

Illegal induction of abortion by drugs or instruments to avoid a legal or illegal pregnancy.

HABITUAL ABORTION:

Women of a particular constitution develop a habitual tendency to abort about the same period in successive pregnancies. Speaking generally, it occurs between the twelfth and sixteenth weeks of pregnancy.

CAUSES:

The possible causes of abortion are numerous and always it is difficult to find out which cause has been operative in many individual cases. Certain types of women undergo the severest form of diseases or the rudest accidental or intentional violence without aborting, whereas in some women it occurs spontaneously or from the slightest provoking causes. However, for practical purposes, the causes of abortion can be classified as,

1. The determining causes of abortion.
2. The predisposing or exciting causes of abortion.

THE DETERMINING CAUSES OF ABORTION:

The causes which actually set the process of abortion in motion is termed as determining causes of abortion. The immediate cause in every case of abortion is uterine contractions. It may result from haemorrhage into the decidua, causing some separation of the delicate attachments of the ovum or due to nervous irritability of the uterus. The presence of a dead ovum is also capable of causing uterine contractions.

PREDISPOSING CAUSES:

The different varieties of causes, either constitutional or abnormal conditions connected with pregnancy itself or other independent influences, capable of interrupting pregnancy, come under this category. These predisposing factors include the following.

(1) UNHEALTHY CONDITION OF THE UTERUS: Conception in an unhealthy uterus generally terminates in abortion or premature labour. Uterine displacements such as, prolapse, antiversion, retroversion, etc., favour the separation and expulsion of the fertilised ovum. Inflammation, ulceration and cancerous disease of the uterus are also considered as sufficient causes of abortion.

(2) PATHOLOGICAL CONDITION OF THE FERTILISED OVUM: The abnormal or diseased condition of the ovum itself may excite the uterus to contractions before the actual death of the ovum. In some cases the ovum may be inherently lacking in the power to develop beyond the early periods of gestation. To cite an example, in molar pregnancy, the ovum becomes blighted due to some degenerative changes and the moles are spontaneously separated from the uterus, after the 4th or 5th month of pregnancy.

(3) **ILL-HEALTH OF THE PARENTS:** Conditions of ill-health in mother or father seem to affect the germinal cells. The toxins associated with syphilis or gonorrhoea, acute fever, or chronic nephritis are examples of such conditions capable of causing abortion. Diseases like, diarrhoea and dysentery in mother, during pregnancy, may produce abortion from sympathetic irritation.

(4) **HORMONAL CONDITIONS IN MOTHER:** It is believed that an improper balance of the sex hormones, progesterone in females, causes abortion.

(5) Physical over-exertion, such as, laborious occupation, bus journey through bad roads, etc., accidental or intentional violence directly applied to the genital tract, severe emotional shock, excessive coition, especially during the first half of pregnancy all seem to be possible cases of abortion.

(6) Drugs used for other purposes or intentionally used for criminal abortion may cause uterine contractions resulting in abortion. The drugs used include all those which stimulate uterine contractions, such as, Sec. Cor., Cimicifuga, Caulophyllum, Apis, Aloe, Quinine, Mercury, etc. Violent acting emetics and purgatives are also capable of causing uterine contractions.

(To be continued)

"Sensations As If —"

A Repertory of Subjective Symptoms

Written by :

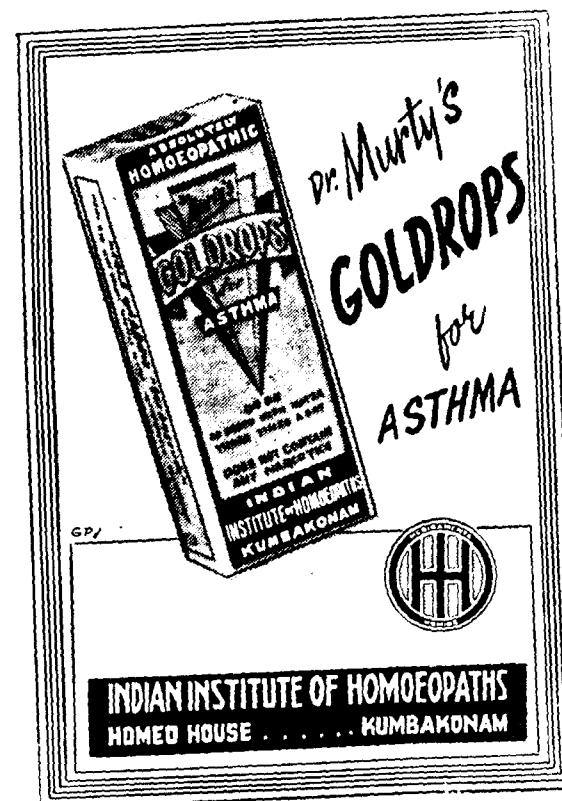
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(TABLETS)

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Dr. V. R. MURTY at Pollachi

The first anniversary of the Pollachi Regional Association of Homoeopaths and the 203rd birthday of Dr. S. Samuel Hahnemann were celebrated at Pollachi on the 20th April 1958. Dr. V. R. Murty, Governing Director of the Indian Institute of Homoeopaths, Kumbakonam, and Chairman, Kumbakonam Municipal Council, presided over the celebrations.

Sri. K. Arumugam, B. Sc, Chairman Municipal Council, Pollachi, hoisted the National Flag.

Sri. V. K. Palaniswamy Gownder, M. L. C., while inaugurating the conference said that many rural dispensaries all over our State remained closed today due to the paucity of medical personnel. He regretted that Allopathic medical men were not willing to go to the villages for want of modern amenities, and that it was for Homoeopaths to organise and serve the people of the villages. He also appealed to the Government to try Homoeopathic treatment for the villages.

Sri C. R. Venkatachari, Hony. Secretary, Coimbatore District Homoeopathic Association, unveiled a portrait of Dr. Samuel Hahnemann.

Dr. V. R. Murty in his presidential address said that there was no use passing resolutions requesting government to recognise Homoeopathy. Instead of depending upon the Government, he said, it was for the Homoeopaths themselves to organise Associations like the present and start free dispensaries in villages where medical aid was sorely needed and prove to the Government that Homoeopathy could well and truly serve the rural populations of the country under the

conditions now obtaining. He advised the Association to take up one or two dispensaries, now remaining closed, and to run them properly for 6 months at the expense of the Association and prove to the Government the merits of this system of Medicine.

Dr. K. T. Alexander, of Palghat and others spoke on various subjects, connected with Homoeopathy.

Dr. K. T. Thomas of Pollachi proposed a vote of thanks. The following resolutions were passed unanimously at the Conference.

This Association regrets to find that a number of rural dispensaries in our State are remaining closed for a number of years for want of qualified doctors to take charge of them. This Association is willing to take up one or two of these dispensaries from the Government and run them for a period of 6 months at the expense of the Association. The Government is requested to take over the dispensaries, and run them as Govt. Homoeopathic dispensaries, if they find at the end of 6 month's period that they are really useful to the people.

The Association appointed a Committee of 7 persons, with powers to co-opt, to raise funds and to start a Homoeopathic Hospital at Pollachi as quickly as possible or at least within 150 days from the 20th.

Mr. V. K. Palaniswami Gounder, M. L. C., Mr. Mahalingam and Mr. Arumugam, were elected President, Vice-President and Treasurer respectively. The following are among the members of the Committee.

Dr. R. V. Chockalingam, B. A., M. B. B. S., Dr. R. Egneswarayyer, L. M. & S., and Dr. K. T. Alexander, L. M. & S., and Sri C. R. Venkatachari of Coimbatore.

HOMOEOPATHY CROSSWORDS

Dr. S. T. MURTY, Rayavaram, Trichy Dist.

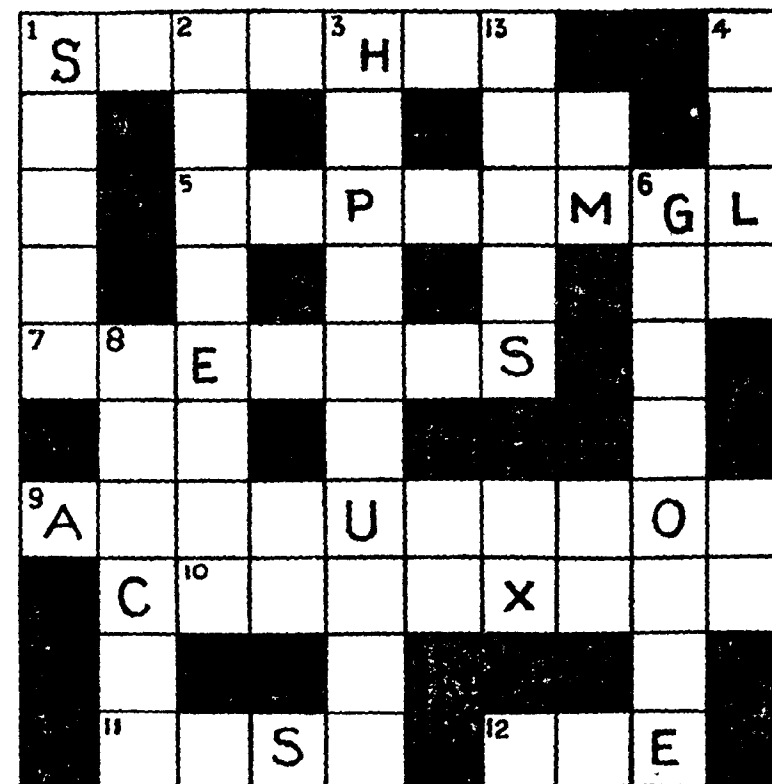
No PRIZES: Solution on page 125

ACROSS

1. When seemingly indicated remedy does not act, we generally try this medicine.
5. Copper and Copper Compounds are named after this in our medicinal names.
7. This remedy assists in overcoming sterility and threatened abortion.
9. In continued fevers, when mental weakness comes first and then bodily weakness, this remedy is well indicated.
10. A powerful sexual sedative and Tonic.
11. A leading homoeopath and the author of "Leaders in Homoeopathic Therapeutics".
12. Ergot is prepared from this.

DOWN

1. This medicine is generally called the washer women's remedy.
2. Potentised venom of the Brazilian rattle snake.
3. This remedy is indicated for fish bone sensation in the throat.
4. Our Natrum Muriaticum is prepared (dynamised) from common.....
6. One of our remedies for blood pressure and heat stroke.
8. Contraction of our potentised dog's milk.
13. Sprue shuffled.



NEWS AND NOTES

SECOND PLAN AND MADRAS INDIGENOUS MEDICINE: On April 5th last, Mr. D. P. Karmarkar, Health Minister, gave an assurance in the Lok Sabha that the claims of Madras State for financial assistance to institutions for the development of indigenous systems of medicine during the second Plan period would be fully honoured. He had already conveyed this assurance to the Health Minister of Madras.

Mr. Karmarkar, also said the Centre would look into the comprehensive scheme which Madras has submitted last year.

Mr. Thangamani asked whether any financial assistance would be given for the proposed college at Tanjore for the development of the Siddha system of medicine. The Minister said Government would consider it.

In the scheme included in the second Plan for the development of Ayurveda, including Siddha, Unani, Homoeopathy and Nature Cure systems, Central assistance was given on the following basis:

Grants-in-aid to meet the recurring cost of maintenance of research beds in selected institutions for approved research schemes at the rate of Rs. 2,000 per bed per annum. Grants-in-aid for *ad hoc* research schemes on merits of each scheme. Grants-in-aid for improving the existing teaching institutions and for the establishment of new teaching institutions in States. Seventy-five per cent of the non-recurring expenditure (including the cost of expansion of college buildings) subject to a ceiling and 50 per cent of the recurring expenditure on the college (and not the hospital) for the period of the second Plan.

CONVOCATION: Delivering the Convocation address on the 20th April to the successful students of the two-year course in Homoeopathy conducted by the Madras Presidency Homoeopathic Association the Vice-Chancellor of the Annamalai University Mr. T. M. Narayanaswamy Pillai, pleaded for adequate State patronage, so that this cheap, useful and efficacious system might cover a wider field than now. The reason for Homoeopathy not acquiring a firmer and wider hold was due not to lack of efficiency but was due to want of recognition by the State.

Mr. Patanjali Sastri, former Chief Justice of India, who presided on the occasion, blessed the out-going practitioners and advised them to settle in villages.

The Secretary of the Association said that they would soon be taking steps for the early establishment of a Homoeopathic College.

HOMOEOPATHIC WING: At the Second Annual General Body meeting of the Hindu Office and National Press Employees' Union held on the 14th April, Dr. R. Jyothirmayam, Director of Indian Institute of Homoeopaths inaugurated the Homoeopathic Wing for the Union members.

DR. S. HAHNEMANN'S BIRTH ANNIVERSARY: The 203rd Birth Anniversary of Dr. S. Hahnemann was celebrated on Sunday the 13th April at Robertsonpet under the joint auspices of the Kolar District Homoeopathic Association and the Samyuktha Karnataka Homoeopathy Medical Association. Sri H. R. Jaichand Bapna, presided.

ANTI-FERTILITY PLANTS: Two medical laboratories in Lucknow are at present examining the efficacy of certain indigenous medicinal plants for regulating child-birth for family planning.

At the Lucknow Medical College Laboratory, nine such plants have been screened for their anti-fertility effect. At the Central Drug Research Institute laboratory, doctors are examining four plants including *Til*, *Alsi* and *Methi*. The drugs prepared from these plants, when tested on rats proved inconclusive.

— THE ANTISEPTIC

CROCUS SATIVUS: Is the source of true saffron. Saffron continued to be expensive because of the small amount of product obtained from a field of bloom. It consists of the heavy mass of orange-red stigmas, and some 1,00,000 plants are needed to gain one kilogram of the dried drug. The odour is characteristic and penetrating, the taste bitter. After chewing, the saliva becomes yellow.

From ancient times saffron was an outstanding medicinal herb, used as a sedative for nervous afflictions, for palpitation of the heart and fainting spells. Folk medicine always used saffron for jaundice and this may seem a strange kind of treatment. However, folk medicine has some innate characteristic traits which are related to Homœopathy and its fundamental opinion; *Similia Similibus Curantur*. A disease like jaundice, which changes the colour of skin and mucus membranes from white to yellow, is supposed to be cured by a yellow herb or plant.

— DR. W. SCHWEIS HEIMER, IN PHARMACEUTIST.

COIMBATORE DISTRICT HOMOEOPATHIC ASSOCIATION, celebrated the birthday anniversary of Dr. Hahnemann on the 10th April. Shri. T. N. Lakshminarayanan, Deputy Collector, presided.

Mr. C. R. Venkatachari has been nominated by the State Government as one the Magistrates to the newly constituted Juvenile Court at Coimbatore.

On the 30th March last, Mr. K. S. Ramasubbier, addressed the members on "The Ear-Otitis and Otorrhœa."

THE BOMBAY UNREGISTERED HOMOEOPATHS' ASSOCIATION: We have received a three page report of this Association's activities, which we regret we are unable to reproduce because of its length. At the same time, we feel we must congratulate them on the energy and correct leadership shown and wish them all success in their efforts. It would be better if unregistered Homœopaths in other States followed this healthy example and made efforts to resuscitate themselves. In a democracy, only the crying child gets the milk. The address of this Association is: 23, Fathima Manzil, Dr. Maheshwari Road, Near Dongri Police Station, Bombay - 9.

SOLUTION TO HOMOEOPATHIC CROSSWORDS No. 2.

ACROSS	DOWN
1. SULPHUR	1. SEPIA
5. CUPRUM	2. LACHESIS
7. ALETRIS	3. HEPAR SULPH
9. ACIDUM PHOS	4. SALT
10. SALIX NIG	6. GLONOINE
11. NASH	8. LAC CAN
12. RYE	13. SPRUE

HOMŒOPATHY TO THE RESCUE

By Dr. W. L. BALFOUR

“AND of course he doesn't believe in operations”. Of all the many misrepresentations which the homœopathic physician is called upon to suffer, this, perhaps the most grievous and groundless, is often advanced by some of his most zealous supporters in their genuine pride. The homœopath *does* believe in operations, when they are necessary; I have had quite a number of cases operated on, but he knows by experience how many cases, for which surgery would appear to be the only possible treatment, make a speedy and excellent recovery.

One patient, a man of 70, began to complain of severe pain in his foot after walking. The condition grew steadily worse and he came to me. The trouble was clear, as the circulation in his foot was obviously failing; he was very thin and withered. The remedy was also clear and I gave him the 200th potency and called in my surgeon friend to watch the case. Soon, the surgeon said, “I can feel the pulse in the dorsalis pedis artery”. The patient went on to a complete cure. Without homœopathy, amputation would have been inevitable. Later, the same trouble threatened in the other foot, but again yielded to his remedy.

A member of the B. B. C. consulted me about her septic jaw. Several weeks before, a tooth had been extracted and now there was widespread sepsis which all the miracle drugs had failed to arrest. She could barely open her mouth or protrude her tongue beyond the teeth; she could not eat and matters were getting desperate.

IMPORTANT ANNOUNCEMENT

For the convenience of our students and Homœopathic practitioners in Madurai Town and surrounding areas we have appointed a stockist for all our preparations, publications, official Homœopathic and Bio-Chemic remedies in Madurai Town.

Similarly we have appointed several stockists in some of the important centres, as under:

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DINDIGUL :	Dr. A. K. Shamshuddin, Malig Stores, Main Road, Dindigul.
TIRUCHIRAPALLI :	Dr. V. Mahadevan, Tiruchy Homœo Medical Stores, 12, Singarathope, Trichy - 8.
TURAIYUR (Trichy Dt.):	Dr. S. Narayana Iyengar, M/s Laxmi & Co., Trichy Road, Turaiyur.
JAYANKONDAM (Trichy Dt.):	Dr. K. B. Rajagopalan, Mudaliar St., Jayankondam, Trichy Dt.
POLLACHI (Coimbatore Dt.):	Grace Homœo Pharmacy, Police Station Road, Pollachi.
RASIPURAM (Salem Dt.):	Dr. R. Balusamy, Balu Pharmacy, Athur Road, Rasipuram
ORAIHANAD :	Dr. K. V. Govindarajan, Kadai Veedhi, Orathanad, Tanjore Dt.

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	for Pregnant Ladies 2.50
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WONDER DRUGS POWERLESS :

Doctors and dentists could not suggest any new treatment to arrest the trouble, as the wonder drugs were powerless. If the jaw became permanently stiff, the consequences would be very serious. Once again the doctrines of Samuel Hahnemann were proved to be true, even though they were promulgated a century and a half ago. The patient went on to a complete cure, a perfect result. All that was needed in the treatment of this case was a reasonable knowledge of the homœopathic materia medica and the appreciation of the fact that, if the right medicine was chosen, it was bound to work.

Not long after this case, a dentist sent me a patient with pus in her antrum. No operation was necessary. The same medicine produced the same result.

A boy of six had a huge abscess on the side of his neck. Under CALC. CARB. 10m, it melted away. If any reader wants to know where it went to, I cannot tell him. If there is any comment upon the danger of the system absorbing all the pus, I can only say that homœopathy takes care of all that and no harm resulted, or ever does, when the medicine does its work.

A lady developed a big abscess of the breast after childbirth and a surgeon was to come and let out the pus. The people got in touch with me and HEPAR SULPH. in a very high potency, was given at midnight. The surgeon had an unnecessary journey next morning.

Then there was the case of the miner who had his hand caught in a revolving rope and nearly pulled off. Two doses of ARNICA c. m. and two of HYPERICUM c. m. were given, and the result dumb-founded the hospital staff who

kept asking, "But haven't you any pain?" His pain ceased after he had taken the remedies.

HOMŒOPATHIC OINTMENT :

A window suddenly crashed down on to another patient's fingers, and her hand could not be released till helpers managed to raise the window. Any reader who has had a similar accident knows the resulting agony and lingering disability, as the hand is out of action for a time. *HYPERICUM* c. m. was instantly given, and, in an hour, there was neither pain nor swelling. The same lady got most savagely burned due to the bursting of a hot water bottle. Homœopathic ointment was at once applied and this dreadful burn healed in a quarter of the time that it would have needed with regular treatment. That was her testimony and she ought to know, as she dressed plenty of burns

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during her hospital career. It was a huge burn, involving the thigh and leg, but homœopathy kept it perfectly clean and there never was a trace of sepsis.

One patient got his hand between two rollers in his bakery and a nail was stripped off. When his wife brought him to me, the shock was just beginning to wear off and the pain coming on. I need hardly say I gave *HYPERICUM* at once and he did not have pain. They told me afterwards they thought it was wonderful, but then homœopathy is wonderful.

Another patient, a lady, grew a terrific left-sided quinsy, as she was accustomed to do occasionally. The left tonsil was involved and any form of heat, external, was intolerable. Any homœopath knows the remedy, of which three doses were given. She only needed one, and, believe it or not, in a few hours she went out to her business. Some months later, she collided with her sister at the dining-room door and got a plate of really hot soup down inside her blouse. She was badly burned but her sister rushed to the cupboard and quickly applied a solution of *URTICA URENS*. She was perfectly all right in a few hours.

I think one of the greatest tributes was paid to homœopathy by the workers in the factory which these ladies owned. When an accident occurred or somebody got scalded, the workers rushed to them at once for homœopathic first aid. They found by experience that homœopathy worked magic in emergencies. I am quite sure that some of these workers did not even know the name "Homœopathy", but they did know that the remedies worked and that was sufficient for them. They did not care if the chemist could not detect any of the drug in a rom potency !

One of my lady patients was a great bowler, and she suddenly displaced the cartilage of a knee while engaged in her favourite pastime. She was on holiday at the time and the local doctor sent her up to see the orthopaedic surgeon in the neighbouring town. The surgeon advised operation and was moved with choler when the lady refused, he kept repeating. "Don't doubt my diagnosis for a moment". She did not doubt his diagnosis at all, but she also did not doubt the power of homœopathy—the cartilage has not come out since she got the proper remedy.

PAIN QUICKLY REMOVED :

A lady was in agony with an attack of gallstone colic, of which she had frequent bouts. Thinking she would see what homœopathy could do, she sent for me and in less than two minutes every vestige of pain had gone and she had never another attack. The remedy she needed was CHELIDONIUM 10m, but other cases of gallstones may require totally different remedies. Indeed, I have found CHELIDONIUM rather uncommon in the treatment of this trouble, but it fitted her symptoms.

(To be continued)

—Homœopathy, of B. H. A.

STINCURA

The most wonderful remedy for scorpion stings and bites of poisonous insects

DIRECTION FOR USE

If the sting or bite is in the left of the body pour one or two drops into the right ear, and *Vice Versa*: pain and discomfort cease immediately. Should slight pain persist apply one drop into the eye in the same manner.

Price per Bottle 50 nP.

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Edited, printed & published by Dr. V. R. MURTY, at the Homœopathy Press
Homeo House, Kumbakonam.

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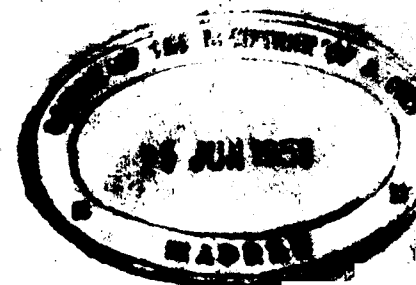


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HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

JUNE

1958

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THE HOMOEOPATHY

VOL. VII

JUNE

Book 6

QUACK, QUACK, QUACKERY.

(Q)UACK, quack, the duck quacks and that is the origin of the word "quack". The duck has a small head compared to the body. It has a long bill, a wide mouth and a loud, strident cry. So, these are the essentials of a quack, whether it is the cry of the duck or if it refers to a quack medicine-man.

Let us see what the dictionary says about a quack—a boastful pretender to skill which he does not possess, especially medical skill. Thus, for this quack also, just like the duck, two qualities are necessary, viz., little knowledge and a great boastfulness.

It will thus be seen that all are not quacks whom doctors call so. There is a common human failing to damn with faint curse what one does not like. More causes and reputations are hurt by unthinking repetition of the same catch-words, of which *quack* is one.

Ask any modern doctor what a quack is. Followers of every other system except his own, he is liable to dub, as "quack" and their practice "quackery", whilst his system of medicine he would proudly call as "scientific". And yet, any thinking man will agree that while modern medicine uses the language of science and scientific terms, as such, it has no scientific method or approach or law to its problems—it is more an art than a science, as the British Journal of Clinical Practice avers.

Science, basically, is knowledge systematised, knowledge arranged under general truths and principles, that which refers to abstract principles. Judged by these standards, modern medicine ceases to be science, whatever else it may be.

Again, there are plenty of quacks among modern doctors too. An L. R. C. P. who could not diagnose *typhoid from an exhaustive urine test report*, an M. B. B. S. who says a patient's liver is quite alright today, and the next day says it is bad, a doctor to whom every cough is a tubercle, is, every ulcer a cancer, every stomachache a suspected duodenal ulcer, to whom every fever of more than four days' duration is a typhoid—all, all of them are none but quacks in spite of their pose and their degrees, for they all have forgotten that while they learned of diagnosis in Medical College, but by their quack and loud manners mislead the public.

This is only to show that there may be, and are quacks, in dignified places also. Consequently, all those whom you condemn as quacks may not really be so.

II

Now, let us turn to another picture. It is only after the advent of Homœopathy that you find the phenomenon of lay doctors. People used to the complicated paraphernalia of modern medicine, Ayurveda or Unani, just cannot understand how otherwise busy people can also find time to study and efficiently practise a medical science to the benefit of humanity. They have made medicine such a highly specialised study that the very simplicity of Homœopathic approach to problems of diagnosis and treatment, flabbergasts them and makes them cynical disbelievers. But, through the decades, so many, many respectable, educated people have studied and irrefutably proved that they too can handle and cure acute and chronic cases with at least as much success as the orthodox whole-time practitioner, that it is too late in the day to question their ability or success. In fact, it is the lay Homœopath that has spread the message and effectiveness of Homœopathy and popularised it as a competitive system of curative medicine.

With the discovery that Homœopathy can be studied and practised by laymen comparatively easily and at much less cost, came the advent of postal tuition. To those used for generations to modern medicine, it is not understandable how such a vast,

technical subject like Medicine could be taught by post in a few hours, and what one has not the patience to understand, one invariably condemns, even alive to one's own conscience.

In a land where there is not even one doctor to ten square miles of territory, Homœopathy came as a God-send. No wonder then that where such facilities exist thousands have flocked to avail themselves of this system of medicine to carry medical success where it is greatly needed. We must record that only in South India postal tuition in Homœopathy has been tried and there it has been a phenomenal success. Considering the results, it is a pity the postal tuition in Homœopathy has not been tried in other parts of India, especially in the regional languages.

To this extent, then, "lay homœopaths" is essentially a problem of South India and not in other parts of the country. When Homœopathic registration was introduced in other States of India, they did not have to face the problem exactly in this form. Those contemplating legislation in Madras State, however, will have to ponder deeply how best to stabilise and utilise the services of these persons to the betterment of humanity.

III

Let us see what is the type of people who have made Homœopathy popular and who undergo postal tuition.

An Assistant Director of Geology, an Accountant-General, a Manager of a senior-most British House of Managing Agents, a Captain of the Indian Army, are some of the types who have popularised Homœopathy by intensive practice over two or three decades. They all were self-taught or learnt by postal tuition.

Casually going through the registers of the INDIAN INSTITUTE OF HOMOEOPATHS, we find a District and Sessions Judge, a retired I. A. S. a Registered Accountant, a B. A., B. L., a Teacher, a Doctor, a Nurse, a Veterinary Doctor, are some of the persons undergoing postal tuition. They represent a cross-section of the best brains of India, who feel a sense of responsibility for the social conditions amongst which they are set and desire to give amelioration as far as they can. They are not merely bent upon a career of making a living.

Then, there is another type of persons applying for student-ship. They may not know English. They have good knowledge of Tamil and are hereditary vaidyas and Hakims; they are also peasant proprietors who have long felt the absence of doctor within three or four miles of their village. They see the sufferings caused by disease and epidemics and feel that Homœopathy can help them. They are willing to study. Many of them having studied, are practising medicine steadily for the last several years. Although some of our urban friends might be shocked at such persons not knowing English being taught medicine, it is high time they realised that the peasant is not in any way inferior to them once the barrier of language is demolished and that they have a fund of commonsense and education in their own way and can grasp things when taught in their own language.

In the new socialistic set-up, education, culture and commonsense are not going any more to be the monopoly of two or three millions of English knowing urban dwellers who are completely at a loss what to do, in country surroundings.

We say that it will be a travesty of words and justice to call these varied types of persons "quacks". They know their limitations, they do not pretend to have knowledge which they do not possess: and within their limitations of knowledge and training are doing quite useful work in areas devoid of any medical help. They certainly are not quacks, because they do not open their mouths wide. A way must be found when new legislation is introduced in Madras State to continue to make use of this material for the benefit of rural medical attention.

IV

Interesting news comes to hand from U. P. In that State, the Homœopathic Medicine Board was holding an examination (C. H. P.) for unregistered Homœopaths of not less than five years' practice and on passing, they were registered.

Now, the students of the National Homœopathic Medical College, Lucknow, went on strike, one of their demands being that this examination should be stopped—meaning thereby that registration should be confined only to the handful, who came

out of this College. Two of the students went on hunger-strike and in an atmosphere of tension created by this situation, the Homœopathic Medicine Board met and had to agree to stop this examination. In an editorial in the Journal of this Board, it was pointed out that

"The stoppage of C. H. P. examination was really a fantastic demand which had to be unwillingly acceded to and has really proved a death-blow to the spread and popularisation of Homœopathy. We may be one with some to say that one qualified man is better than ten quacks, but, we certainly believe that one man, no matter how learned he may be, can neither cope with the needs of the masses nor can popularise the science. Whatever status the science of Homœopathy has attained in this State or the country is not because of the institutionally trained Homœopaths but is certainly due to the efforts of those *non-qualified* (?—Ed.) Homœopaths who held Homœopathy as dear as their Dharma and who stuck to the practice of Homœopathy".

But, all this advice was not listened to. The result of this unfortunate display of immaturity and violence on the part of the students is that Dr. Amar Prakash Arora, the Editor-in-Chief, has resigned from the National Homœopathic Medical College and Hospital immediately after getting the hunger-strike called off.

In its February issue, the Journal adds: "As the students rather those, who were running this movement of our students, did not agree, he (Dr. Arora), being anxious to save the lives of the students on hunger-strike, had no other option but to get the two resolutions passed in the Board without even a single change of comma or full stop in their demands. After getting the above resolutions passed he surprised everybody by resigning from the College and the Board simultaneously. He feels very sore about all that happened during the strike."

That the Homœopathic Medicine Board consisting of mature and experienced Homœopaths should have been treated with such scant courtesy by students is a bad omen for the cause of Homœopathy and indicates that unscrupulous elements take

advantage of any situation to cause disruption. Surely, those who are just studying a profession, are not in a fit position to dictate policy. Our entire sympathies go out to Dr. Arora and the Homoeopathic Medicine Board.

This contretemps notwithstanding, we are happy to find that the attitude of the U-P. State Homoeopathic Medicine Board is the same as ours, viz., that the services of lay-Homoeopaths are a great asset to this modernest of modern medical sciences and that they should be retained in future also in any scheme that may be introduced for the regulation of Homoeopathic practice.

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SIGNS AND SYMPTOMS OF ABORTION

DR. MRS. N. A. RADHA,
Medical Officer-in-charge, Women's and Children's Clinic,
Indian Institute of Homoeopaths.

The positive symptoms of abortion are:—

1. Pain due to uterine contractions.
2. Haemorrhage due to the separation of the ovum.
3. Dilatation of the cervix.
4. Expulsion of the uterine contents.

Generally speaking, after a period of amenorrhoea, resulting from any one or combination of causes, which I have mentioned in my previous article, the process of abortion starts with slight colicky pains in the lower abdomen, mainly in the lumbo-sacral region, with slight vaginal bleeding. Gradually, the pain becomes more and more intense, bearing down in character, resembling that of labour pain and haemorrhage more profuse and free. As the abortion proceeds to an inevitable stage, the pains become intolerable, occurring at regular intervals, the ovum dies and becomes detached from the uterine wall, the cervix becomes dilated and at last a portion or whole of the uterine contents is expelled along with profuse haemorrhage. And now, the pains stop, bleeding is less, the cervix contracts normally and this process of abortion is complete. However, it has to be realised that the bleeding of abortion may occasionally be severe and even fatal, especially from an incomplete abortion, when a portion of the placenta or ovum remains in the uterus. The possible risks of abortion is comparatively less in the early weeks of pregnancy than in a more advanced stage. Under certain circumstances, according to the nature and violence of the predisposing causes by which an abortion is occasioned, apart from the above symptoms, shivering, nausea, and vomiting, palpitation, temperature and anorexia may precede.

DIAGNOSIS: When a woman gives a history of one or two months of amenorrhoea, followed by slight pain in the lower abdomen with slight vaginal bleeding, the physician has first to determine whether it is an impending abortion or the recurrence of a suppressed menstruation. A careful bimanual examination will reveal that the cervix is not dilated, the uterus neither enlarged in size, nor changed in shape and the vaginal bleeding is unconnected with the products of conception, in case of dysmenorrhoea. On the contrary, intolerable pains with dilatation of the cervix and profuse bleeding is definite sign of abortion. Once the existence of pregnancy is determined from the nature and violence of symptoms present, the physician has to find out whether the abortion is inevitable or threatened. The main symptoms of an inevitable abortion are:—

1. Profuse bleeding with dilatation of the cervix through which the ovum protrudes.
2. A portion of the products of conception is expelled along with the haemorrhage.
3. Repeated attacks of haemorrhage.
4. The uterus becomes smaller in size.
5. Offensive discharge with temperature indicating sepsis.

An abortion has to be differentiated from a molar pregnancy, tubal pregnancy or uterine tumour for all of which surgical interference is necessary under such conditions of vaginal bleeding.

TREATMENT: The main risk of abortion is profuse haemorrhage which at times becomes fatal. Therefore, if a physician is called on to treat a case of abortion, either he must arrest the haemorrhage and promote pregnancy or complete the process of abortion, arrest haemorrhage and save the mother. Before actually administering a remedy the physician has to be thorough about his diagnosis as to whether the abortion is inevitable or threatened. If the cause of abortion has been investigated and is due to physical violence or emotional

excitement, the patient should be encouraged to take complete rest with nourishing liquid diet and proper remedy, until bleeding stops.

Viburnum 30x: given at every half an hour interval will decidedly arrest bleeding and promote pregnancy in threatened abortions.

Aconite 30x: Encouraging results were obtained when the abortion was due to fear.

Opium 6x or 30x: also I have tried with success in threatened abortions. My clinical observations show that when the correct homoeopathic remedy is administered, the pain stops, the discharge disappears, a bimanual examination reveals that the cervix is contracted and the uterus gradually increases in size.

From the intensity of the pain and the other symptoms of abortion, if it is diagnosed to be inevitable, *Sabina Q* 10 drop doses every 15 minutes, will empty the uterine contents and arrest the haemorrhage. If the ovum protrudes through the dilated cervix, it can be expressed manually with due aseptic precautions applying supra pubical pressure. A vaginal douche with *Arnica Q* can be given. In the absence of definite indications, such as, profuse and continuous haemorrhage, intolerable pain or other causes for instrumental interference, it is far better to leave to nature to complete the process of abortion, after administering the indicated remedy.

Writing from my clinical experience with habitual abortions I must say that homoeopathic medicines are a boon to women. When I reflect back to the number of cases of habitual abortion I have handled successfully and the many I am treating in my day to-day practice, I can assure prompt relief with our medicines. Every physician must know the different factors responsible for habitual abortion, viz, syphilis, toxæmia, diabetes, displacement of the uterus, cervical erosions, deficiency in diet, other hormonal disturbances, etc. As a woman gives a history of habitual tendency to abort, mostly at the same period in successive pregnancies, the physician must investigate from all points of view, the positive cause for such aborting tendency. Once treatment is meted out to root out the structural,

functional or mechanical disorder, instrumental in causing abortion, there is every chance for pregnancy to terminate normally. Remedies like, *Aletris Far. Q*, *Calc. Carb.* *Sabina Q*, *Puls.*, etc., work miraculously for habitual abortion, when they are homoeopathically indicated.

SEPTIC ABORTION. (Febrile abortion) can be successfully treated with *Pyrogen 200x* every alternate day and *Sac. Lac.* 3 gr. - 3 times a day. Vaginal douche with *Calendula Q*, must be given morning and evening. *Aconite 6x* and *Arnica 6x* are also effective. Within a few days the temperature comes down and the uterus expels its contents and contracts normally.

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An excellent remedy for all affections of the ears, such as pain, ulcerations, fetid discharges, and for removal of hardened wax. Instil one or two drops into ear and plug with cotton wool.

MULLEN OIL may also be used internally, a few drops diluted with water, for irritation of the urinary tract and for dribbling of urine.

Dose: 3 drops three times a day internally.

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NEWS AND NOTES

INTERESTED WORLD WATCHING: On the occasion of the opening of a Homoeopathic Dispensary at R. S. Puram, Coimbatore, on the 21st May last, Dr. V. R. MURTY, our Governing Director, sent a message, an extract from which is reproduced below.

"To Mrs. Elizabeth and Mr. Ananthan, Homoeopathic Doctors, who will be in charge of this Dispensary, in fact, to all Homoeopaths setting up practice nowadays there is one vital message that I wish to deliver, viz., remember that an interested world is watching your efforts and that the usefulness or otherwise of Homoeopathy as a system of Medicine in the peculiar conditions existing in India today will be decided by the high standards of honour, integrity, service and camaraderie, which you bring to the cause of suffering humanity.

"As one who has been in the line for more than 25 years, I wish you all success and offer my blessings for your prosperity and for the prosperity of the Homoeopathic system."

★

★

★

PRACTICAL CLASS: More than two hundred students among whom were some from Malaya and Ceylon attended this year's Practical Class conducted by the Indian Institute of Homoeopaths, Kumbakonam. There were twelve lady-students also.

On 11th May, the students were entertained at a Tea party held by Dr. V. R. MURTY, the Governing Director. On the 16th the students were At Home in return and several of them spoke in highly eulogistic terms of the efficient teaching methods of Dr. MURTY and how much they were benefitted thereby.

BABUJI: We reproduce below a cartoon that appeared recently in the "Indian Express."



We can certainly enjoy a joke against ourselves and so the matter would have rested, but for the fact that the Hon. General Secretary of the Madras Presidency Homoeopathic Association wrote to the *Indian Express* protesting against the cartoon, which brought on a remark from the Editor, that "It was obvious that the satire was against the prevalent attitude to the science and not the science itself."

One should have thought that the Hon. General Secretary should have been the last person to complain about the cartoon, for his own connection with the Homoeopathic profession is purely honorary and part-time.

The cartoon, like an efficient broom has managed to raise a lot of dust in the hands of those trying to clear the ground. We ourselves have always had the greatest respect for all those part-time practitioners, both past and present, who have helped to popularise Homoeopathy. As a matter of fact, our own editorial this month recommends to the Government that some way should be found by which their connection with Homoeopathy could be regularised and made available in the future even as hitherto in the past. Yet, it is only fair to add that where purely matters of a professional nature are concerned, it is the professional practitioners of Homoeopathy who have a great stake in the future of Homoeopathy and as such, must have the main voice in shaping the policies. As part-time practitioners,

their interest and stake in Homoeopathy are only secondary and they must take their natural place in the counsels of the profession, acknowledging the priority of claim of the professionals. After all, it is the head of the dog that decides when the tail should wag and not the other way about. Surely we cannot have the part-timers, organised in "Presidency" and "District" Associations, ordering us about as to what we should do in matters that immediately concern our own future and welfare.

JAVEED HOSPITAL: Dr. T. A. Wajeed, celebrated the fifth anniversary of the Javeed Hospital, Ambur, North Arcot, with great éclat. On this occasion, the photograph of Dr. V. R. MURTY was formally installed in the Central Hall of the Hospital.

INTEGRATION OPPOSED: The Andhra Pradesh Ayurveda Mahamandali at its meeting held at Hyderabad on the 13th May urged the Government of India not to encourage the integration of Ayurveda and Allopathy because it was "unnatural and impracticable and asked the State patronage for the development of "pure and unsullied Ayurveda".

THE SALEM DISTRICT HOMOEOPATHIC ASSOCIATION: The annual general body meeting of the Salem District Homoeopathic Association, Tiruchengodu, was held on 4th May last. It is proposed, we understand, to open a poor Homoeopathic dispensary and Homoeopathic Medical Stores in the Association.

KERALA AND HOMOEOPATHY: "It is the policy of the Government to give as much encouragement to Homoeopathy as to Ayurveda", said Dr. A. R. Menon, Health Minister, presiding over the Silver Jubilee celebrations of the Homoeopathic clinic at Kuzhalmanam, eight miles from Palghat, on 17th May.

BAHOLA (ARNICATED) OIL

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is a Homoeopathic preparation. Regular use of this Oil corrects all scalp disorders and promotes a luxurious growth of abundant, beautiful and healthy hair.

Here is what a regular user, Mr. T. V. N. Allwar, Pulgaon says:-

".....Kindly arrange to send me 2 Big bottles of BAHOLA (Arnicated) OIL. I am using this Oil for the last two months and I find a lot of improvement. Now the hair falling is completely stopped and I got new growth in bald places. I am sure within few months if I apply the above mentioned oil of your Company definitely I will have full growth in my head".

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The Minister said there was already a Government Homoeopathic Hospital at Trivandrum, and it was proposed to open three or four more such hospitals in the State. He added that the Government also intended to institute three or four scholarships to be awarded to students studying homoeopathy.

He expressed the inability of the Government to open a homoeopathic college, but pointed out that if any private agency opened one, the Government would attach a hospital to it.

The Minister revealed that, in order to put down quackery in homoeopathy, the Government intended to introduce a system of licensing and that only those possessing the qualifications to be prescribed, would be granted licence to practise.

It was wrong, he said, to extol one medical system and decry another, because every medical system had its own merits. He personally knew about some hopeless cases cured by homoeopathic treatment.

—“The Mail”

THE POCKET REPERTORY: (Compiled by Dr. P. Sankaran, L. I. M., D. F. Hon. (Lond.), Hon. Physician. Government Homoeopathic Hospital, Bombay. Price Rs. 3. 50 nP. Published by The Homoeopathic Medical Publishers, 13-A, Station Road, Santa Cruz (West), Bombay-23). This Pocket Repertory is intended to be used along with Dr. Sankaran's Card Repertory, but may be used independently by Homoeopathic practitioners as a general repertory. Only, one should learn carefully from the introduction how to make use of it with benefit. Where even costlier Repertories are a strain in practical use, this is a very useful little book and it is well worthwhile

learning how to get the best value out of it. Of course, it is formed on the lines of Boger's General Analysis and claims to be an improvement thereon.

We have also received a small pamphlet entitled *Elements of Homoeopathic Pharmacy* by the same author (price 60 nP.) Students of Homoeopathy might find it interesting and informative.

UP AND UP IN U. P.: Homoeopathy is on the up and up in Uttar Pradesh (U. P.), we are glad to note. A few months ago that State had announced the award of two scholarships of Rs. 2,500 each for Homoeopathic medical graduates for advanced study in U. S. A., or U. K.

The great interest that President Rajendra Prasad evinces in the Homoeopathic system is very well-known.

The late Rai Bahadur Tunki Sah, a leading hardware merchant of Muzaffarpur had, two years ago, donated Rupees two lakhs for founding a college of Homoeopathy. On May 26th Dr. Prasad laid the foundation stone of the Rai Bahadur Tunki Sah College of Homoeopathy and Hospital at Muzaffarpur.

In doing so, Dr. Prasad felt that India, being a poor country, needed less expensive, but beneficial treatment for the majority of the population.

Many people not only believed in Homoeopathy but also derived benefits from it. It must, therefore, receive encouragement and support, he said.

What Uttar Pradesh is doing for Homoeopathy should be an eye-opener for Madras both for the State Government and the philanthropists.

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(A product manufactured under Homoeopathic methods
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HOMŒOPATHY TO THE RESCUE

BY DR. W. L. BALFOUR

(Continued)

While on the subject of stones, a minister was shown by X-ray to have a kidney stone. Word came that he was in the grip of an acute attack, which was nicely finished off with SARSAPARILLA, the only time I have ever successfully used that rather unusual drug. It certainly worked. Two jagged, ferocious looking stones were passed without a trace of pain. If I may be allowed to mention my own experience, homœopathy enabled me to get rid of a kidney stone without operation.

A patient with a bleeding tumour of the bladder—papilloma is the official name—responded nicely to the correct medicine for this trouble, and an aged patient was saved from the surgeon's knife as EUCALYPTUS removed a tumour from the urethra.

Another case was that of a lady who had severe flooding at the change of life. A remedy would hold her for a little and then on it came again, to our dismay. I have found that a deep acting remedy must usually be given in such cases, as the anti-hæmorrhagic medicines will not hold the case. So one of my favourite medicines was given, a remedy which deals with one of the great poisons described by Hahnemann. "It stopped like turning off a tap", was the report over the phone, and that was the last of the flooding.

A boy had a mass of enlarged glands in the neck, which had been there for ten years. They varied in size and had discharged at times. None of the ordinary and obvious

medicines would look at them. There was T. B. in the family history but his system would have none of the seemingly indicated remedies. Finally, a medicine was given which covered a childhood illness and the glands began to shrink and went on shrinking. It was another lesson to me that there is a medicine for the patient, if it can be found.

I never cease to marvel how really large hæmorrhoids have disappeared under homœopathic treatment, with patience and perseverance. Copious bleeding has stopped. I can recall several patients who have no hæmorrhoids now, whereas they used to possess enormous ones. It is all a matter of finding the right medicine, and that is not easy and can be extremely difficult at times. One patient with an ulcerated bowel and bleeding piles is now 95% cured with NUX VOMICA, which is his medicine. His system responds to NUX VOMICA and the local troubles are being healed, which once more shows that homœopathic treatment is individual.

Another interesting case was a lady who had a cyst on the skin of her abdomen, about as large as a walnut. As homœopathy had cured her colitis, she believed it could remove the cyst. With a singular lack of enthusiasm, I gave BARYTA CARB. and, for the first and only time in my life, found this medicine to work. The cyst gradually disappeared.

Another, a lady of 39 found that the womb began to come down. She grew tired of the mechanical means used to keep it up and wondered if homœopathy could avoid an operation. Two doses at long intervals of the obvious medicine—She was quite a nice picture of it—have effected a cure which has lasted for four years. Her sister, coming

near the end of her pregnancy, was seized with a cold and developed the most appalling cough, which simply must be stopped if the case was to continue normally and naturally. The cough was so ferocious that she broke a rib. It was a PULSATILLA cough and she needed quite a few doses of a high potency to get it conquered. The baby is now a healthy girl of 14.

This article has been written to show what homoeopathy can do, what it will and must do, when the correct medicine is given. Most of these cures were literally child's play, the very A. B. C. of homoeopathy. Every homoeopathic doctor gets similar results every year of his life. Many amateur homoeopaths get first-class results in treating injuries. A little boy was struck on the eyelid with a blunt arrow and a patient of mine quickly gave him SYMPHYRUM and the speed of the healing quite impressed the hospital folks.

A WARNING :

And here let me warn lay readers of the very real danger in treating pain in the stomach or abdomen in children. I am obviously not referring to pain caused by recognisable factors, but to pain for which no reason can be annexed. It is perfectly possible to put away the pain of an acute appendix with BELLADONNA or BRYONIA, but that does not mean that the inflammation has necessarily stopped. Children are a law unto themselves and can be very deceptive in illness.

Therefore, unless you are sure of the cause of the pain, do have the child seen by a doctor. Some of my patients have homoeopathic medicines, but I always insist upon a doctor being summoned for abdominal pain. A lady 'phoned' me from another town about her boy who had

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~~are~~ used to examining evidence and most have the cynicism which seems to be born in the successful lawyer. Yet, they trust themselves, their wives and families to homœopathy for the most serious illness. If a client says he does not feel well, he is immediately urged to have homœopathic treatment. One has an eye as glittering and compelling as that of the Ancient Mariner, and a somewhat dazed patient has found himself in my consulting room, still wondering how he got there!

— Homœopathy of B. H. A.

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